

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2011 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ 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:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>LUXOTTICA GROUP PENSION PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>11/11/1952</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>11/11/1952</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>11/11/1952</u>					
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>LUXOTTICA U.S. HOLDINGS CORP.</u> <u>ATTN SCOTT HAKES</u> <u>12 HARBOR PARK DRIVE</u> <u>PORT WASHINGTON, NY 11050-4686</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>11-3491054</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>516-484-3800</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>446130</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>11-3491054</u>	2c Sponsor's telephone number <u>516-484-3800</u>	2d Business code (see instructions) <u>446130</u>	
2b Employer Identification Number (EIN) <u>11-3491054</u>					
2c Sponsor's telephone number <u>516-484-3800</u>					
2d Business code (see instructions) <u>446130</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2012	SCOTT HAKES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2012	VITO GIANNOLA
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") LUXOTTICA GROUP ERISA PLANS COMPLIANCE & INVESTMENT COMMITTEE 12 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050-4686	3b Administrator's EIN 36-4300417 3c Administrator's telephone number 516-484-3800
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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
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5 Total number of participants at the beginning of the plan year	5	40772
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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	17626
b Retired or separated participants receiving benefits.....	6b	3262
c Other retired or separated participants entitled to future benefits.....	6c	19612
d Subtotal. Add lines 6a , 6b , and 6c	6d	40500
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	920
f Total. Add lines 6d and 6e	6f	41420
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	1406

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

1C 1G 3H

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) ☐ Insurance	(1) ☐ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts	(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust	(3) ☒ Trust
(4) ☐ General assets of the sponsor	(4) ☐ General assets of the sponsor

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

a Pension Schedules

- (1)** ☒ **R** (Retirement Plan Information)

(2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1)** ☒ **H** (Financial Information)
(2) ☐ **I** (Financial Information – Small Plan)
(3) ☐ **A** (Insurance Information)
(4) ☒ **C** (Service Provider Information)
(5) ☒ **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
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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 <u>LUXOTTICA GROUP PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>LUXOTTICA U.S. HOLDINGS CORP.</u>	D Employer Identification Number (EIN) <u>11-3491054</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2011</u>
2	Assets:
a	Market value 2a <u>458585291</u>
b	Actuarial value 2b <u>427279941</u>
3	Funding target/participant count breakdown:
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>3506</u> <u>67761367</u>
b	For terminated vested participants 3b <u>19032</u> <u>177419473</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>11778850</u>
(2)	Vested benefits 3c(2) <u>217703343</u>
(3)	Total active 3c(3) <u>18234</u> <u>229482193</u>
d	Total 3d <u>40772</u> <u>474663033</u>
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 <u>6.34 %</u>
6	Target normal cost 6 <u>27081336</u>

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	<u>10/04/2012</u>
Signature of actuary	Date
<u>LORI A. DEVORE</u>	<u>11-05257</u>
Type or print name of actuary	Most recent enrollment number
<u>AON CONSULTING INC.</u>	<u>614-436-8100</u>
Firm name	Telephone number (including area code)
<u>445 HUTCHINSON AVE., SUITE 900</u> <u>COLUMBUS, OH 43235-8619</u>	
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 ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2011
v.012611

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)		218091
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		
9	Amount remaining (line 7 minus line 8)	0	218091
10	Interest on line 9 using prior year's actual return of <u>14.57</u> %		31776
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		23588610
b	Interest on (a) using prior year's effective rate of <u>6.71</u> % except as otherwise provided (see instructions)		1582796
c	Total available at beginning of current plan year to add to prefunding balance		25171406
d	Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections		166656
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	83211

Part III		Funding percentages	
14	Funding target attainment percentage	14	90.00 %
15	Adjusted funding target attainment percentage	15	90.00 %
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	90.00 %
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	7656493				
07/15/2011	7656493				
10/14/2011	7656493				
01/13/2012	7656493				
09/10/2012	28300000				
			Totals ►	18(b)	58925972
				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 54917240
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 3.78%	2nd segment: 6.31%	3rd segment: 6.57%	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 62
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	27081336	
b Excess assets, if applicable, but not greater than 31a	31b		
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	47466303	8741567	
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	35822903	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....			0
36 Additional cash requirement (line 34 minus line 35)	36	35822903	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	54917240	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	19094337	
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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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 <u>LUXOTTICA GROUP PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LUXOTTICA U.S. HOLDINGS CORP.</u>	D Employer Identification Number (EIN) <u>11-3491054</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

AON CONSULTING

22-2232264

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 15 70	ACTUARY	178665	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ENHANCED INVESTMENT TECHNOLOGIES

01-0614895

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MGR	492512	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INSTITUTIONAL CAPITAL

36-3797034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MGR	443986	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

ARTIO GLOBAL INVESTORS

330 MADISON AVENUE
NEW YORK, NY 10017

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MGR	528022	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PNC BANK

25-1211909

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 18 19	TRUSTEE	209048	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

PLANTE & MORAN, PLLC

38-1357951

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	9900	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

HEWITT ENNISKNUPP

100 HALF DAY ROAD
LINCOLNSHIRE, IL 60069

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVEST ADVISOR	42739	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KEATING MUETHING & KLEKAMP PPL

31-0570030

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	LEGAL	73946	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan LUXOTTICA GROUP PENSION PLAN	B Three-digit plan number (PN) ▶ 002
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 LUXOTTICA U.S. HOLDINGS CORP.	D Employer Identification Number (EIN) 11-3491054

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: TCW VALUE ADDED FUND

b Name of sponsor of entity listed in (a): TRUST COMPANY OF THE WEST

c EIN-PN 95-6810619-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: ARTIO GLOBAL INTERNATIONAL EQUITY I

b Name of sponsor of entity listed in (a): ARTIO GLOBAL INVESTORS

c EIN-PN 13-6174048-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 130940586
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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)
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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)
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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)
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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)
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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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>		
A Name of plan <u>LUXOTTICA GROUP PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LUXOTTICA U.S. HOLDINGS CORP.</u>	D Employer Identification Number (EIN) <u>11-3491054</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	39807812	35956493
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)	701971	738167
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3538401	9192582
	(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)	172217143	117706940
	(5) Partnership/joint venture interests	1c(5)	131399	112596
	(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)	65463322	130940586
	(10) Value of interest in pooled separate accounts.....	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(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)	178184804	201372486
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	460044852	496019850

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	554024	406047
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	554024	406047

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	459490828	495613803
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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)	58925972	
(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)		58925972
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	19361	
(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)		19361
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	3726199	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	6124757	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		9850956
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	205010795	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	209021319	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-4010524

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	-3307060	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-3307060
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-3987013
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(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)		67915
c Other income.....	2c		-449007
d Total income. Add all income amounts in column (b) and enter total.....	2d		57110600

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	17704130	
(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)		17704130
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)	3283495	
(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)		3283495
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		20987625

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		36122975
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) ☐ 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 ☐ No

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

(1) Name: PLANTE & MORAN, PLLC

(2) EIN: 38-1357951

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.).....		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.).....		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.)		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.).....		X	
e Was this plan covered by a fidelity bond?.....	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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?		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?		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.).....	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.).....	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?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ Yes ☒ No Amount:

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

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>LUXOTTICA GROUP PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LUXOTTICA U.S. HOLDINGS CORP.</u>	D Employer Identification Number (EIN) <u>11-3491054</u>

Part I	Distributions
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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	<u>0</u>
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): <u>25-1211909</u>		
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	<u>772</u>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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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
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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
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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.
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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: 66% Investment-Grade Debt: 33% High-Yield Debt: 0% Real Estate: 0% Other: 1%

- 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):

Financial Statements and Report of Independent
Certified Public Accountants

Luxottica Group Pension Plan

December 31, 2011 and 2010

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Report of Independent Certified Public Accountants

Luxottica Group ERISA Plans
Compliance and Investment Committee:

We were engaged to audit the financial statements and supplemental schedules of Luxottica Group Pension Plan (the "Plan") as of December 31, 2011 and 2010 and for the years then ended, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

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

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

Plante & Moran, PLLC

October 10, 2012
Cincinnati, Ohio

LUXOTTICA GROUP PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS

December 31, 2011 and 2010

ASSETS	2011	2010
Investments, at fair value:		
Common stock	\$ 117,706,940	\$ 172,217,143
Collective trust	130,940,586	65,463,322
Registered investment companies	201,372,486	178,184,804
Partnerships	112,596	131,399
Money market funds	<u>9,192,582</u>	<u>3,538,401</u>
Total investments	<u>459,325,190</u>	<u>419,535,069</u>
Receivables:		
Accrued investment income	738,167	701,971
Employer contribution receivable	<u>35,956,493</u>	<u>39,807,812</u>
Total receivables	<u>36,694,660</u>	<u>40,509,783</u>
Total assets	496,019,850	460,044,852
LIABILITIES		
Accrued administrative expenses and other liabilities	<u>406,047</u>	<u>554,024</u>
Net assets available for plan benefits	<u><u>\$ 495,613,803</u></u>	<u><u>\$ 459,490,828</u></u>

The accompanying notes are an integral part of these statements.

LUXOTTICA GROUP PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS

Years ended December 31, 2011 and 2010

	2011	2010
Employer contributions	\$ <u>58,925,972</u>	\$ <u>58,728,050</u>
Investment income:		
Interest and dividend income	9,870,317	13,771,723
Net (depreciation) appreciation in fair value of investments	<u>(11,685,689)</u>	<u>36,993,715</u>
Net investment (loss) income	<u>(1,815,372)</u>	<u>50,765,438</u>
Benefits paid directly to participants	(17,704,130)	(20,283,135)
Administrative expenses	<u>(3,283,495)</u>	<u>(3,435,375)</u>
Net increase in net assets	36,122,975	85,774,978
Net assets available for plan benefits:		
Beginning of year	<u>459,490,828</u>	<u>373,715,850</u>
End of year	<u>\$ 495,613,803</u>	<u>\$ 459,490,828</u>

The accompanying notes are an integral part of these statements.

LUXOTTICA GROUP PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE A – PLAN DESCRIPTION

The following description of the Luxottica Group Pension Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the plan document for more complete information.

1. General

The Plan is a noncontributory defined benefit retirement income plan which provides for pension benefits to all non-union employees of the Luxottica U.S. Holdings Corp. and associates in Puerto Rico (the “Company”). The Luxottica Group ERISA Plans Compliance and Investment Committee (the “Plan Administrator”) controls and manages the operation and administration of the Plan. PNC Bank, N.A. (the “Trustee”) serves as the Trustee of the Plan, and together with several investment managers, manages the Plan’s investments. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended.

2. Pension Benefits

Participants with three years of vesting service, as defined by the Plan, are entitled to pension benefits upon retirement. Employees are credited with one year of vesting service for each calendar year they complete at least 1,000 hours of service. Pension benefits are provided to participants based upon years of vesting service and compensation. Retirement benefits are paid to pensioners or beneficiaries in various forms, including single life annuities, joint and survivor annuities and a lump-sum payment option.

NOTE B – SUMMARY OF ACCOUNTING POLICIES

1. Basis of Accounting

The accompanying financial statements have been prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

2. Use of Estimates

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

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE B – SUMMARY OF ACCOUNTING POLICIES (continued)

3. Risks and Uncertainties

The Plan utilizes various investment securities including common stocks, collective trusts, registered investment companies, and partnerships. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

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

4. Investment Valuation and Income Recognition

Investments are reported at fair value which is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note F for a discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation/(depreciation) in fair value of investments includes the plan's gains and losses on investments bought and sold as well as held during the year.

5. Expenses

Administrative expenses are paid by the Plan or the Company, as provided in the Plan Document. The Plan Sponsor provides accounting and other administrative services to the Plan at no charge.

6. Payment of Benefits

Benefit payments to participants are recorded upon distribution.

7. Subsequent Events

The Plan Administrator has evaluated subsequent events through October 10, 2012, the date the financial statements were available to be issued. The Plan Administrator is not aware of any subsequent events that would require recognition or disclosure in the Plan's financial statements.

NOTE C – FUNDING POLICY

Contributions to provide benefits under the Plan are made solely by the Company. The Company's funding policy is to make cash contributions to the Plan in accordance with amounts determined by the Plan's independent actuary. The Company met the minimum funding requirements of ERISA for the years ended December 31, 2011 and 2010. The latest actuarial valuation was prepared as of January 1, 2012 using the projected unit credit cost actuarial method.

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE D – ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments and lump-sum distributions that are attributable, under the Plan's provisions, to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired participants currently receiving benefits, (2) terminated vested participants, and (3) vested active participants, and in all cases, payment of the above listed benefits to beneficiaries of employees who have died. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The actuarial present values of accumulated plan benefits as of January 1 are as follows:

	2012	2011
Vested benefits:		
Retired participants including beneficiaries currently receiving payments	\$64,588,532	\$57,628,886
Other participants	<u>362,823,530</u>	<u>314,756,833</u>
Total vested benefits	427,412,062	372,385,719
Nonvested benefits	<u>12,505,244</u>	<u>13,442,195</u>
Total actuarial present value of accumulated plan benefits	<u>\$439,917,306</u>	<u>\$385,827,914</u>

The changes in the actuarial present value of the Plan's accumulated plan benefits for the years ended January 1 are as follows:

	Year Ended January 1, 2012	Year Ended January 1, 2011
Actuarial present value of accumulated plan benefits at beginning of year	\$385,827,914	\$358,782,974
Increase (decrease) due to:		
Benefits accumulated – net	17,933,643	19,421,154
Benefits paid	(17,704,130)	(20,283,135)
Interest due to the decrease in the discount period	30,171,692	27,906,921
Changes in actuarial assumptions	<u>23,688,187</u>	<u>0</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$439,917,306</u>	<u>\$385,827,914</u>

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE D – ACCUMULATED PLAN BENEFITS (continued)

The change in assumption in 2011 is the result of a change in the mortality assumption, a change in the interest rate assumption from segment rates as of September 2010 to segment rates as of September 2011, a change in the expected return on assets and a change in assumed retirement rates.

The significant actuarial assumptions used in the January 1, 2012 and 2011 valuations were:

- Actuarial cost method: Standard unit credit
- Mortality: IRS 2012 RP-2000 Annuitant/Non-Annuitant Mortality table (2012) and IRS 2011 RP-2000 Annuitant/Non-Annuitant table (2011)
- Weighted average retirement age: 62
- Investment return: 7.50% (2012) and 8.00% (2011)
- Interest crediting rate: 4.01%
- Retirement: Various retirement ages are assumed ranging between 55 and 73

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

NOTE E – INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED)

The following is a summary of the unaudited information regarding the Plan as of December 31, 2011 and 2010, and for the years then ended, included in the Plan's financial statements and supplemental schedules that was prepared by or derived from information prepared by the Trustee, and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2011	2010
Investments – at fair value		
Common stock	\$117,706,940	\$172,217,143
Collective trust	130,940,586	65,463,322
Registered investment companies	201,372,486	178,184,804
Partnerships	112,596	131,399
Money market funds	<u>9,192,582</u>	<u>3,538,401</u>
Total investments	<u>\$459,325,190</u>	<u>\$419,535,069</u>
Receivable – accrued investment income	<u>\$ 738,167</u>	<u>\$ 701,971</u>

For the years ended December 31, the Plan's interest and dividend income consisted of the following:

	2011	2010
Interest and dividend income:		
Common stock	\$3,726,199	\$3,063,624
Registered investment companies	6,124,757	10,692,053
Money market funds	<u>19,361</u>	<u>16,046</u>
Total interest and dividend income	<u>\$9,870,317</u>	<u>\$13,771,723</u>

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE E – INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED) (continued)

The Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) during 2011 and 2010 appreciated (depreciated) in value by \$(11,685,689) and \$36,993,715, respectively, as follows:

	2011	2010
Net appreciation (depreciation) in fair value of		
Investments:		
Collective trust	\$(7,430,311)	\$(10,214,291)
Common stock	(2,383,225)	22,804,955
Partnerships	(18,622)	(8,871)
Registered investment companies	(1,853,531)	24,411,922
	<u>\$(11,685,689)</u>	<u>\$ 36,993,715</u>

The Plan's investments, which represented 5 percent or more of net assets available for benefits as of December 31, are as follows:

	2011	2010
PIMCO Funds Total Return Bond Fund Institutional Class	\$152,504,482	\$132,663,207
NT Collective Russell 1000 Index Fund	\$69,288,498	*
iShares TR Russell 2000 Index Fund ETF	\$48,868,004	\$45,521,597
BlackRock ACWI EX US Superfund	\$33,858,137	*
Artio International Equity II Group Trust Fund	\$27,793,951	\$65,463,322

*Investment represents less than 5 percent of the Plan's net assets at the specified date.

All information included in the supplemental schedules and Note F has been certified by the Trustee and has not been audited.

The Plan's independent certified public accountants did not perform auditing procedures with respect to the information in this footnote, except for comparing such information to the related information included in the financial statements and supplemental schedules.

NOTE F – FAIR VALUE MEASUREMENTS

The authoritative guidance establishes a framework for measuring fair value that provides a hierarchy that prioritizes into three levels the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under U.S. GAAP guidance are described below:

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE F – FAIR VALUE MEASUREMENTS (continued)

- | | |
|---------|--|
| Level 1 | Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets and liabilities that the Plan has the ability to access at the measurement date. |
| Level 2 | <p>Inputs to the valuation methodology include</p> <ul style="list-style-type: none">• Quoted prices for similar assets or liabilities in active markets;• Quoted prices for identical or similar assets or liabilities in inactive markets;• Inputs other than quoted prices that are observable for the asset or liability;• Inputs that are derived principally from or corroborated by observable market data by correlation or other means. <p>If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.</p> |
| Level 3 | Inputs to the valuation methodology are unobservable and significant to the fair value measurement. |

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

Following is a description of the valuation methodologies used for the Plan's assets measured at fair value.

Collective trust: Valued at the closing net asset value ("NAV") of the units held by the Plan at year end based on information reported by the Trustee.

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

Registered investment companies: Valued at the closing price reported on the active market on which the individual funds are traded.

Partnerships: Valued at the Plan's share of the total partnerships' capital as of the most recent audited financial statements at the Plan's year end.

Money market funds: Valued at a NAV of \$1 per share, as reported by the Trustee.

The preceding methods described may produce a fair value that may not be indicative of net realizable value reflective of future fair values. Furthermore, although the Plan Administrator believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE F – FAIR VALUE MEASUREMENTS (continued)

The following table summarizes the Plan's investments by level within the fair value hierarchy as of December 31, 2011 and December 31, 2010.

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
December 31, 2011				
Common stock:				
U.S. large cap growth	\$63,501,717	\$ -	\$ -	\$63,501,717
U.S. large cap value	54,205,223	-	-	54,205,223
Investment funds:				
International collective trust	-	61,652,088	-	61,652,088
U.S. large cap index	-	69,288,498	-	69,288,498
Money market funds	-	9,192,582	-	9,192,582
Registered investment companies				
U.S. small cap mutual fund	48,868,004	-	-	48,868,004
Fixed income mutual fund	152,504,482	-	-	152,504,482
Limited partnerships	<u>-</u>	<u>-</u>	<u>112,596</u>	<u>112,596</u>
Total Investments	<u>\$319,079,426</u>	<u>\$140,133,168</u>	<u>\$112,596</u>	<u>\$459,325,190</u>
December 31, 2010				
Common stock:				
U.S. large cap growth	\$86,482,014	\$ -	\$ -	\$86,482,014
U.S. large cap value	85,735,129	-	-	85,735,129
Investment funds:				
International collective trust	-	65,463,322	-	65,463,322
Money market funds	-	3,538,401	-	3,538,401
Registered investment companies				
U.S. small cap mutual fund	45,521,597	-	-	45,521,597
Fixed income mutual fund	132,663,207	-	-	132,663,207
Limited partnerships	<u>-</u>	<u>-</u>	<u>131,399</u>	<u>131,399</u>
Total Investments	<u>\$350,401,947</u>	<u>\$69,001,723</u>	<u>\$131,399</u>	<u>\$419,535,069</u>

Investments valued at NAV as of December 31, 2011 consisted of the Artio International Equity II Group Trust Fund, BlackRock ACWI EX US Superfund and NT Collective Russell 1000 Index Fund, collective trust funds (collectively "CTF"), and BlackRock Liquidity Funds and Merrill Lynch Institutional Money Market, Money Market Funds (collectively "MMF"). The CTF seek long-term growth of capital by investing in a wide variety of equity securities issued throughout the world. The MMF strategy is to maintain a stable \$1 unit price, but it cannot guarantee that it will be able to do so. The yield of the MMF will fluctuate. The MMF invests in high-quality, short-term money market securities to obtain as high a level of current income as is consistent with the preservation of capital and liquidity.

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE F – FAIR VALUE MEASUREMENTS (continued)

Investments valued at NAV as of December 31, 2010 consisted of the Artio International Equity II Group Trust Fund, a collective trust fund and BlackRock Liquidity Funds and Merrill Lynch Institutional Money Market, Money Market Funds.

The NAV of the MMF is determined using the market value or fair value if market data is unavailable, of the underlying securities. The funds allow for daily liquidity with 3-5 days notice required for redemption.

The NAV of the CTF is determined using the market value or fair value if market data is unavailable, of the underlying securities. Were the plan to initiate a full redemption of the Artio International Equity II Group Trust Fund, the investment advisor reserves the right to temporarily delay withdrawal from the trust for up to 12 months in order to ensure that securities liquidations will be carried out in an orderly manner. A full redemption of the BlackRock ACWI EX US Superfund requires three days' notice, and under terms of the contract, the trustee has the right to suspend redemptions in certain situations in order to ensure that securities liquidations will be carried out in an orderly manner. No restrictions exist with respect to any redemption of the NT Collective Russell 1000 Index Fund. There were no unfunded commitments of the CTF as of December 31, 2011 and 2010.

The Plan's policy is to recognize transfers between levels of the fair value hierarchy as of the end of the reporting period. There were no significant transfers between levels of the fair value hierarchy during 2011 and 2010.

The following table reconciles the beginning and ending fair value of the Plan's Level 3 investment for the years ended December 31, 2011 and December 31, 2010.

	Partnership	
	2011	2010
Balance, beginning of year	\$131,399	\$141,345
Unrealized gains/(losses)	(18,622)	(8,871)
Purchases, sales, issuances, and settlements, net		
Purchases	--	--
Settlements	(181)	(1,075)
Balance, end of year	<u>\$112,596</u>	<u>\$131,399</u>

NOTE G – EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund. The Company also pays for various administrative fees on behalf of the Plan.

LUXOTTICA GROUP PENSION PLAN (CONTINUED)

NOTES TO FINANCIAL STATEMENTS

December 31, 2011 and 2010

NOTE H – FEDERAL INCOME TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated April 5, 2010, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (“IRC”). The Plan Administrator believes that the Plan is currently designed and is being operated in compliance with the applicable requirements of the IRC and the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan’s financial statements.

In accordance with guidance on accounting for uncertainty in income taxes, management evaluated the Plan’s tax position and does not believe the trust has any uncertain tax positions that require disclosure or adjustment to the financial statements. The plan administrator believes the Plan is no longer subject to tax examinations for years prior to 2008.

NOTE I – PLAN TERMINATION

Although it has not expressed any intention to do so, the Company has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of Plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder and the Plan Document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (“PBGC”) if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor’s pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan’s termination, subject to a statutory ceiling on the amount of an individual’s monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan’s net assets to provide those benefits, the priority of those benefits to be paid and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty while other benefits may not be provided for at all.

SUPPLEMENTAL SCHEDULES

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common stock</u>	<u>Shares</u>		
	ACCENTURE PLC CLASS A	8,100 \$	473,648 \$	431,163
	COOPER INDUSTRIES PLC	1,100	60,636	59,565
	COVIDIEN PLC	22,250	886,939	1,001,473
	COVIDIEN PLC	2,700	116,068	121,527
	ACE LIMITED	23,750	1,398,599	1,665,350
	ABBOTT LABORATORIES INC	5,800	301,282	326,134
	AETNA INC NEW	1,500	60,867	63,285
	AGILENT TECHNOLOGIES (IPO)	5,000	226,440	174,650
	AIRGAS INC	500	34,287	39,040
	ALLERGAN INC	3,900	317,563	342,186
	ALTERA CORP	13,600	514,350	504,560
	ALTRIA GROUP INC	59,100	1,320,601	1,752,315
	AMAZON COM INC	1,100	220,888	190,410
	AMERICAN EXPRESS CO	6,600	311,995	311,322
*	AON CORP	1,700	76,203	79,560
	APPLE INC	5,700	1,006,713	2,308,500
	APPLIED MATERIALS INC	108,050	1,478,220	1,157,216
	ARCHER DANIELS MIDLAND CO	41,550	1,459,042	1,188,330
	AUTOMATIC DATA PROCESSING INC	21,200	1,057,315	1,145,012
	AUTOZONE INC	2,000	408,957	649,940
	AVALONBAY COMMUNITIES INC REIT	3,000	374,191	391,800
	BB&T CORP	51,800	1,260,601	1,303,806
	BCE INC	44,650	1,171,364	1,860,566
	BAKER HUGHES INC	18,100	1,183,824	880,384
	BALL CORPORATION	12,900	443,673	460,659
	BARD C R INC	7,700	760,578	658,350
	BAXTER INTERNATIONAL INC	16,900	947,984	836,212
	BECTON DICKINSON & CO	3,300	262,737	246,576
	BED BATH AND BEYOND	600	36,650	34,782
	BIOGEN IDEC INC	10,600	865,925	1,166,530
*	BLACKROCK INC	6,950	1,206,352	1,238,768
	BORG WARNER INC	700	43,779	44,618
	BOSTON PPTYS INC REIT	5,000	481,907	498,000
	BRISTOL MYERS SQUIBB CO	9,700	282,101	341,828
	BROWN FORMAN CORP CLASS B	600	36,985	48,306
	CF INDUSTRIES HOLDINGS INC	3,400	448,587	492,932
	C.H.ROBINSON WORLDWIDE INC	4,500	336,558	314,010
	CSX CORP	20,000	458,170	421,200
	CABOT OIL & GAS CORP COM	4,400	288,942	333,960
	CAPITAL ONE FINANCIAL CORP	25,200	1,111,453	1,065,708
	CATERPILLAR INC	15,000	1,433,518	1,359,000
	CELGENE CORP	1,500	95,724	101,400
	CERNER CORP	13,100	840,050	802,375
	CHEVRON CORPORATION	8,400	842,861	893,760
	CHEVRON CORPORATION	2,250	161,997	239,400
	CHIPOTLE MEXICAN GRILL CL A	2,100	639,569	709,254
	CHUBB CORP	1,200	80,076	83,064
	CISCO SYSTEMS INC	124,250	2,052,563	2,246,440
	CITRIX SYSTEMS INC	2,600	130,291	157,872
	COACH INC	1,500	93,418	91,560
	COCA COLA CO	18,100	1,096,280	1,266,457
	COCA COLA CO	15,300	855,959	1,070,541
	COGNIZANT TECHNOLOGY SOLUTIONS	4,500	180,136	289,395
	COLGATE-PALMOLIVE CO	2,300	206,616	212,497
	CONSOL ENERGY INC	100	5,023	3,670
	CONSOLIDATED EDISON INC	1,200	71,529	74,436
	COSTCO WHOLESALE CORP	2,000	164,486	166,640
	DANAHER CORP	1,200	57,107	56,448
	DAVITA INC	1,100	88,669	83,391
	DIRECTV CLASS A	23,100	940,849	987,756
	DOLLAR TREE INC	900	74,427	74,799

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common Stock</u>			
	DOMINION RESOURCES INC VA	10,000	502,412	530,800
	DR PEPPER SNAPPLE GROUP INC	1,100	41,912	43,428
	DUPONT E I DE NEMOURS & CO	3,400	169,793	155,652
	EMC CORP	1,400	33,971	30,156
	EQT CORPORATION	3,800	222,727	208,202
	EASTMAN CHEM CO	600	28,121	23,436
	EBAY INC	1,200	37,097	36,396
	ECOLAB INC	400	22,376	23,124
	EL PASO CORPORATION	33,000	625,471	876,810
	ELECTRONIC ART	9,800	223,146	201,880
	EQUITY RESIDENTIAL SH BEN INT REIT	9,900	538,818	564,597
	EXPEDIA INC DEL NEW CLASS I	4,650	121,662	134,943
	EXXON MOBIL CORP	24,000	1,916,297	2,034,240
	EXXON MOBIL CORP	35,300	2,787,962	2,992,028
	FLIR SYSTEM INC	2,600	65,816	65,182
	FASTENAL CO	5,200	179,349	226,772
	FISERV INC	200	12,443	11,748
	FRANKLIN RESOURCES INC	1,300	130,207	124,878
	GENERAL ELECTRIC CO	72,300	1,165,623	1,294,893
	GENERAL MILLS INC	2,300	82,873	92,943
	GENUINE PARTS CO	800	46,349	48,960
	GOOGLE INC-CL A	100	62,337	64,590
	GRAINGER W W INC	800	101,099	149,752
	HALLIBURTON CO	8,600	370,559	296,786
	HEALTH CARE REIT INC	1,100	55,470	59,983
	HEINZ H J CO	13,100	610,635	707,924
	HELMERICH & PAYNE INC	1,500	85,981	87,540
	THE HERSHEY COMPANY	1,100	64,884	67,958
	HOME DEPOT INC	5,500	221,889	231,220
	HONEYWELL INTL INC	300	14,564	16,305
	HONEYWELL INTL INC	40,850	1,705,520	2,220,198
	HORMEL FOODS CORP	8,500	229,823	248,965
	HUMANA INC	700	59,456	61,327
	INTEL CORP	1,200	28,920	29,100
	INTERNATIONAL BUSINESS MACHS CORP	9,800	1,115,201	1,802,024
	INTERNATIONAL FLAVORS & FRAGRANCES INC	6,500	354,741	340,730
	INTUITIVE SURGICAL INC	500	199,843	231,505
	IRON MTN INC PA	10,400	345,108	320,320
	JPMORGAN CHASE & CO	76,000	3,170,556	2,527,000
	JOHNSON & JOHNSON	20,100	1,319,263	1,318,158
	JOHNSON & JOHNSON	900	57,598	59,022
	JOHNSON CONTROLS INC	54,200	1,470,662	1,694,292
	KELLOGG CO	8,100	447,184	409,617
	KIMBERLY-CLARK CORP	900	60,350	66,204
	KRAFT FOODS INC - A	9,000	312,298	336,240
	LSI CORPORATION	400	2,830	2,380
	LABORATORY CORP OF AMERICA HLDG	5,400	494,175	464,238
	LAUDER ESTEE COS INC CL A	7,800	598,924	876,096
	LILLY ELI & CO	4,400	166,877	182,864
	LIMITED BRANDS INC	18,100	719,181	730,335
	LOCKHEED MARTIN CORP	2,100	161,611	169,890
	LORILLARD INC	5,600	611,029	638,400
	MARATHON OIL CORP	20,950	441,564	613,207
	MARATHON PETROLEUM CORP	6,600	186,853	219,714
	MASTERCARD INC CL A	2,100	712,836	782,922
	MC CORMICK & CO INC NON-VOTING	3,800	158,523	191,596
	MC DONALDS CORP	10,500	813,294	1,053,465
	MC GRAW HILL COMPANIES INC	14,100	555,282	634,077
	MEAD JOHNSON NUTRITION CO	2,300	163,043	158,079
	MEDTRONIC INC	300	10,583	11,475
	MERCK & CO INC	400	13,956	15,080

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common Stock</u>			
	MERCK & CO INC	42,763	1,533,841	1,612,165
	METLIFE INC.	53,100	2,153,123	1,655,658
	MICROSOFT CORP	19,500	564,441	506,220
	MICROSOFT CORP	109,950	2,831,828	2,854,302
	MICROCHIP TECHNOLOGY INC	1,400	48,209	51,282
	MONSANTO CO	15,750	1,008,006	1,103,603
	MONSANTO CO	400	28,249	28,028
	MOODY'S CORP	7,400	247,691	249,232
	MOSAIC CO/THE	300	18,182	15,129
	MOTOROLA MOBILITY HOLDINGS	800	30,937	31,040
	MYLAN INC	1,600	40,209	34,336
	NATIONAL OILWELL VARCO INC	17,400	1,349,132	1,183,026
	NETFLIX INC	5,000	864,347	346,450
	NEWMONT MINING CORP	400	26,443	24,004
	NEXTERA ENERGY INC	1,900	109,438	115,672
	NIKE INC CLASS B	300	28,769	28,911
	NORDSTROM INC	3,000	149,271	149,130
	NORFOLK SOUTHERN CORP	700	52,090	51,002
	NOVARTIS AG	9,700	537,858	554,549
	O REILLY AUTOMOTIVE INC	900	69,007	71,955
	OCCIDENTAL PETROLEUM CORP	16,450	1,226,452	1,541,365
	ONEOK INC	500	41,413	43,345
	OWENS ILL INC NEW	25,686	681,263	497,795
	PPG INDUSTRIES INC	800	66,030	66,792
	PAYCHEX INC	300	9,488	9,033
	PEPSICO INC	269	20,028	17,848
	PEPSICO INC	17,900	1,140,972	1,187,665
	PERRIGO CO	700	68,652	68,110
	PFIZER INC	136,250	2,178,489	2,948,450
	PHILIP MORRIS INTERNAT-W/I	22,700	1,476,741	1,781,496
	PRAXAIR INC	1,400	138,335	149,660
	PRECISION CASTPARTS CORP	1,100	178,065	181,269
	PRICELINE.COM INC	1,600	521,925	748,336
	PROCTER & GAMBLE CO	400	24,631	26,684
	PROCTER & GAMBLE CO	38,450	2,382,544	2,565,000
	PROGRESS ENERGY INC	1,400	74,967	78,428
	PUBLIC STORAGE REITS	2,700	317,497	363,042
	QUALCOMM INC	3,300	178,313	180,510
	QUEST DIAGNOSTICS INC	1,500	83,216	87,090
	RALPH LAUREN CORP	400	57,848	55,232
	RANGE RES CORP	4,900	312,801	303,506
	REYNOLDS AMERICAN INC	13,600	473,666	563,312
	ROCKWELL AUTOMATION INC	2,000	134,765	146,740
	ROPER INDS INC NEW	700	52,692	60,809
	ROSS STORES INC	8,800	319,700	418,264
	ST JUDE MEDICAL INC	3,600	159,165	123,480
	SANOFI SPONSORED ADR	45,700	1,559,442	1,669,878
	SARA LEE CORP	29,400	540,992	556,248
	SCHLUMBERGER LTD	100	8,769	6,830
	SIGMA ALDRICH CORP	600	38,507	37,475
	SIMON PROPERTY GROUP INC	1,800	211,748	232,092
	JM SMUCKER CO/THE-NEW-COM WI	500	38,492	39,085
	SOUTHERN CO	4,400	173,683	203,676
	SOUTHWESTERN ENERGY CO	15,000	579,045	479,100
	SPECTRA ENERGY CORP	16,700	443,184	513,525
	STANLEY BLACK & DECKER INC	6,500	335,470	439,400
	STARBUCKS CORP	1,100	47,735	50,611
	STERICYCLE INC	5,500	460,479	428,560
	STRYKER CORP	500	28,278	24,855
	TJX COMPANIES INC NEW	2,000	119,788	129,100
	TERADATA CORP	15,800	834,761	766,458

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common Stock</u>			
	TEXAS INSTRUMENTS INC	9,800	332,400	285,278
	TEXAS INSTRUMENTS INC	65,400	1,806,445	1,903,794
	THERMO FISHER SCIENTIFIC INC	600	27,743	26,982
	TIFFANY & CO NEW	5,700	388,807	377,682
	TIME WARNER INC-WHEN ISSUED	74,850	2,491,785	2,705,079
	TIME WARNER CABLE-W/I	7,200	471,335	457,704
	THE TRAVELERS COS INC	1,700	97,007	100,589
	TRIPADVISOR INC CLASS I	4,650	137,600	117,226
	US BANCORP DEL COM NEW	17,400	368,446	470,670
	ULTRA PETE CORP	10,800	315,707	320,004
	UNION PACIFIC CORP	700	65,880	74,158
	UNITED TECHNOLOGIES CORP	700	49,013	51,162
	UNITEDHEALTH GROUP INC	8,300	408,512	420,644
	UNITEDHEALTH GROUP INC	24,650	1,199,569	1,249,262
	V-F CORP	2,400	322,352	304,776
	VERIZON COMMUNICATIONS INC	38,300	1,403,619	1,536,596
	VIACOM INC CLASS B WI	60,600	2,379,791	2,751,846
	VISA INC CLASS A SHARES	1,600	146,112	162,448
	VODAFONE GROUP PLC SPONSORED ADR NEW	84,600	2,180,834	2,371,338
	VORNADO REALTY TRUST	300	23,547	23,058
	WAL-MART STORES INC	8,600	497,489	513,936
	WATSON PHARMACEUTICAL	12,800	784,262	772,352
	WELLPOINT INC	1,400	90,567	92,750
	WELLS FARGO & COMPANY	76,700	1,826,161	2,113,852
	WHOLE FOODS MKT INC	2,600	162,123	180,908
	WILLIAMS COMPANIES INC	2,000	61,905	66,040
	WYNN RESORTS LTD	6,500	811,000	718,185
	XILINX INC	800	23,691	25,648
	YUM! BRANDS INC	1,300	63,106	76,713
	ZIMMER HOLDINGS INC	900	50,960	48,078
			<u>109,491,919</u>	<u>117,706,940</u>
	<u>Registered investment companies</u>			
	PIMCO FDS TOTAL RETURN BD FUND INSTL CLASS	14,029,851	148,013,103	152,504,482
	ISHARES TR RUSSELL 2000 INDEX FDETf	662,617	40,714,038	48,868,004
			<u>188,727,141</u>	<u>201,372,486</u>
	<u>Money market funds</u>			
*	BLACKROCK LIQUIDITY FUNDS	2,980,146	2,980,146	2,980,146
	MERRILL LYNCH INSTITUTIONAL MONEY MARKET	6,212,436	6,212,436	6,212,436
			<u>9,192,582</u>	<u>9,192,582</u>
	<u>Collective trust</u>			
	ARTIO INTERNATIONAL EQUITY II GROUP TRUST FUND	238,964	35,634,548	27,793,951
*	BLACKROCK ACWI EX US SUPERFUND A	1,948,527	32,750,000	33,858,137
	NT COLLECTIVE RUSSELL 1000 INDEX FUND - NON LENDING	5,616,772	66,957,537	69,288,498
			<u>135,342,085</u>	<u>130,940,586</u>
	<u>Partnership</u>			
	CHL MEDICAL PARTNERS LP 1 UNIT = 1%	0.420	165,494	23,083
	CHL MEDICAL PARTNERS II LP 1 UNIT = 1%	0.166	216,591	89,513
			<u>382,085</u>	<u>112,596</u>
			<u>\$ 443,135,812</u>	<u>\$ 459,325,190</u>

* Represents a party-in-interest.

Note - The unaudited information in this schedule was certified by the trustee of the Plan as complete and accurate.

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

For the year ended December 31, 2011

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
<u>Series of Transactions with Same Security Exceeding 5% of Value</u>						
BlackRock	Liquidity Funds					
	Purchases - 59	\$ 18,696,664	\$ -	\$ 18,696,664	\$ 18,696,664	\$ -
	Sales - 15	-	17,703,185	17,703,185	17,703,185	-
Merrill Lynch	Institutional Money Market					
	Purchases - 90	69,898,020	-	69,898,020	69,898,020	-
	Sales - 68	-	65,237,319	65,237,319	65,237,319	-
ACWI	US Superfund					
	Purchases - 1	32,750,000	-	32,750,000	32,750,000	-
	Sales - 0	-	-	-	-	-
Artio	International Equity II Group Trust Fund					
	Purchases - 0	-	-	-	-	-
	Sales - 1	-	26,750,000	31,540,972	26,750,000	(4,790,972)
<u>Single Transactions Exceeding 5% of Value</u>						
Merrill Lynch	Institutional Money Market	33,500,320	-	-	-	-
BlackRock	ACWI Excl US Superfund	32,750,000	-	-	-	-
Artio	International Equity II Group Trust Fund	-	26,750,000	31,540,972	26,750,000	(4,790,972)

Note - The unaudited information in this schedule was certified by the Trustee of the Plan as complete and accurate.

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common stock</u>	<u>Shares</u>		
	ACCENTURE PLC CLASS A	8,100	\$ 473,648	\$ 431,163
	COOPER INDUSTRIES PLC	1,100	60,636	59,565
	COVIDIEN PLC	22,250	886,939	1,001,473
	COVIDIEN PLC	2,700	116,068	121,527
	ACE LIMITED	23,750	1,398,599	1,665,350
	ABBOTT LABORATORIES INC	5,800	301,282	326,134
	AETNA INC NEW	1,500	60,867	63,285
	AGILENT TECHNOLOGIES (IPO)	5,000	226,440	174,650
	AIRGAS INC	500	34,287	39,040
	ALLERGAN INC	3,900	317,563	342,186
	ALTERA CORP	13,600	514,350	504,560
	ALTRIA GROUP INC	59,100	1,320,601	1,752,315
	AMAZON COM INC	1,100	220,888	190,410
	AMERICAN EXPRESS CO	6,600	311,995	311,322
*	AON CORP	1,700	76,203	79,560
	APPLE INC	5,700	1,006,713	2,308,500
	APPLIED MATERIALS INC	108,050	1,478,220	1,157,216
	ARCHER DANIELS MIDLAND CO	41,550	1,459,042	1,188,330
	AUTOMATIC DATA PROCESSING INC	21,200	1,057,315	1,145,012
	AUTOZONE INC	2,000	408,957	649,940
	AVALONBAY COMMUNITIES INC REIT	3,000	374,191	391,800
	BB&T CORP	51,800	1,260,601	1,303,806
	BCE INC	44,650	1,171,364	1,860,566
	BAKER HUGHES INC	18,100	1,183,824	880,384
	BALL CORPORATION	12,900	443,673	460,659
	BARD C R INC	7,700	760,578	658,350
	BAXTER INTERNATIONAL INC	16,900	947,984	836,212
	BECTON DICKINSON & CO	3,300	262,737	246,576
	BED BATH AND BEYOND	600	36,650	34,782
	BIOGEN IDEC INC	10,600	865,925	1,166,530
*	BLACKROCK INC	6,950	1,206,352	1,238,768
	BORG WARNER INC	700	43,779	44,618
	BOSTON PPTYS INC REIT	5,000	481,907	498,000
	BRISTOL MYERS SQUIBB CO	9,700	282,101	341,828
	BROWN FORMAN CORP CLASS B	600	36,985	48,306
	CF INDUSTRIES HOLDINGS INC	3,400	448,587	492,932
	C.H.ROBINSON WORLDWIDE INC	4,500	336,558	314,010
	CSX CORP	20,000	458,170	421,200
	CABOT OIL & GAS CORP COM	4,400	288,942	333,960
	CAPITAL ONE FINANCIAL CORP	25,200	1,111,453	1,065,708
	CATERPILLAR INC	15,000	1,433,518	1,359,000
	CELGENE CORP	1,500	95,724	101,400
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	CHUBB CORP	1,200	80,076	83,064
	CISCO SYSTEMS INC	124,250	2,052,563	2,246,440
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	CONSOLIDATED EDISON INC	1,200	71,529	74,436
	COSTCO WHOLESALE CORP	2,000	164,486	166,640
	DANAHER CORP	1,200	57,107	56,448
	DAVITA INC	1,100	88,669	83,391
	DIRECTV CLASS A	23,100	940,849	987,756
	DOLLAR TREE INC	900	74,427	74,799

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)

December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
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	DR PEPPER SNAPPLE GROUP INC	1,100	41,912	43,428
	DUPONT E I DE NEMOURS & CO	3,400	169,793	155,652
	EMC CORP	1,400	33,971	30,156
	EQT CORPORATION	3,800	222,727	208,202
	EASTMAN CHEM CO	600	28,121	23,436
	EBAY INC	1,200	37,097	36,396
	ECOLAB INC	400	22,376	23,124
	EL PASO CORPORATION	33,000	625,471	876,810
	ELECTRONIC ART	9,800	223,146	201,880
	EQUITY RESIDENTIAL SH BEN INT REIT	9,900	538,818	564,597
	EXPEDIA INC DEL NEW CLASS I	4,650	121,662	134,943
	EXXON MOBIL CORP	24,000	1,916,297	2,034,240
	EXXON MOBIL CORP	35,300	2,787,962	2,992,028
	FLIR SYSTEM INC	2,600	65,816	65,182
	FASTENAL CO	5,200	179,349	226,772
	FISERV INC	200	12,443	11,748
	FRANKLIN RESOURCES INC	1,300	130,207	124,878
	GENERAL ELECTRIC CO	72,300	1,165,623	1,294,893
	GENERAL MILLS INC	2,300	82,873	92,943
	GENUINE PARTS CO	800	46,349	48,960
	GOOGLE INC-CL A	100	62,337	64,590
	GRAINGER W W INC	800	101,099	149,752
	HALLIBURTON CO	8,600	370,559	296,786
	HEALTH CARE REIT INC	1,100	55,470	59,983
	HEINZ H J CO	13,100	610,635	707,924
	HELMERICH & PAYNE INC	1,500	85,981	87,540
	THE HERSHEY COMPANY	1,100	64,884	67,958
	HOME DEPOT INC	5,500	221,889	231,220
	HONEYWELL INTL INC	300	14,564	16,305
	HONEYWELL INTL INC	40,850	1,705,520	2,220,198
	HORMEL FOODS CORP	8,500	229,823	248,965
	HUMANA INC	700	59,456	61,327
	INTEL CORP	1,200	28,920	29,100
	INTERNATIONAL BUSINESS MACHS CORP	9,800	1,115,201	1,802,024
	INTERNATIONAL FLAVORS & FRAGRANCES INC	6,500	354,741	340,730
	INTUITIVE SURGICAL INC	500	199,843	231,505
	IRON MTN INC PA	10,400	345,108	320,320
	JPMORGAN CHASE & CO	76,000	3,170,556	2,527,000
	JOHNSON & JOHNSON	20,100	1,319,263	1,318,158
	JOHNSON & JOHNSON	900	57,598	59,022
	JOHNSON CONTROLS INC	54,200	1,470,662	1,694,292
	KELLOGG CO	8,100	447,184	409,617
	KIMBERLY-CLARK CORP	900	60,350	66,204
	KRAFT FOODS INC - A	9,000	312,298	336,240
	LSI CORPORATION	400	2,830	2,380
	LABORATORY CORP OF AMERICA HLDG	5,400	494,175	464,238
	LAUDER ESTEE COS INC CL A	7,800	598,924	876,096
	LILLY ELI & CO	4,400	166,877	182,864
	LIMITED BRANDS INC	18,100	719,181	730,335
	LOCKHEED MARTIN CORP	2,100	161,611	169,890
	LORILLARD INC	5,600	611,029	638,400
	MARATHON OIL CORP	20,950	441,564	613,207
	MARATHON PETROLEUM CORP	6,600	186,853	219,714
	MASTERCARD INC CL A	2,100	712,836	782,922
	MC CORMICK & CO INC NON-VOTING	3,800	158,523	191,596
	MC DONALDS CORP	10,500	813,294	1,053,465
	MC GRAW HILL COMPANIES INC	14,100	555,282	634,077
	MEAD JOHNSON NUTRITION CO	2,300	163,043	158,079
	MEDTRONIC INC	300	10,583	11,475
	MERCK & CO INC	400	13,956	15,080

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)

December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common Stock</u>			
	MERCK & CO INC	42,763	1,533,841	1,612,165
	METLIFE INC.	53,100	2,153,123	1,655,658
	MICROSOFT CORP	19,500	564,441	506,220
	MICROSOFT CORP	109,950	2,831,828	2,854,302
	MICROCHIP TECHNOLOGY INC	1,400	48,209	51,282
	MONSANTO CO	15,750	1,008,006	1,103,603
	MONSANTO CO	400	28,249	28,028
	MOODY'S CORP	7,400	247,691	249,232
	MOSAIC CO/THE	300	18,182	15,129
	MOTOROLA MOBILITY HOLDINGS	800	30,937	31,040
	MYLAN INC	1,600	40,209	34,336
	NATIONAL OILWELL VARCO INC	17,400	1,349,132	1,183,026
	NETFLIX INC	5,000	864,347	346,450
	NEWMONT MINING CORP	400	26,443	24,004
	NEXTERA ENERGY INC	1,900	109,438	115,672
	NIKE INC CLASS B	300	28,769	28,911
	NORDSTROM INC	3,000	149,271	149,130
	NORFOLK SOUTHERN CORP	700	52,090	51,002
	NOVARTIS AG	9,700	537,858	554,549
	O REILLY AUTOMOTIVE INC	900	69,007	71,955
	OCCIDENTAL PETROLEUM CORP	16,450	1,226,452	1,541,365
	ONEOK INC	500	41,413	43,345
	OWENS ILL INC NEW	25,686	681,263	497,795
	PPG INDUSTRIES INC	800	66,030	66,792
	PAYCHEX INC	300	9,488	9,033
	PEPSICO INC	269	20,028	17,848
	PEPSICO INC	17,900	1,140,972	1,187,665
	PERRIGO CO	700	68,652	68,110
	Pfizer Inc	136,250	2,178,489	2,948,450
	PHILIP MORRIS INTERNAT-W/I	22,700	1,476,741	1,781,496
	PRAXAIR INC	1,400	138,335	149,660
	PRECISION CASTPARTS CORP	1,100	178,065	181,269
	PRICELINE.COM INC	1,600	521,925	748,336
	PROCTER & GAMBLE CO	400	24,631	26,684
	PROCTER & GAMBLE CO	38,450	2,382,544	2,565,000
	PROGRESS ENERGY INC	1,400	74,967	78,428
	PUBLIC STORAGE REITS	2,700	317,497	363,042
	QUALCOMM INC	3,300	178,313	180,510
	QUEST DIAGNOSTICS INC	1,500	83,216	87,090
	RALPH LAUREN CORP	400	57,848	55,232
	RANGE RES CORP	4,900	312,801	303,506
	REYNOLDS AMERICAN INC	13,600	473,666	563,312
	ROCKWELL AUTOMATION INC	2,000	134,765	146,740
	ROPER INDS INC NEW	700	52,692	60,809
	ROSS STORES INC	8,800	319,700	418,264
	ST JUDE MEDICAL INC	3,600	159,165	123,480
	SANOFI SPONSORED ADR	45,700	1,559,442	1,669,878
	SARA LEE CORP	29,400	540,992	556,248
	SCHLUMBERGER LTD	100	8,769	6,831
	SIGMA ALDRICH CORP	600	38,507	37,476
	SIMON PROPERTY GROUP INC	1,800	211,748	232,092
	JM SMUCKER CO/THE-NEW-COM WI	500	38,492	39,085
	SOUTHERN CO	4,400	173,683	203,676
	SOUTHWESTERN ENERGY CO	15,000	579,045	479,100
	SPECTRA ENERGY CORP	16,700	443,184	513,525
	STANLEY BLACK & DECKER INC	6,500	335,470	439,400
	STARBUCKS CORP	1,100	47,735	50,611
	STERICYCLE INC	5,500	460,479	428,560
	STRYKER CORP	500	28,278	24,855
	TJX COMPANIES INC NEW	2,000	119,788	129,100
	TERADATA CORP	15,800	834,761	766,458

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)

December 31, 2011

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
	<u>Common Stock</u>			
	TEXAS INSTRUMENTS INC	9,800	332,400	285,278
	TEXAS INSTRUMENTS INC	65,400	1,806,445	1,903,794
	THERMO FISHER SCIENTIFIC INC	600	27,743	26,982
	TIFFANY & CO NEW	5,700	388,807	377,682
	TIME WARNER INC-WHEN ISSUED	74,850	2,491,785	2,705,079
	TIME WARNER CABLE-W/I	7,200	471,335	457,704
	THE TRAVELERS COS INC	1,700	97,006	100,589
	TRIPADVISOR INC CLASS I	4,650	137,600	117,227
	US BANCORP DEL COM NEW	17,400	368,446	470,670
	ULTRA PETE CORP	10,800	315,707	320,004
	UNION PACIFIC CORP	700	65,880	74,158
	UNITED TECHNOLOGIES CORP	700	49,012	51,163
	UNITEDHEALTH GROUP INC	8,300	408,512	420,644
	UNITEDHEALTH GROUP INC	24,650	1,199,569	1,249,262
	V-F CORP	2,400	322,351	304,776
	VERIZON COMMUNICATIONS INC	38,300	1,403,619	1,536,596
	VIACOM INC CLASS B WI	60,600	2,379,791	2,751,846
	VISA INC CLASS A SHARES	1,600	146,112	162,448
	VODAFONE GROUP PLC SPONSORED ADR NEW	84,600	2,180,834	2,371,338
	VORNADO REALTY TRUST	300	23,547	23,058
	WAL-MART STORES INC	8,600	497,489	513,936
	WATSON PHARMACEUTICAL	12,800	784,262	772,352
	WELLPOINT INC	1,400	90,567	92,750
	WELLS FARGO & COMPANY	76,700	1,826,161	2,113,852
	WHOLE FOODS MKT INC	2,600	162,123	180,908
	WILLIAMS COMPANIES INC	2,000	61,904	66,040
	WYNN RESORTS LTD	6,500	811,000	718,185
	XILINX INC	800	23,691	25,648
	YUM! BRANDS INC	1,300	63,106	76,713
	ZIMMER HOLDINGS INC	900	50,960	48,078
			<u>109,491,919</u>	<u>117,706,940</u>
	<u>Registered investment companies</u>			
	PIMCO FDS TOTAL RETURN BD FUND INSTL CLASS	14,029,851	148,013,103	152,504,482
	ISHARES TR RUSSELL 2000 INDEX FDET	662,617	40,714,038	48,868,004
			<u>188,727,141</u>	<u>201,372,486</u>
	<u>Money market funds</u>			
*	BLACKROCK LIQUIDITY FUNDS	2,980,146	2,980,146	2,980,146
	MERRILL LYNCH INSTITUTIONAL MONEY MARKET	6,212,436	6,212,436	6,212,436
			<u>9,192,582</u>	<u>9,192,582</u>
	<u>Collective trust</u>			
	ARTIO INTERNATIONAL EQUITY II GROUP TRUST FUND	238,964	35,634,548	27,793,951
*	BLACKROCK ACWI EX US SUPERFUND A	1,948,527	32,750,000	33,858,137
	NT COLLECTIVE RUSSELL 1000 INDEX FUND - NON LENDING	5,616,772	66,957,537	69,288,498
			<u>135,342,085</u>	<u>130,940,586</u>
	<u>Partnership</u>			
	CHL MEDICAL PARTNERS LP 1 UNIT = 1%	0.420	165,494	23,083
	CHL MEDICAL PARTNERS II LP 1 UNIT = 1%	0.166	216,591	89,513
			<u>382,085</u>	<u>112,596</u>
			<u>\$ 443,135,812</u>	<u>\$ 459,325,190</u>

* Represents a party-in-interest.

Note - The information in this schedule was certified by the trustee of the Plan as complete and accurate.

LUXOTTICA GROUP PENSION PLAN
Form 5500 E.I.N. 11-3491054 Plan No. 002

Schedule H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

For the year ended December 31, 2011

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
<u>Series of Transactions with Same Security Exceeding 5% of Value</u>						
Blackrock	Liquidity Funds					
	Purchases - 59	\$ 18,696,664	\$ -	\$ 18,696,664	\$ 18,696,664	\$ -
	Sales - 15	-	17,703,185	17,703,185	17,703,185	-
Merrill Lynch	Institutional Money Market					
	Purchases - 90	69,898,020	-	69,898,020	69,898,020	-
	Sales - 68	-	65,237,319	65,237,319	65,237,319	-
ACWI	US Superfund					
	Purchases - 1	32,750,000	-	32,750,000	32,750,000	-
	Sales - 0	-	-	-	-	-
Artio	International Equity II Group Trust Fund					
	Purchases - 0	-	-	-	-	-
	Sales - 1	-	26,750,000	26,750,000	31,540,972	(4,790,972)
<u>Single Transactions Exceeding 5% of Value</u>						
Merrill Lynch	Institutional Money Market	33,500,320	-	-	-	-
Blackrock	ACWI Excl US Superfund	32,750,000	-	-	-	-
Artio	International Equity II Group Trust Fund	-	26,750,000	26,750,000	31,540,972	(4,790,972)

Note - The unaudited information in this schedule was certified by the Trustee of the Plan as complete and accurate.

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment 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 Luxottica Group Pension Plan	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Luxottica U.S. Holdings Corp.	D Employer Identification Number (EIN) 11-3491054
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2011</u>		
2 Assets:		
a Market value	2a	458,585,291
b Actuarial value	2b	427,279,941
3 Funding target/participant count breakdown:	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a 3,506	67,761,367
b For terminated vested participants.....	3b 19,032	177,419,473
c For active participants:		
(1) Non-vested benefits.....	3c(1)	11,778,850
(2) Vested benefits.....	3c(2)	217,703,343
(3) Total active.....	3c(3) 18,234	229,482,193
d Total.....	3d 40,772	474,663,033
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	6.34 %
6 Target normal cost	6	27,081,336

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	<u>UAD</u>	<u>10/04/2012</u>
Signature of actuary		Date
<u>Lori A. DeVore</u>		<u>11-05257</u>
Type or print name of actuary		Most recent enrollment number
<u>Aon Consulting Inc.</u>		<u>(614) 436-8100</u>
Firm name		Telephone number (including area code)
<u>445 Hutchinson Ave., Suite 900</u>		
<u>Columbus</u>		
OH <u>43235-8619</u>		
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 ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2011
v.012611

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	218,091
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8).....	0	218,091
10 Interest on line 9 using prior year's actual return of <u>14.57</u> %.....		31,776
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38 from prior year)		23,588,610
b Interest on (a) using prior year's effective rate of <u>6.71</u> % except as otherwise provided (see instructions).....		1,582,796
c Total available at beginning of current plan year to add to prefunding balance.....		25,171,406
d Portion of (c) to be added to prefunding balance.....		
12 Other reductions in balances due to elections or deemed elections.....		166,656
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12).....	0	83,211

Part III Funding percentages

14 Funding target attainment percentage	14	90.00 %
15 Adjusted funding target attainment percentage	15	90.00 %
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	90.00 %
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	7,656,493				
07/15/2011	7,656,493				
10/14/2011	7,656,493				
01/13/2012	7,656,493				
09/10/2012	28,300,000				
			Totals •	18(b)	18(c)
				58,925,972	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	54,917,240

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c** If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:			
a Segment rates:	1st segment: 3.78 %	2nd segment: 6.31 %	3rd segment: 6.57 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 62
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	27,081,336	
b Excess assets, if applicable, but not greater than 31a	31b		
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment.....	47,466,303	8,741,567	
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	35,822,903	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35)	36	35,822,903	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	54,917,240	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	19,094,337	
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 SB Attachment (Form 5500)—2011 Plan Year
Luxottica Group Pension Plan
EIN: 11-3491054 PN: 002

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

Actuarial Assumptions and Methods

For ERISA Requirements

Interest rates	Based on segment rates with a four-month lookback (as of September 2010)
1st segment rate	3.78%
2nd segment rate	6.31%
3rd segment rate	6.57%
Salary increases	
Minimum funding target normal cost	See Table 1
Maximum tax expected benefit increase	
Cash balance interest crediting rate	4.01%
Retirement age	
Active participants	See Table 2
Terminated vested participants	65
Mortality rates	
Healthy	2011 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e)
Disabled	Current Liability mortality tables (post-1995)
Withdrawal rates	See Table 3
Disability rates	None
Decrement timing	Middle of year decrements, with 100% retirement occurring at beginning of year
Surviving spouse benefit	100% of employees are assumed to be married. For Cole employees, 85% of male employees and 50% of female employees are assumed to be married. Wives are assumed to be 3 years younger than their husbands.

Schedule SB Attachment (Form 5500)—2011 Plan Year
Luxottica Group Pension Plan
EIN: 11-3491054 PN: 002

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

For ERISA Requirements

Valuation compensation	2010 Pensionable earnings rolled forward one year with the salary increase assumption. Unexercised stock option grants are assumed to be exercised notably between the later of the valuation date and the vesting date and the expiration of the options.
Future service	Employees are assumed to work the same number of hours as worked in the preceding plan year for all future years.
Benefit and compensation limits	Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of \$195,000 and the 401(a)(17) compensation limit of \$245,000.
Valuation of plan assets	<p>Smoothed fair market value of assets over the current and prior year, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.</p> <p>A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).</p>
Form of payment	100% of cash balance participants are assumed to elect lump sum equivalent of their cash balance upon retirement. For participants not eligible for lump sum payments upon retirement, 100% are assumed to elect the single life annuity option.
Expected return on assets 2010 plan year	8.00%
Trust expenses included in target normal cost	The plan expenses anticipated to be paid from the trust are reflected in the Target Normal Cost.

Schedule SB Attachment (Form 5500)—2011 Plan Year
Luxottica Group Pension Plan
EIN: 11-3491054 PN: 002

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

Actuarial method

Standard unit credit cost method

Valuation date

January 1, 2011

Schedule SB Attachment (Form 5500)—2011 Plan Year
Luxottica Group Pension Plan
EIN: 11-3491054 PN: 002

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

Table 1

Salary Merit Increase Rates—Salary Scale

Age	Rate	Age	Rate
15	5.00%	45	3.00%
16	5.00%	46	3.00%
17	5.00%	47	3.00%
18	5.00%	48	3.00%
19	5.00%	49	3.00%
20	5.00%	50	3.00%
21	5.00%	51	3.00%
22	5.00%	52	3.00%
23	5.00%	53	3.00%
24	5.00%	54	3.00%
25	5.00%	55	2.00%
26	5.00%	56	2.00%
27	5.00%	57	2.00%
28	5.00%	58	2.00%
29	5.00%	59	2.00%
30	5.00%	60	2.00%
31	5.00%	61	2.00%
32	5.00%	62	2.00%
33	5.00%	63	2.00%
34	5.00%	64	2.00%
35	3.00%	65	2.00%
36	3.00%	66	2.00%
37	3.00%	67	2.00%
38	3.00%	68	2.00%
39	3.00%	69	2.00%
40	3.00%	70	2.00%
41	3.00%	71	2.00%
42	3.00%	72	2.00%
43	3.00%	73	2.00%
44	3.00%	74	2.00%

Schedule SB Attachment (Form 5500)—2011 Plan Year
Luxottica Group Pension Plan
EIN: 11-3491054 PN: 002

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

Table 2

Retirement Rates—Retirement Rates

<u>Age</u>	<u>Rate</u>
55	5.00%
56	5.00%
57	5.00%
58	5.00%
59	10.00%
60	10.00%
61	10.00%
62	15.00%
63	15.00%
64	25.00%
65	25.00%
66	25.00%
67	50.00%
68	50.00%
69+	100.00%

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Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

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Withdrawal Rates—Termination Rates

Age	Years of Service			
	0-1	2-3	4	5+
18	40.000%	30.000%	20.000%	22.734%
19	40.000%	30.000%	20.000%	22.734%
20	40.000%	30.000%	20.000%	22.734%
21	40.000%	30.000%	20.000%	21.926%
22	40.000%	30.000%	20.000%	21.157%
23	40.000%	30.000%	20.000%	20.416%
24	40.000%	30.000%	20.000%	19.694%
25	40.000%	30.000%	20.000%	19.000%
26	40.000%	30.000%	20.000%	18.335%
27	40.000%	30.000%	20.000%	17.689%
28	40.000%	30.000%	20.000%	17.043%
29	40.000%	30.000%	20.000%	16.388%
30	30.000%	25.000%	15.000%	15.789%
31	30.000%	25.000%	15.000%	15.504%
32	30.000%	25.000%	15.000%	14.782%
33	30.000%	25.000%	15.000%	14.260%
34	30.000%	25.000%	15.000%	13.756%
35	25.000%	20.000%	15.000%	13.272%
36	25.000%	20.000%	15.000%	12.806%
37	25.000%	20.000%	15.000%	12.360%
38	25.000%	20.000%	15.000%	11.923%
39	25.000%	20.000%	15.000%	11.505%
40	25.000%	20.000%	15.000%	11.096%
41	25.000%	20.000%	15.000%	10.707%
42	25.000%	20.000%	15.000%	10.327%
43	25.000%	20.000%	15.000%	9.966%
44	25.000%	20.000%	15.000%	9.614%
45	25.000%	20.000%	15.000%	9.272%
46	25.000%	20.000%	15.000%	8.949%
47	25.000%	20.000%	15.000%	8.636%

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Schedule SB, Part V—Statement of Actuarial Assumptions/Methods (cont.)

Table 3—Page 2 of 2

Withdrawal Rates—Termination Rates

Age	Years of Service			
	0-1	2-3	4	5+
48	25.000%	20.000%	15.000%	8.332%
49	25.000%	20.000%	15.000%	8.037%
50	25.000%	20.000%	15.000%	7.752%
51	25.000%	20.000%	15.000%	7.486%
52	25.000%	20.000%	15.000%	7.220%
53	25.000%	20.000%	15.000%	6.964%
54	25.000%	20.000%	15.000%	6.717%
55	20.000%	15.000%	10.000%	6.479%
56	20.000%	15.000%	10.000%	6.251%
57	20.000%	15.000%	10.000%	6.023%
58	20.000%	15.000%	10.000%	5.814%
59	20.000%	15.000%	10.000%	5.605%
60	20.000%	15.000%	10.000%	5.406%
61	20.000%	15.000%	10.000%	5.216%
62	20.000%	15.000%	10.000%	5.035%
63	20.000%	15.000%	10.000%	0.000%
64	20.000%	15.000%	10.000%	0.000%
65	20.000%	15.000%	10.000%	0.000%
66+	0.000%	0.000%	0.000%	0.000%

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Schedule SB, Part V—Summary of Plan Provisions

Plan Provisions

The following summary describes principal plan provisions assumed in calculating the cost of your pension plan.

General Information

- (1) Original Effective Date: November 11, 1952
- (2) Effective Date of Last Amendment: January 1, 2009
- (3) Plan Year: January 1 to December 31
- (4) Employer Fiscal Year: January 1 to December 31
- (5) Employer ID Number: 11-3491054
- (6) Plan Administrator's ID Number: 36-4300417
- (7) Plan Number: 002
- (8) Plan Administrator: Luxottica Group ERISA Plans Compliance & Investment Committee

Eligibility

All employees of the Employer are eligible to participate in the Plan on the first day of the month following completion of one year of service, but after attainment of age 21. As of January 1, 1998, employees of Avant-Garde Optics, Inc. were eligible to participate in the Plan. As of June 25, 1999, employees of Ray-Ban Sun Optics, Inc. and REVCO, Inc., divisions of Bausch & Lomb, were eligible to participate in the Plan. As of January 1, 2002, employees of SunGlass Hut, Inc. were eligible to participate in the Plan. As of January 1, 2007, employees of Cole National Group, Inc. were eligible to participate in the Plan. Employees of Cole National Group, Inc. must have met the age condition and had worked 1,000 or more hours in 2006 in order to enter on January 1, 2007.

Service

Service shall equal total years of service with the Employer. A year of service is credited for each year in which an employee works 1,000 hours. A break in service occurs at the start of any plan year in which the employee works 500 hours or less for the Employer in such year. Service will not be interrupted by:

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Schedule SB, Part V—Summary of Principal Plan Provisions (cont.)

- (1) A leave of absence granted by the Employer,
- (2) A period of service in the Armed Forces of the United States under which employment rights are granted,
- (3) A period of disability during which the participant is being paid directly or indirectly by the Employer,
- (4) Transfer of employment from one participating Employer to another.

An employee will be given credit for his pre-break service if either of the following occurs:

- (1) The employee had a vested interest in his Accrued Benefit at the time of his break in service, or
- (2) The employee's period of absence was less than his pre-break service or five years, whichever is greater.

Creditable service means the total number of plan years during which an employee worked at least 1,000 hours of service.

Normal Retirement Date

Normal Retirement Date is the first day of the month coincident with or next following attainment of age 65 and the fifth anniversary of participation in the Plan. Effective January 1, 2008, the fifth anniversary of participation is replaced with the third anniversary.

Normal Retirement Benefit

The benefit to be paid in a lump sum amount, which is equal to the value of the employee's cash balance. The cash balance account increases with the interest adjustment and contributions.

The interest adjustment equals the greater of 1) one percent over the twelve-month average of the 90-day U.S. Treasury Bill established on the first business day of each month from the previous calendar year or 2) 3.5% per annum, and is applied at the end of each calendar-year quarter to the retirement account balance. Effective January 1, 2009, the 3.50% in item 2 was increased to 4.01%.

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Schedule SB, Part V—Summary of Principal Plan Provisions (cont.)

For employees hired before January 1, 2006, the contribution is equal to a percentage of compensation based on the participant's years of vesting service as of the last day of the latest Plan Year, as shown in the table below.

Vesting Service	Percent of Pay
Less than 5	5.50%
5 but less than 15	7.25%
15 or more	10.00%

For employees hired (or rehired) after January 1, 2006 or employed by Cole National Group, Inc., the contribution is equal to a percentage of compensation based on the participant's years of vesting service as of the last day of the latest Plan Year, as shown in the table below.

Vesting Service	Percent of Pay
Less than 5	4.00%
5 but less than 10	5.00%
10 but less than 15	6.00%
15 but less than 20	8.00%
20 or more	10.00%

For Cole National Group, Inc. employees, only vesting service earned after January 1, 2007 is considered for purposes of determining the Percent of Pay credit.

For all Participants who have both attained age 50 on January 1, 1995, and whose years of age and Vesting Service as of January 1, 1995 totaled 65 or more, an additional percentage applies.

However, the distributable lump sum amount cannot be less than the present value of the participant's 1994 accrued benefit.

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Schedule SB, Part V—Summary of Principal Plan Provisions (cont.)

Delayed Retirement

A participant may continue in the employment of the Employer after his Normal Retirement Date. In such event he will receive at actual retirement or death the greater of 1) the cash balance as of the Delayed Retirement date based on interest and contributions at that date or 2) the cash balance as of the participant's first eligible payment date with interest.

Compensation

Compensation equals total cash remuneration (excluding any deferred compensation) plus differentials and commissions.

Accrued Benefit

The Accrued Benefit at any time prior to a participant's Normal Retirement Date is an amount equal to the vested portion of his cash balance account.

Early Retirement Benefits

Upon the completion of 10 years of service and the attainment of age 55, a participant may elect to retire. He may receive a monthly benefit for life equal the actuarial equivalent of his cash balance account as of his Early Retirement Date.

Death Benefit

In the event of a vested participant's death, the benefit payable to the spouse or domestic partner, if living, will be a monthly benefit payable for the life of the surviving spouse or domestic partner, actuarially equivalent to the participant's cash balance as of his date of death, or the spouse or domestic partner may receive a one-time payment equal to the participant's cash balance account. If no surviving spouse or domestic partner exists, a single lump sum payment equal to the participant's cash balance account will be payable to the participant's estate.

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Schedule SB, Part V—Summary of Principal Plan Provisions (cont.)

Severance Benefits

Upon the termination of employment after 3 or more years of service, a participant shall be vested in his Accrued Benefit which will be payable at Normal Retirement Date. The percentage vested shall be:

Years of Vesting Service	Vested Percentage
Less than 3 years	0%
3 or more	100%

In the event that the participant had met the Service requirement for early retirement at the date of termination, he may elect to receive his vested interest at age 55. Employees who do not work on or after January 1, 2008 are subject to a 5 year vesting schedule.

Optional Methods of Settlement

All Optional Methods of Settlement are actuarially equivalent to the normal form of annuity. If a married participant does not elect the normal form of annuity or does not elect one of the Optional Methods of Settlement described below, then the participant's retirement benefit shall automatically be paid under option [1] below. The options are:

- (1) A benefit to be paid during the participant's lifetime with one-half the reduced benefit to be continued to his spouse or domestic partner for her lifetime after his death.
- (2) A benefit to be paid during the participant's lifetime with three-quarters the reduced benefit to be continued to his spouse or domestic partner for her lifetime after his death.
- (3) A reduced benefit to be paid during the participant's lifetime with the same reduced benefit to be continued to his spouse or domestic partner for her lifetime after his death.
- (4) A reduced benefit to be paid for 120 months certain and thereafter for life.
- (5) A lump sum settlement if retirement eligible. If not eligible for retirement, lump sums are only payable if less than \$3,500.

Lump sums are based on the applicable mortality table and interest rates for the November preceding the Valuation Date. All other Optional Forms of Settlement are actuarially equivalent to the normal form of payment based on the 1971 Group Annuity Mortality Tables blended for 85% males and 15% females and the PBGC lump sum rate published on January 1 of the plan year containing the distribution.

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Schedule SB, Part V—Summary of Principal Plan Provisions (cont.)

Amendment or Termination of Plan

The Employer reserves the right to amend or terminate the Plan at any time. Generally, the Pension Benefit Guaranty Corporation reserves the right to terminate the Plan if the Employer fails to meet the minimum funding standards, or is unable to pay benefits when due.

If the Plan is terminated, the plan assets will be distributed among the plan participants based upon a priority allocation procedure and the Employer shall be liable for any unfunded vested benefits to the extent required by law.

The above description is a summary only; for additional details, reference should be made to the formal plan document.

Plan Changes since the Prior Year

The funding, financial accounting, and plan reporting valuations do not reflect any plan changes.

Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

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Schedule SB, line 32—Schedule of Amortization Bases

Type Of Base	Present Value of Installments	Valuation Date Established	Remaining Years in Amortization Period	Amortization Amount
Shortfall	\$15,463,495	January 1, 2009	5	\$3,326,345
Shortfall	\$7,078,846	January 1, 2010	6	\$1,314,495
Shortfall	\$24,923,962	January 1, 2011	7	\$4,100,727

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

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55	5.00%	1.0000	2.75
56	5.00%	0.9500	2.66
57	5.00%	0.9025	2.57
58	5.00%	0.8574	2.49
59	10.00%	0.8145	4.81
60	10.00%	0.7331	4.40
61	10.00%	0.6598	4.02
62	15.00%	0.5938	5.52
63	15.00%	0.5047	4.77
64	25.00%	0.4290	6.86
65	25.00%	0.3218	5.23
66	25.00%	0.2413	3.98
67	50.00%	0.1810	6.06
68	50.00%	0.0905	3.08
69	100.00%	0.0452	3.12
Weighted Average			62.32

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Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2011

Number of Participants, Average Cash Balance Account and Average Compensation

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		2,142 \$831 \$18,686	115 \$4,457 \$28,529							
25-29	3	2,233 \$1,783 \$25,998	917 \$9,301 \$31,489	65 \$22,077 \$42,919						
30-34	9	1,232 \$2,720 \$34,363	947 \$12,585 \$38,329	435 \$28,458 \$43,537	16 \$46,223 \$50,096					
35-39	9	811 \$3,240 \$39,591	735 \$14,353 \$44,846	427 \$35,929 \$48,654	181 \$55,776 \$54,470	17				
40-44	2	722 \$3,380 \$44,474	696 \$14,199 \$48,053	332 \$42,282 \$53,011	186 \$63,264 \$59,490	113 \$83,695 \$56,874	10			
45-49	3	648 \$3,985 \$45,161	645 \$12,910 \$45,675	249 \$45,498 \$59,230	172 \$75,800 \$79,582	152 \$100,566 \$66,108	54 \$123,150 \$86,945			
50-54	2	488 \$3,324 \$39,516	632 \$11,764 \$47,596	223 \$41,070 \$50,568	146 \$72,877 \$61,075	136 \$121,961 \$96,590	45 \$135,347 \$78,333	3		
55-59	3	318 \$3,557 \$36,336	499 \$10,503 \$42,449	196 \$37,068 \$45,276	104 \$63,735 \$55,132	79 \$111,102 \$84,800	22 \$133,670 \$84,596	3	2	
60-64		169 \$3,128 \$32,586	294 \$10,600 \$41,623	126 \$34,210 \$40,649	50 \$65,344 \$62,916	46 \$97,272 \$74,670	12			
65-69	1	64 \$4,726 \$31,693	121 \$9,001 \$34,148	28 \$28,844 \$34,062	23 \$49,064 \$33,662	10	4	3		
70+	2	30 \$3,049 \$19,546	41 \$9,698 \$30,641	17	8	6				