

|                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br><br>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).<br><br><p style="text-align: center;">▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
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|                                                                                                          |                                                                                                                                                                                                                                           |
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| <b>Part I</b>                                                                                            | <b>Annual Report Identification Information</b>                                                                                                                                                                                           |
| For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u> |                                                                                                                                                                                                                                           |
| A This return/report is for:                                                                             | <input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or<br><input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____                         |
| B This return/report is:                                                                                 | <input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report;<br><input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months). |
| C If the plan is a collectively-bargained plan, check here. . . . .                                      | <input type="checkbox"/>                                                                                                                                                                                                                  |
| D Check box if filing under:                                                                             | <input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program;<br><input type="checkbox"/> special extension (enter description)                                 |

|                                                                                                                                                                                                           |                                                                                                                                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part II</b>                                                                                                                                                                                            | <b>Basic Plan Information</b> —enter all requested information                                                                                                                                            |
| <b>1a</b> Name of plan<br><u>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.</u>                                                                                                                               | <b>1b</b> Three-digit plan number (PN) ▶ <u>001</u><br><b>1c</b> Effective date of plan<br><u>12/10/1950</u>                                                                                              |
| <b>2a</b> Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)<br><br><u>SKF USA INC.</u><br><br><u>P.O. BOX 352</u><br><u>LANSDALE, PA 19446-0352</u> | <b>2b</b> Employer Identification Number (EIN)<br><u>23-1043740</u><br><br><b>2c</b> Sponsor's telephone number<br><u>267-436-6875</u><br><br><b>2d</b> Business code (see instructions)<br><u>336300</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.

|                                                                                                            |                                                   |            |                                                              |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------|--------------------------------------------------------------|
| <b>SIGN HERE</b>                                                                                           | Filed with authorized/valid electronic signature. | 10/15/2014 | RAYMOND EAMES                                                |
|                                                                                                            | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator       |
| <b>SIGN HERE</b>                                                                                           | Filed with authorized/valid electronic signature. | 10/15/2014 | BRIAN DUFFY                                                  |
|                                                                                                            | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b>                                                                                           |                                                   |            |                                                              |
|                                                                                                            | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |
| Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional) |                                                   |            | Preparer's telephone number (optional)                       |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor Name <input type="checkbox"/> Same as Plan Sponsor Address                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>3b</b> Administrator's EIN<br><br><b>3c</b> Administrator's telephone number<br><br><div style="background-color: #cccccc; height: 40px; width: 100%;"></div> |
| <b>4</b> 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:<br><b>a</b> Sponsor's name                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>4b</b> EIN<br><br><b>4c</b> PN                                                                                                                                |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                                    | <b>5</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 9876                                                                                                                                                             |
| <b>6</b> Number of participants as of the end of the plan year (welfare plans complete only lines <b>6a</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
| <b>a</b> Active participants .....                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>6a</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2682                                                                                                                                                             |
| <b>b</b> Retired or separated participants receiving benefits .....                                                                                                                                                                                                                                                                                                                                                                                        | <b>6b</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 4094                                                                                                                                                             |
| <b>c</b> Other retired or separated participants entitled to future benefits.....                                                                                                                                                                                                                                                                                                                                                                          | <b>6c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2042                                                                                                                                                             |
| <b>d</b> Subtotal. Add lines <b>6a</b> , <b>6b</b> , and <b>6c</b> .....                                                                                                                                                                                                                                                                                                                                                                                   | <b>6d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 8818                                                                                                                                                             |
| <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits .....                                                                                                                                                                                                                                                                                                                                                 | <b>6e</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 844                                                                                                                                                              |
| <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....                                                                                                                                                                                                                                                                                                                                                                                                    | <b>6f</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 9662                                                                                                                                                             |
| <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....                                                                                                                                                                                                                                                                                                            | <b>6g</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                  |
| <b>h</b> Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested .....                                                                                                                                                                                                                                                                                                                | <b>6h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 58                                                                                                                                                               |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....                                                                                                                                                                                                                                                                                                                        | <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                  |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br><b>1A</b>                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
| <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
| <b>9a</b> Plan funding arrangement (check all that apply)<br><b>(1)</b> <input type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor                                                                                                                                  | <b>9b</b> Plan benefit arrangement (check all that apply)<br><b>(1)</b> <input type="checkbox"/> Insurance<br><b>(2)</b> <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br><b>(3)</b> <input checked="" type="checkbox"/> Trust<br><b>(4)</b> <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                              |                                                                                                                                                                  |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                  |
| <b>a Pension Schedules</b><br><b>(1)</b> <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)<br><br><b>(2)</b> <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary<br><br><b>(3)</b> <input checked="" type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary | <b>b General Schedules</b><br><b>(1)</b> <input checked="" type="checkbox"/> <b>H</b> (Financial Information)<br><b>(2)</b> <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)<br><b>(3)</b> <input type="checkbox"/> <b>A</b> (Insurance Information)<br><b>(4)</b> <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)<br><b>(5)</b> <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)<br><b>(6)</b> <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules) |                                                                                                                                                                  |

|                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><br>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).<br><br>▶ <b>File as an attachment to Form 5500 or 5500-SF.</b> | OMB No. 1210-0110<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

▶ **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.

|                                                                                                                                           |                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.</u>                                                                | <b>B</b> Three-digit plan number (PN) ▶ <u>001</u>                                                                                                      |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br><u>SKF USA INC.</u>                                           | <b>D</b> Employer Identification Number (EIN)<br><u>23-1043740</u>                                                                                      |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|                                                                                                                                                                                                                |                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| <b>Part I</b>                                                                                                                                                                                                  | <b>Basic Information</b>                  |
| <b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2013</u>                                                                                                                              |                                           |
| <b>2</b> Assets:                                                                                                                                                                                               |                                           |
| <b>a</b> Market value .....                                                                                                                                                                                    | <b>2a</b> <u>593026474</u>                |
| <b>b</b> Actuarial value .....                                                                                                                                                                                 | <b>2b</b> <u>593695320</u>                |
| <b>3</b> Funding target/participant count breakdown:                                                                                                                                                           |                                           |
| <b>a</b> For retired participants and beneficiaries receiving payment.....                                                                                                                                     | <b>3a</b> <u>4959</u> <u>373449188</u>    |
| <b>b</b> For terminated vested participants.....                                                                                                                                                               | <b>3b</b> <u>2097</u> <u>55496579</u>     |
| <b>c</b> For active participants:                                                                                                                                                                              |                                           |
| <b>(1)</b> Non-vested benefits .....                                                                                                                                                                           | <b>3c(1)</b> <u>14535511</u>              |
| <b>(2)</b> Vested benefits .....                                                                                                                                                                               | <b>3c(2)</b> <u>223670402</u>             |
| <b>(3)</b> Total active.....                                                                                                                                                                                   | <b>3c(3)</b> <u>2839</u> <u>238205913</u> |
| <b>d</b> Total.....                                                                                                                                                                                            | <b>3d</b> <u>9895</u> <u>667151680</u>    |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                          |                                           |
| <b>a</b> Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                      | <b>4a</b>                                 |
| <b>b</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..... | <b>4b</b>                                 |
| <b>5</b> Effective interest rate .....                                                                                                                                                                         | <b>5</b> <u>6.30</u> %                    |
| <b>6</b> Target normal cost .....                                                                                                                                                                              | <b>6</b> <u>18907878</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.

|                                                                   |                               |                                        |
|-------------------------------------------------------------------|-------------------------------|----------------------------------------|
| <b>SIGN HERE</b>                                                  |                               | <u>10/13/2014</u>                      |
|                                                                   | Signature of actuary          | Date                                   |
| <u>GERALD E. HOPPER</u>                                           | Type or print name of actuary | <u>14-03618</u>                        |
|                                                                   |                               | Most recent enrollment number          |
| <u>BUCK CONSULTANTS, LLC</u>                                      | Firm name                     | <u>610-651-8550</u>                    |
|                                                                   |                               | Telephone number (including area code) |
| <u>200 BERWYN PARK, SUITE 110</u><br><u>BERWYN, PA 19312-1178</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) 2013**  
**v. 130118**

| <b>Part II Beginning of Year Carryover and Prefunding Balances</b>                                                                         |                       |                        |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
|                                                                                                                                            | (a) Carryover balance | (b) Prefunding balance |
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                   | 29822704              | 0                      |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                | 17487282              | 0                      |
| <b>9</b> Amount remaining (line 7 minus line 8) .....                                                                                      | 12335422              | 0                      |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>8.65</u> % .....                                                       | 1067014               |                        |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                             |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                            |                       | 169453                 |
| <b>b</b> Interest on (a) using prior year's effective interest rate of <u>6.99</u> % except as otherwise provided (see instructions) ..... |                       | 14658                  |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                              |                       | 184111                 |
| <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                            |                       | 0                      |
| <b>12</b> Other reductions in balances due to elections or deemed elections .....                                                          | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....                                               | 13402436              | 0                      |

| <b>Part III Funding Percentages</b>                                                                                                                                        |           |         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 86.98 % |
| <b>15</b> Adjusted funding target attainment percentage .....                                                                                                              | <b>15</b> | 87.04 % |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 97.78 % |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....                                        | <b>17</b> | %       |

| <b>Part IV Contributions and Liquidity Shortfalls</b>                                    |                                   |                                 |                          |                                   |                                 |
|------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
| <b>18</b> Contributions made to the plan for the plan year by employer(s) and employees: |                                   |                                 |                          |                                   |                                 |
| (a) Date<br>(MM-DD-YYYY)                                                                 | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
| 10/15/2013                                                                               | 7000000                           | 0                               |                          |                                   |                                 |
| 01/15/2014                                                                               | 7000000                           | 0                               |                          |                                   |                                 |
| 04/11/2014                                                                               | 50000                             | 0                               |                          |                                   |                                 |
| 09/10/2014                                                                               | 11500000                          | 0                               |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ►</b>                                                                          |                                   |                                 | <b>18(b)</b>             | 25550000                          | <b>18(c)</b> 0                  |

|                                                                                                                                      |                                                                     |          |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----------|
| <b>19</b> Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: |                                                                     |          |
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years. ....                                 | <b>19a</b>                                                          | 0        |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                                   | <b>19b</b>                                                          | 0        |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date .....              | <b>19c</b>                                                          | 23659253 |
| <b>20</b> Quarterly contributions and liquidity shortfalls:                                                                          |                                                                     |          |
| <b>a</b> Did the plan have a "funding shortfall" for the prior year? .....                                                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |          |
| <b>b</b> If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? .....              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |          |
| <b>c</b> If line 20a is "Yes," see instructions and complete the following table as applicable:                                      |                                                                     |          |

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



**Part V Assumptions Used to Determine Funding Target and Target Normal Cost**

|                                                                                                                                                                                              |                       |                       |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                                                                                                                                                                     |                       |                       |                                                     |
| <b>a</b> Segment rates:                                                                                                                                                                      | 1st segment:<br>4.94% | 2nd segment:<br>6.15% | 3rd segment:<br>6.76 %                              |
|                                                                                                                                                                                              |                       |                       | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code).....                                                                                                                                                  |                       |                       | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age .....                                                                                                                                              |                       |                       | <b>22</b> 63                                        |
| <b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                       |                       |                                                     |

**Part VI Miscellaneous Items**

|                                                                                                                                                                        |                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ....                                      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>26</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment. ....                                   | <b>27</b>                                                           |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

|                                                                                                                                     |           |   |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>28</b> Unpaid minimum required contributions for all prior years .....                                                           | <b>28</b> | 0 |
| <b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... | <b>29</b> | 0 |
| <b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29) .....                                   | <b>30</b> | 0 |

**Part VIII Minimum Required Contribution For Current Year**

|                                                                                                                                                                                      |                   |                     |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------|---------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                   |                     |               |
| <b>a</b> Target normal cost (line 6).....                                                                                                                                            |                   | <b>31a</b>          | 18907878      |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           |                   | <b>31b</b>          | 0             |
| <b>32</b> Amortization installments:                                                                                                                                                 |                   | Outstanding Balance | Installment   |
| <b>a</b> Net shortfall amortization installment.....                                                                                                                                 |                   | 86858796            | 18110262      |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       |                   | 0                   | 0             |
| <b>33</b> 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 ..... |                   | <b>33</b>           |               |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) ..                                                            |                   | <b>34</b>           | 37018140      |
|                                                                                                                                                                                      | Carryover balance | Prefunding balance  | Total balance |
| <b>35</b> Balances elected for use to offset funding requirement.....                                                                                                                | 13402436          | 0                   | 13402436      |
| <b>36</b> Additional cash requirement (line 34 minus line 35).....                                                                                                                   | <b>36</b>         |                     | 23615704      |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....                                                   | <b>37</b>         |                     | 23659253      |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                   |                     |               |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       |                   | <b>38a</b>          | 43549         |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                |                   | <b>38b</b>          | 43549         |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>         |                     | 0             |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>         |                     | 0             |

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

|                                                                                                |           |                                                                                                                         |  |
|------------------------------------------------------------------------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:                |           |                                                                                                                         |  |
| <b>a</b> Schedule elected .....                                                                |           | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |  |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made .....               |           | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |  |
| <b>42</b> Amount of acceleration adjustment .....                                              | <b>42</b> |                                                                                                                         |  |
| <b>43</b> Excess installment acceleration amount to be carried over to future plan years ..... | <b>43</b> |                                                                                                                         |  |

|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        |                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>SCHEDULE C</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Service Provider Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br><br>▶ <b>File as an attachment to Form 5500.</b> | OMB No. 1210-0110                              |
|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        | <b>2013</b>                                    |
|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        | <b>This Form is Open to Public Inspection.</b> |

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

|                                                                                      |                                                                    |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.</u>           | <b>B</b> Three-digit plan number (PN) ▶ <u>001</u>                 |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>SKF USA INC.</u> | <b>D</b> Employer Identification Number (EIN)<br><u>23-1043740</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  
THE BANK OF NEW YORK MELLON  
  
13-5160382

**(b)** Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation  
DIVERSIFIED RETIREMENT CORPORATION  
  
13-3689044

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

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

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

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

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

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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)

PBGC

1075 INNER LOOP ROAD  
ATLANTA, GA 30337

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 99                     | NONE                                                                                              | 1927233                                                                | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

SILCHESTER INTERNATIONAL

36-7045783

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 381267                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

COOK &amp; BEILER

23-1393932

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 374532                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

THE BANK OF NEW YORK MELLON

13-5160382

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 21                     | NONE                                                                                              | 300739                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

CAPLIN & DRYSDALE

52-1226629

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 29                     | NONE                                                                                              | 277041                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

LEUTHOLD WEEDEN CAPITAL MGT

25-1695810

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 242228                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

D.F. DENT & COMPANY INC.

52-1045317

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 240776                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

DANA IVESTMENT ADVISORS INC.

39-1512278

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 188608                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

THE MITCHELL GROUP

76-0278678

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 137181                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

DIVERSIFIED RETIREMENT CORPORATION

13-3689044

| (b)<br>Service Code(s)                 | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|----------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 11 12 15 28<br>38 51 59 61<br>62 63 64 | NONE                                                                                              | 91383                                                                  | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                  | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                            | 0                                                                                                                                                                               | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                          |

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

LOWREY ASSET CONSULTANTS, LLC

35-1273938

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 16                     | NONE                                                                                              | 84975                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

DRIEHAUS INVESTMENTS

13-2824414

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 78938                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

HILLSWICK ASSET MANAGEMENT

90-0172984

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 77834                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

BUCK CONSULTANTS

13-3954297

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 11 17                  | NONE                                                                                              | 75190                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

RICH HALL JAMES & ASSOCIATES

43-1992528

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 63147                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |



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

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

MERCER US INC.

13-2834414

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 11 17                  | NONE                                                                                              | 61016                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

J. P. MORGAN INVESTMENT MANAGEMENT

13-3200244

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 43244                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

RAMPART INVESTMENT MANAGEMENT

04-2894573

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 30000                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

PARENTEBEARD

23-9232984

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 10                     | NONE                                                                                              | 18200                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

COLIN'S COPY CENTER

23-2134217

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 36                     | NONE                                                                                              | 7835                                                                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

**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<br>(see instructions)                                                                                                                            | (c) Enter amount of indirect<br>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<br>(see instructions)                                                                                                                            | (c) Enter amount of indirect<br>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<br>(see instructions)                                                                                                                            | (c) Enter amount of indirect<br>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)

|                                                                                              |                                  |
|----------------------------------------------------------------------------------------------|----------------------------------|
| <b>a</b> Name: PARENTEBEARD LLC                                                              | <b>b</b> EIN: 23-2932984         |
| <b>c</b> Position: AUDITOR                                                                   |                                  |
| <b>d</b> Address: 1 LIBERTY PLACE<br>1650 NAKETS STREET SUITE 4500<br>PHILADELPHIA, PA 19103 | <b>e</b> Telephone: 215-557-2282 |
|                                                                                              |                                  |

Explanation: AS OF 10/01/2014, PARENTBEARD LLC MERGED INTO AND BECAME BAKER TILLY VIRCHOW KRAUSE, LLP (EIN 39-0859910. THIS WAS NOT A TERMINATION OF AUDITOR; IT SUBSEQUENT TO THE PLAN YEAR IS A CHANGE IN NAME & EIN DUE TO MERGER.

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p style="text-align: center;"><b>SCHEDULE D</b><br/><b>(Form 5500)</b></p> <p style="text-align: center; font-size: small;">Department of the Treasury<br/>Internal Revenue Service</p> <hr/> <p style="text-align: center; font-size: small;">Department of Labor<br/>Employee Benefits Security Administration</p> | <p style="text-align: center;"><b>DFE/Participating Plan Information</b></p> <p style="text-align: center; font-size: small;">This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p style="text-align: center; font-weight: bold;">▶ File as an attachment to Form 5500.</p> | <p style="text-align: center; font-size: small;">OMB No. 1210-0110</p> <hr/> <p style="text-align: center; font-size: large; font-weight: bold;">2013</p> <hr/> <p style="text-align: center; font-size: small;">This Form is Open to Public Inspection.</p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

|                                                                                             |                                                                    |            |
|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------|
| <b>A</b> Name of plan<br><u>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.</u>                  | <b>B</b> Three-digit plan number (PN) ▶                            | <u>001</u> |
| <b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500<br><u>SKF USA INC.</u> | <b>D</b> Employer Identification Number (EIN)<br><u>23-1043740</u> |            |

|               |                                                                                                                                                                                  |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b> | <b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b><br>(Complete as many entries as needed to report all interests in DFEs) |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                              |                               |                                                                                                                     |
|----------------------------------------------------------------------------------------------|-------------------------------|---------------------------------------------------------------------------------------------------------------------|
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>SILCHESTER INTERNATIONAL INVESTORS</u>     |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>SILCHESTER INTERNATIONAL</u>            |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>36-7045783-001</u>                                                        | <b>d</b> Entity code <u>E</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>50399830</u> |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>JPM STRATEGIC MANAGEMENT</u>               |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>JPM PROPERTY MANAGEMENT</u>             |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>13-6038770-001</u>                                                        | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>34212860</u> |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>DONALD SMITH &amp; COMPANY GROUP TRUST</u> |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL SERVICES</u>        |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>04-3258361-001</u>                                                        | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>23722120</u> |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>SEI TRUST COMPANY</u>                      |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>THORNBURG DEVELOPING WORLD FUND</u>     |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>45-2433249-003</u>                                                        | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>19186489</u> |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB TEMPORARY INVESTMENTS</u>               |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>THE BANK OF NEW YORK MELLON</u>         |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>04-3258361-001</u>                                                        | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>13126784</u> |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>DIVERSIFIED COLLECTIVE TRUST FUNDS</u>     |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a): <u>DIVERSIFIED RETIREMENT CORPORATION</u>  |                               |                                                                                                                     |
| <b>c</b> EIN-PN <u>45-2433249-003</u>                                                        | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>145232</u>   |
| <b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:                                               |                               |                                                                                                                     |
| <b>b</b> Name of sponsor of entity listed in (a):                                            |                               |                                                                                                                     |
| <b>c</b> EIN-PN                                                                              | <b>d</b> Entity code          | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)                 |

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

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

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

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



|                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                              |                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Financial Information</b><br><br>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).<br><br><b>▶ File as an attachment to Form 5500.</b> | OMB No. 1210-0110<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
| For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>                                                                                                                  |                                                                                                                                                                                                                                                                              |                                                                                           |
| <b>A</b> Name of plan<br><u>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.</u>                                                                                                                                                |                                                                                                                                                                                                                                                                              | <b>B</b> Three-digit plan number (PN) <span style="float: right;"><u>001</u></span>       |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>SKF USA INC.</u>                                                                                                                                      |                                                                                                                                                                                                                                                                              | <b>D</b> Employer Identification Number (EIN)<br><br><u>23-1043740</u>                    |

| Part I Asset and Liability Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                       |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------|-----------------|
| <b>1</b> 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. <b>Round off amounts to the nearest dollar.</b> MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions. |                 |                       |                 |
| Assets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 | (a) Beginning of Year | (b) End of Year |
| <b>a</b> Total noninterest-bearing cash .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>1a</b>       |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                       |                 |
| (1) Employer contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1b(1)</b>    | 1500000               | 18550000        |
| (2) Participant contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>1b(2)</b>    |                       |                 |
| (3) Other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>1b(3)</b>    | 37013157              | 668024          |
| <b>c</b> General investments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |                       |                 |
| (1) Interest-bearing cash (include money market accounts & certificates of deposit).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>1c(1)</b>    | 10528                 |                 |
| (2) U.S. Government securities .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>1c(2)</b>    | 68105572              | 70528148        |
| (3) Corporate debt instruments (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                       |                 |
| (A) Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>1c(3)(A)</b> | 27623317              | 27389318        |
| (B) All other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>1c(3)(B)</b> | 1938210               | 2702430         |
| (4) Corporate stocks (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |                       |                 |
| (A) Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>1c(4)(A)</b> |                       |                 |
| (B) Common.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(4)(B)</b> | 155439954             | 218729703       |
| (5) Partnership/joint venture interests .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>1c(5)</b>    | 30920975              | 21952640        |
| (6) Real estate (other than employer real property).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>1c(6)</b>    | 6600000               | 5850000         |
| (7) Loans (other than to participants) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>1c(7)</b>    |                       |                 |
| (8) Participant loans.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(8)</b>    |                       |                 |
| (9) Value of interest in common/collective trusts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1c(9)</b>    | 46732252              | 90393985        |
| (10) Value of interest in pooled separate accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>1c(10)</b>   |                       |                 |
| (11) Value of interest in master trust investment accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1c(11)</b>   |                       |                 |
| (12) Value of interest in 103-12 investment entities.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>1c(12)</b>   | 43394880              | 50399830        |
| (13) Value of interest in registered investment companies (e.g., mutual funds).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>1c(13)</b>   | 173679540             | 144708611       |
| (14) Value of funds held in insurance company general account (unallocated contracts).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(14)</b>   |                       |                 |
| (15) Other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(15)</b>   | 136800                |                 |

**1d** Employer-related investments:

|                                                                      |              | (a) Beginning of Year | (b) End of Year |
|----------------------------------------------------------------------|--------------|-----------------------|-----------------|
| (1) Employer securities .....                                        | <b>1d(1)</b> |                       |                 |
| (2) Employer real property .....                                     | <b>1d(2)</b> |                       |                 |
| <b>e</b> Buildings and other property used in plan operation .....   | <b>1e</b>    |                       |                 |
| <b>f</b> Total assets (add all amounts in lines 1a through 1e) ..... | <b>1f</b>    | 593095185             | 651872689       |

**Liabilities**

|                                                                           |           |   |   |
|---------------------------------------------------------------------------|-----------|---|---|
| <b>g</b> Benefit claims payable .....                                     | <b>1g</b> |   |   |
| <b>h</b> Operating payables .....                                         | <b>1h</b> |   |   |
| <b>i</b> Acquisition indebtedness .....                                   | <b>1i</b> |   |   |
| <b>j</b> Other liabilities .....                                          | <b>1j</b> |   |   |
| <b>k</b> Total liabilities (add all amounts in lines 1g through 1j) ..... | <b>1k</b> | 0 | 0 |

**Net Assets**

|                                                           |           |           |           |
|-----------------------------------------------------------|-----------|-----------|-----------|
| <b>l</b> Net assets (subtract line 1k from line 1f) ..... | <b>1l</b> | 593095185 | 651872689 |
|-----------------------------------------------------------|-----------|-----------|-----------|

**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 Contributions:**

|                                                                                                            |                 | (a) Amount | (b) Total |
|------------------------------------------------------------------------------------------------------------|-----------------|------------|-----------|
| (1) Received or receivable in cash from: <b>(A)</b> Employers .....                                        | <b>2a(1)(A)</b> | 25550000   |           |
| <b>(B)</b> Participants .....                                                                              | <b>2a(1)(B)</b> |            |           |
| <b>(C)</b> Others (including rollovers) .....                                                              | <b>2a(1)(C)</b> |            |           |
| (2) Noncash contributions .....                                                                            | <b>2a(2)</b>    |            |           |
| (3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> ..... | <b>2a(3)</b>    |            | 25550000  |

**b Earnings on investments:****(1) Interest:**

|                                                                                                       |                 |           |          |
|-------------------------------------------------------------------------------------------------------|-----------------|-----------|----------|
| <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....  | <b>2b(1)(A)</b> | -371      |          |
| <b>(B)</b> U.S. Government securities .....                                                           | <b>2b(1)(B)</b> | 2302407   |          |
| <b>(C)</b> Corporate debt instruments .....                                                           | <b>2b(1)(C)</b> | 1186162   |          |
| <b>(D)</b> Loans (other than to participants) .....                                                   | <b>2b(1)(D)</b> |           |          |
| <b>(E)</b> Participant loans .....                                                                    | <b>2b(1)(E)</b> |           |          |
| <b>(F)</b> Other .....                                                                                | <b>2b(1)(F)</b> |           |          |
| <b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....                         | <b>2b(1)(G)</b> |           | 3488198  |
| (2) Dividends: <b>(A)</b> Preferred stock .....                                                       | <b>2b(2)(A)</b> |           |          |
| <b>(B)</b> Common stock .....                                                                         | <b>2b(2)(B)</b> | 2771159   |          |
| <b>(C)</b> Registered investment company shares (e.g. mutual funds) .....                             | <b>2b(2)(C)</b> | 3610865   |          |
| <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....             | <b>2b(2)(D)</b> |           | 6382024  |
| (3) Rents .....                                                                                       | <b>2b(3)</b>    |           | 861417   |
| (4) Net gain (loss) on sale of assets: <b>(A)</b> Aggregate proceeds .....                            | <b>2b(4)(A)</b> | 169241834 |          |
| <b>(B)</b> Aggregate carrying amount (see instructions) .....                                         | <b>2b(4)(B)</b> | 158799309 |          |
| <b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....             | <b>2b(4)(C)</b> |           | 10442525 |
| (5) Unrealized appreciation (depreciation) of assets: <b>(A)</b> Real estate .....                    | <b>2b(5)(A)</b> | -750000   |          |
| <b>(B)</b> Other .....                                                                                | <b>2b(5)(B)</b> | 42218051  |          |
| <b>(C)</b> Total unrealized appreciation of assets.<br>Add lines <b>2b(5)(A)</b> and <b>(B)</b> ..... | <b>2b(5)(C)</b> |           | 41468051 |

|                                                                                                 |        | (a) Amount | (b) Total |
|-------------------------------------------------------------------------------------------------|--------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts .....                              | 2b(6)  |            | 7735928   |
| (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)  |            | 11924949  |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) ..... | 2b(10) |            | -3726180  |
| c Other income .....                                                                            | 2c     |            |           |
| d Total income. Add all <b>income</b> amounts in column (b) and enter total .....               | 2d     |            | 104126912 |

**Expenses**

|                                                                                      |       |          |          |
|--------------------------------------------------------------------------------------|-------|----------|----------|
| e Benefit payment and payments to provide benefits:                                  |       |          |          |
| (1) Directly to participants or beneficiaries, including direct rollovers .....      | 2e(1) | 40645611 |          |
| (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) |          | 40645611 |
| 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) | 533095   |          |
| (2) Contract administrator fees .....                                                | 2i(2) | 300739   |          |
| (3) Investment advisory and management fees .....                                    | 2i(3) | 1942730  |          |
| (4) Other .....                                                                      | 2i(4) | 1927233  |          |
| (5) Total administrative expenses. Add lines 2i(1) through (4) .....                 | 2i(5) |          | 4703797  |
| j Total expenses. Add all <b>expense</b> amounts in column (b) and enter total ..... | 2j    |          | 45349408 |

**Net Income and Reconciliation**

|                                                          |       |  |          |
|----------------------------------------------------------|-------|--|----------|
| k Net income (loss). Subtract line 2j from line 2d ..... | 2k    |  | 58777504 |
| 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: **BAKER TILLY VIRCHOW KRAUSE LLP**

(2) EIN: **39-0859910**

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

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

**Part IV Compliance Questions**

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

During the plan year:

**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.) .....

**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.) .....

|    | Yes | No | Amount |
|----|-----|----|--------|
| 4a |     | X  |        |
| 4b |     | X  |        |

|                                                                                                                                                                                                                               | Yes | No | Amount  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|---------|
| <b>c</b> 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  |         |
| <b>d</b> 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  |         |
| <b>e</b> Was this plan covered by a fidelity bond? .....                                                                                                                                                                      | X   |    | 5000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....                                                                                       |     | X  |         |
| <b>g</b> 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  |         |
| <b>h</b> 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  |         |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) .....                                                                | X   |    |         |
| <b>j</b> 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   |    |         |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....                                                           |     | X  |         |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan? .....                                                                                                                                            |     | X  |         |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....                                                                                                  |     |    |         |
| <b>n</b> 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. ....                                      |     |    |         |

**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) |
|-----------------------|--------------|-------------|
|                       |              |             |
|                       |              |             |
|                       |              |             |
|                       |              |             |

**5c** If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? .... ☒ Yes ☐ No ☐ Not determined

## Part V Trust Information (optional)

|                         |                       |
|-------------------------|-----------------------|
| <b>6a</b> Name of trust | <b>6b</b> Trust's EIN |
|                         |                       |

|                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <div>SCHEDULE R<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration<br/><br/>Pension Benefit Guaranty Corporation</div>                                                                                                                              | <div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div> | <div>OMB No. 1210-0110</div> <div>2013</div> <div>This Form is Open to Public Inspection.</div> |
| For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| A Name of plan<br>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                 | B Three-digit plan number (PN) ▶ 001                                                            |
| C Plan sponsor's name as shown on line 2a of Form 5500<br>SKF USA INC.                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                 | D Employer Identification Number (EIN)<br>23-1043740                                            |
| Part I Distributions                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| All references to distributions relate only to payments of benefits during the plan year.                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                 | 1 0                                                                                             |
| 2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):<br><br>EIN(s): 25-1926855 13-3689044                                                                                              |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 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 1                                                                                             |
| Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 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?..... <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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?..... <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A    |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| Part III Amendments                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... <input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Both <input checked="" type="checkbox"/> No |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 11 a Does the ESOP hold any preferred stock? ..... <input type="checkbox"/> Yes <input type="checkbox"/> 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.)..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| 12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                 |                                                                                                 |
| Schedule R (Form 5500) 2013 v. 130118                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                 |                                                                                                 |

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

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

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

**a** Name of contributing employer

**b** EIN

**c** Dollar amount contributed by employer

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

**e** Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): \_\_\_\_\_

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

|                                                                          |            |  |
|--------------------------------------------------------------------------|------------|--|
| <b>a</b> The current year .....                                          | <b>14a</b> |  |
| <b>b</b> The plan year immediately preceding the current plan year ..... | <b>14b</b> |  |
| <b>c</b> The second preceding plan year .....                            | <b>14c</b> |  |

- 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:

|                                                                                                       |            |  |
|-------------------------------------------------------------------------------------------------------|------------|--|
| <b>a</b> The corresponding number for the plan year immediately preceding the current plan year ..... | <b>15a</b> |  |
| <b>b</b> The corresponding number for the second preceding plan year .....                            | <b>15b</b> |  |

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

|                                                                                                                                                                        |            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|
| <b>a</b> Enter the number of employers who withdrew during the preceding plan year .....                                                                               | <b>16a</b> |  |
| <b>b</b> If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers ..... | <b>16b</b> |  |

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

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

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

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

**a** Enter the percentage of plan assets held as:  
 Stock: 38% Investment-Grade Debt: 15% High-Yield Debt: 0% Real Estate: 8% Other: 39%

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

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

**Pension Plan for Employees of  
SKF USA Inc.**

Financial Statements and  
Supplementary Information

December 31, 2013 and 2012



**BAKER TILLY**

Candor. Insight. Results.



# **Pension Plan for Employees of SKF USA Inc.**

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December 31, 2013 and 2012

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## **Independent Auditors' Report**

Participants and Plan Administrator  
Pension Plan for Employees of SKF USA Inc.

### **Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of the Pension Plan for Employees of SKF USA Inc. (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2013 and 2012, the related statement of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 31, 2012 and 2011, and the related statement of changes in accumulated plan benefits for the year ended December 31, 2012 and the related notes to the financial statements.

### **Management's Responsibility for the Financial Statements**

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

### **Auditors' Responsibility**

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

### **Basis for Disclaimer of Opinion**

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform and we did not perform, any auditing procedures with respect to the information summarized in Note 10, which was certified by The Bank of New York Mellon/BNY Mellon N.A. and State Street Bank and Trust Company, the trustees of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustees hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained a certification from the trustees as of December 31, 2013 and 2012, and for the years then ended, that the information provided to the plan administrator by the trustees is complete and accurate.

## **Disclaimer of Opinion**

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

## **Other Matter**

The supplemental schedule, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2013, is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

The supplemental Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2013 that accompanies the Plan's financial statements does not disclose the historical cost of certain nonparticipant directed plan assets held by the Plan trustee. Disclosure of this information is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

## **Report on Form and Content in Compliance With DOL Rules and Regulations**

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustees, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, except for the omission of the information discussed in the Other Matters paragraph, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

*Baker Tilly Viechow Krause, LLP*

Philadelphia, Pennsylvania  
October 14, 2014

## **Pension Plan for Employees of SKF USA Inc.**

### **Statement of Net Assets Available for Benefits**

December 31, 2013 and 2012

|                                       | <b>2013</b>    | <b>2012</b>    |
|---------------------------------------|----------------|----------------|
| <b>Assets</b>                         |                |                |
| Investments, at fair value:           |                |                |
| Interest in SKF USA Inc. Master Trust | \$ 626,335,713 | \$ 547,982,028 |
| Real estate                           | 5,850,000      | 6,600,000      |
| Other                                 | 145,232        | -              |
| Total investments                     | 632,330,945    | 554,582,028    |
| Receivables:                          |                |                |
| Employer contribution                 | 18,550,000     | 1,500,000      |
| Rental income receivable              | 991,744        | 130,327        |
| Total receivables                     | 19,541,744     | 1,630,327      |
| Total assets                          | 651,872,689    | 556,212,355    |
| <b>Liabilities</b>                    | -              | -              |
| Net assets available for benefits     | \$ 651,872,689 | \$ 556,212,355 |

*See notes to financial statements*

**Pension Plan for Employees of SKF USA Inc.**

## Statement of Changes in Net Assets Available for Benefits

Years Ended December 31, 2013 and 2012

|                                            | <u>2013</u>           | <u>2012</u>           |
|--------------------------------------------|-----------------------|-----------------------|
| <b>Additions</b>                           |                       |                       |
| Investment income:                         |                       |                       |
| Plan interest in SKF USA Inc. Master Trust |                       |                       |
| net income                                 | \$ 72,786,775         | \$ 43,726,264         |
| Net appreciation in other investments      | 3,809,869             | -                     |
| Net depreciation in fair value             |                       |                       |
| of real estate                             | (750,000)             | (700,000)             |
| Rental income                              | 861,417               | 563,511               |
|                                            | <u>76,708,061</u>     | <u>43,589,775</u>     |
| Net investment income                      |                       |                       |
|                                            | <u>76,708,061</u>     | <u>43,589,775</u>     |
| Transfer in (Note 1)                       | 36,882,830            | -                     |
| Reimbursement to Plan (Note 9)             | -                     | 2,845,776             |
| Employer contribution                      | 25,550,000            | 7,665,787             |
|                                            | <u>139,140,891</u>    | <u>54,101,338</u>     |
| Total additions                            |                       |                       |
|                                            | <u>139,140,891</u>    | <u>54,101,338</u>     |
| <b>Deductions</b>                          |                       |                       |
| Benefits paid to participants              | 40,642,225            | 37,302,401            |
| Administrative expenses                    | 2,838,332             | 2,044,679             |
|                                            | <u>43,480,557</u>     | <u>39,347,080</u>     |
| Total deductions                           |                       |                       |
|                                            | <u>43,480,557</u>     | <u>39,347,080</u>     |
| Net increase in net assets                 |                       |                       |
| available for benefits                     | 95,660,334            | 14,754,258            |
| <b>Net Assets Available for Benefits</b>   |                       |                       |
| Beginning of year                          | <u>556,212,355</u>    | <u>541,458,097</u>    |
| End of year                                | <u>\$ 651,872,689</u> | <u>\$ 556,212,355</u> |

See notes to financial statements

## **Pension Plan for Employees of SKF USA Inc.**

### **Statement of Accumulated Plan Benefits**

December 31, 2012 and 2011

|                                                                 | <b>January 1, *<br/>2013</b> | <b>January 1, *<br/>2012</b> |
|-----------------------------------------------------------------|------------------------------|------------------------------|
| <b>Actuarial Present Value of Accumulated<br/>Plan Benefits</b> |                              |                              |
| Vested benefits:                                                |                              |                              |
| Participants currently receiving payments                       | \$ 432,766,843               | \$ 393,449,845               |
| Other participants                                              | <u>393,692,413</u>           | <u>317,359,145</u>           |
| Total vested benefits                                           | 826,459,256                  | 710,808,990                  |
| Nonvested benefits                                              | <u>19,059,892</u>            | <u>20,763,000</u>            |
| <b>Actuarial Present Value of Accumulated<br/>Plan Benefits</b> | <u><u>\$ 845,519,148</u></u> | <u><u>\$ 731,571,990</u></u> |

\* The actuarial present value of the accumulated plan benefits presented is based upon actuarial valuations prepared by the Plan's actuary, Buck Consultants as of January 1, 2013 and Mercer Human Resource Consulting as of January 1, 2012.

## **Pension Plan for Employees of SKF USA Inc.**

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### Statement of Changes in Accumulated Plan Benefits

Year Ended December 31, 2012

#### **Actuarial Present Value of Accumulated Plan Benefits, Beginning of Year**

\$ 731,571,990

#### **Increase (Decrease) During the Year Attributable to**

|                                                          |                   |
|----------------------------------------------------------|-------------------|
| Increase for interest due to decrease in discount period | 32,582,829        |
| Benefits paid                                            | (34,456,623)      |
| Benefits accumulated and losses                          | 23,635,169        |
| Plan amendments                                          | 3,094,703         |
| Effect of Lincoln merger with SKF                        | 48,338,742        |
| Change in actuarial assumptions                          | <u>40,752,338</u> |

#### **Actuarial Present Value of Accumulated Plan Benefits, End of Year**

\$ 845,519,148

*See notes to financial statements*

## **Pension Plan for Employees of SKF USA**

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Notes to Financial Statements  
December 31, 2013 and 2012

### **1. Description of The Plan**

The following description of the Pension Plan for Employees of SKF USA Inc. (the "Plan") is provided for general information purposes only. Participants should refer to the plan document for a more complete description of the Plan's provisions.

#### **General**

The Plan is a noncontributory defined benefit plan covering hourly and salaried employees of SKF USA Inc. (the "Company") at certain plants and locations as defined in the plan document and amendments thereto.

The assets of the Plan except real estate and investments from the former trustee of the Lincoln Industrial Corporation Omnibus Plan, (the "Lincoln Plan") are maintained by The Bank of New York Mellon/BNY Mellon N.A. (the "Trustee") in the SKF USA Inc. Master Trust ("Master Trust"). Independent investment advisors are responsible for investment decisions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

The Plan owns property, consisting of two parcels of real property, located in Hanover, PA and Glasgow, KY.

Effective January 1, 2013, the Plan was amended to reflect the provisions applicable to certain salaried employees of Lincoln Industrial Corporation, a wholly-owned subsidiary of SKF, by reason of the merger of the Lincoln Plan into the Plan. The merger, effective December 31, 2012, resulted in the transfer in of assets of \$36,882,830 in 2013. Any participant in the Lincoln Plan with a benefit immediately prior to the merger shall have a benefit immediately after the merger which is equal to or greater than the benefit he/she would have been entitled to receive immediately before the merger.

The Plan was amended effective January 1, 2013 to exclude any new employees hired on or after January 1, 2013. A person who was a participant in the Plan on December 31, 2012 shall remain a member of the Plan on and after January 1, 2013 and will be eligible to continue to accrue vesting service and benefit service, the period in which a participant is active and accruing benefits.

The Plan evaluated subsequent events for the recognition or disclosure through October 14, 2014, the date the financial statements were available to be issued.



## **Pension Plan for Employees of SKF USA**

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Notes to Financial Statements  
December 31, 2013 and 2012

### **Pension Benefits**

Participants are entitled to annual pension benefits upon attaining certain age and service requirements as defined in the plan document. A participant's benefits are fully vested after five years of service as defined in the plan document. If a participant terminates before rendering five years of service, all rights to receive benefits from the Plan are forfeited. Benefits are calculated in accordance with plan provisions and are paid by the Trustee.

The Plan permits early retirement at ages 55 to 64 for participants with five or more years of credited service. Participants generally elect to receive the value of their accumulated plan benefits in the form of a life annuity (if single) or 50% qualified joint and survivor annuity (if married) upon retirement or termination.

### **Death and Disability Benefits**

If a married participant dies on or after completion of five years of vesting service but before their annuity starting date, their surviving spouse will receive a benefit payable for life, as defined by the Plan. Any such benefit will be in addition to any automatic surviving spouse benefit provided in accordance with the plan document.

Active participants who become permanently disabled after completion of ten years of credited service are entitled to a disability benefit as defined by the plan document.

## **2. Summary of Significant Accounting Policies**

### **Basis of Accounting**

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

### **Use of Estimates**

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

### **Payment of Benefits**

Benefit payments to participants are recorded upon distribution.

## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
December 31, 2013 and 2012

### Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 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 income of the Plan's interest in the Master Trust and other investments includes gains and losses on investments bought and sold as well as held during the year. The depreciation in fair value of the Plan's real estate is recorded in the accompanying Statement of Changes in Net Assets available for Plan Benefits based on the fair market value change as of December 31, 2013 and 2012.

### Reclassification

Certain prior period balances were reclassified to conform to current year presentation.

### Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on annual compensation and years of credited service. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment are included to the extent they are attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits presented below is determined by the Plan's actuary as of January 1, 2013 and 2012. The actuarial present value of accumulated plan benefits 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.

Significant actuarial assumptions underlying the actuarial computations as of January 1, 2013 and 2012 are:

|                                    |                                                                                        |
|------------------------------------|----------------------------------------------------------------------------------------|
| a) Life expectancy of participants | RP2000 Mortality table separate for males and females projected to 2017 using scale AA |
| b) Retirement age assumptions      | 55-65 - Early and Normal                                                               |
| c) Investment return               | 7.50% 2013 (7.00% 2012)                                                                |
| d) Discount rate                   | 4.13% 2013 (4.56% 2012)                                                                |

## **Pension Plan for Employees of SKF USA**

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Notes to Financial Statements  
December 31, 2013 and 2012

During 2012, the Plan's actuary adjusted the investment return rate from 7.00% to 7.50% and the discount rate from 4.56% to 4.13%. Also, the salary increase factors were changed from 5.00% per annum for all SKF participants to a graded salary scale which varies by age. These changes were made to better reflect the Plan's experience and the actuary's estimate of future plan performance which resulted in a \$40,752,338 increase in the actuarial present value of accumulated plan benefits for the year ended December 31, 2012. The Plan was amended in 2012 to increase the monthly multiplier for certain participants from \$30 to \$34 and the monthly temporary supplemental benefit payable to participants of the former MRC-TRW Bearings Division-UAW Hourly Pension Plan was increased from \$2,350 to \$2,400 effective November 1, 2012. These changes resulted in a \$3,094,703 increase in the actuarial present value of accumulated plan benefits for the year ended December 31, 2012. Additionally, as of December 31, 2012 the Lincoln Plan obligation was merged into the Plan resulting in a \$48,338,742 increase in the actuarial present value of accumulated plan benefits.

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

### **Administrative Expenses**

The Plan's expenses are paid either by the Plan or the Company, as provided by the plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. In addition, certain investment related expenses are included in the Plan's interest in SKF USA Inc. Master Trust and net appreciation of fair value of other investments presented in the accompanying Statement of Changes in Net Assets Available for Benefits.

### **3. Fair Value Measurements**

The Plan measures its investments at fair value on a recurring basis in accordance with accounting principles generally accepted in the United States of America. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The framework that the authoritative guidance establishes for measuring fair value includes a hierarchy used to classify the inputs used in measuring fair value. The hierarchy prioritizes the inputs used in determining valuations into three levels. The level in the fair value hierarchy within which the fair value measurement falls is determined based on the lowest level input that is significant to the fair value measurement. The levels of the fair value hierarchy are as follows:

Level 1 - Fair value is based on unadjusted quoted prices in active markets that are accessible to the Plan for identical assets. These generally provide the most reliable evidence and are used to measure fair value whenever available.

Level 2 - Fair value is based on significant inputs, other than Level 1 inputs, that are observable either directly or indirectly for substantially the full term of the asset through corroboration with observable market data. Level 2 inputs include quoted market prices in active markets for similar assets or liabilities, quoted market prices in inactive markets for identical or similar assets, and other observable inputs.

## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
December 31, 2013 and 2012

Level 3 - Fair value would be based on significant unobservable inputs. Examples of valuation methodologies that would result in Level 3 classification include option pricing models, discounted cash flows, and similar techniques.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2013 and 2012.

Short term investments consists of the EB Temporary Investment Fund II, valued at the quoted net asset value ("NAV") of shares held by the Master Trust at year end, and U.S. Treasury securities are valued based on quoted prices on the active market for identical assets.

Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Master Trust are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Master Trust are deemed to be actively traded.

Common stocks are valued based on quoted prices on the active market for identical assets.

Corporate debt obligations are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

U.S. government agency securities and international government securities are valued using pricing models maximizing the use of observable inputs for similar securities.

Common collective trusts consists of the Silchester International Equity Group Trust and State Street Donald Trust and are valued based on the NAV of shares held by the Plan at year end calculated in consideration with the fair value of the underlying securities. The objective of the Silchester International Equity Group Trust is to increase capital and achieve competitive growth levels of income. The underlying assets of this trust includes international equities and international trusts. The trust has no unfunded commitments or significant redemption restrictions as of December 31, 2013 and 2012. The objective of the State Street Donald Trust is to increase capital. The underlying assets of this trust includes domestic equity securities and collective investment funds. The trust has no unfunded commitments or significant redemption restrictions as of December 31, 2013.

The collective trusts are valued at the NAV of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business fashion.

## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
December 31, 2013 and 2012

Private equity funds consists of debt and capital markets and real estate.

Debt and capital market equity funds are valued based upon the NAV of fund held by the Master Trust at year end. Debt and capital market private equity funds' objectives are to provide long term capital growth through investing in international governmental and corporate obligations, joint capital ventures and international securities. The Master Trust considers fair value measurements based on valuations provided by the general partners of the funds. The values assigned to private equity funds are based upon the general partners estimates and assessment of each underlying investment, incorporating valuation techniques that consider the evaluation of financing and sale transactions with third parties, expected cash flows and market-based information, including comparable transactions, and performance multiples, among other factors. The debt and capital markets private equity funds have unfunded commitments and significant redemption restrictions as of December 31, 2013 and 2012, but restrictions do not limit the funds from transacting at the NAV in future periods.

Real estate private equity funds' objectives are to provide long term capital growth through the investment in real property domestically and internationally. The values assigned to real estate private equity funds are based upon third party appraisals of the underlying investments which incorporate expected cash flow models and market-based information, including comparable transactions. The real estate equity funds have unfunded commitments and significant redemption restrictions as of December 31, 2013 and 2012, but restrictions do not limit the funds from transacting at the NAV in future periods.

Real estate commingled funds' objectives are to provide long term capital growth through the investment in real property domestically and internationally. The values assigned to real estate commingled funds are based upon third party appraisals of the underlying investments which incorporate expected cash flow models and market-based information, including comparable transactions. The real estate commingled funds have unfunded commitments and significant redemption restrictions as of December 31, 2013 and 2012, but restrictions do not limit the funds from transacting at the NAV in future periods.

Real estate is considered a Level 3 fair value measurement due to the use of significant unobservable inputs. The valuation incorporates the discounted cash flow and the comparable sale methodologies. The discounted cash flow methodology utilizes a 10-year model that discounts projected annual debt-free cash flows of the real estate. This methodology reflects the risk adjustments for vacancy rates inherent in the long-term lease agreements based on industry standard guidelines. The sales comparison methodology is intended to estimate a value through comparable improved sales within a competitive geographical area relevant to the specific real estate held by the Plan. This methodology reflects the risk adjustments for timing, location and physical characteristics.

Other investment is a level 2 investment, valued at a daily calculated unit value, an observable input, but not traded in an active market or exchange.

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

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2013 and 2012:

| Assets at Fair Value as of December 31, 2013                   |         |            |              |              |
|----------------------------------------------------------------|---------|------------|--------------|--------------|
|                                                                | Level 1 | Level 2    | Level 3      | Total        |
| Other                                                          | \$ -    | \$ 145,232 | \$ -         | 145,232      |
| Real estate investment                                         | -       | -          | 5,850,000    | \$ 5,850,000 |
| Total assets,<br>excluding plan<br>interest in Master<br>Trust | \$ -    | \$ 145,232 | \$ 5,850,000 | \$ 5,995,232 |
| Assets at Fair Value as of December 31, 2012                   |         |            |              |              |
| Real estate investment                                         | \$ -    | \$ -       | \$ 6,600,000 | \$ 6,600,000 |
| Total assets,<br>excluding plan<br>interest in Master<br>Trust | \$ -    | \$ -       | \$ 6,600,000 | \$ 6,600,000 |

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ending December 31, 2013 and 2012:

|                                                                            | Real<br>Estate |
|----------------------------------------------------------------------------|----------------|
| Balance, at January 1, 2012                                                | \$ 7,300,000   |
| Unrealized losses relating to instruments still held at the reporting date | (700,000)      |
| Balance, at December 31, 2012                                              | 6,600,000      |
| Unrealized gains relating to instruments still held at the reporting date  | (750,000)      |
| Balance, at December 31, 2013                                              | \$ 5,850,000   |

The unrealized losses included in the changes in net assets for the period above are reported in net depreciation in fair value of real estate in the Statement of Changes in Net Assets Available for Benefits.

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

### Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's level 3 investments in real estate, the valuation techniques used to measure the fair value of these investments in real estate, and the significant unobservable inputs and the ranges of values for those inputs.

| December 31, 2013        |              |                                     |                                                 |          |
|--------------------------|--------------|-------------------------------------|-------------------------------------------------|----------|
| Investments              | Fair Value   | Valuation Techniques                | Unobservable Inputs                             | Ranges   |
| Real estate - industrial | \$ 5,850,000 | Discounted cash flow (DCF) analysis | Vacancy rate                                    | 15%      |
|                          |              |                                     | Exit capitalization rate                        | 10%      |
|                          |              |                                     | DCF term (years)                                | 10 years |
|                          |              | Comparable sale method (market)     | Location discount rate                          |          |
|                          |              |                                     | Time and physical Characteristic discount rates | 5 - 30%  |
|                          |              |                                     |                                                 | 5 - 45%  |
| December 31, 2012        |              |                                     |                                                 |          |
| Real estate - industrial | \$ 6,600,000 | Discounted cash flow (DCF) analysis | Vacancy rate                                    | 15%      |
|                          |              |                                     | Exit capitalization rate                        | 10%      |
|                          |              |                                     | DCF term (years)                                | 10 years |
|                          |              | Comparable sale method (market)     | Location discount rate                          |          |
|                          |              |                                     | Time and physical Characteristic discount rates | 5 - 30%  |
|                          |              |                                     |                                                 | 5 - 45%  |

#### 4. Investments

During 2013 and 2012, the Plan's investment in real estate depreciated in value by \$750,000 and \$700,000, respectively. During 2013, the Plan's other investments appreciated in value by \$3,809,869.

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

### 5. Interest in Master Trust

The Plan has a 100% undivided interest in the Master Trust which was established for the investment of assets of the Plan. The assets of the Master Trust are held by The Bank of New York Mellon/BNY Mellon N.A., the trustee. The value of the Plan's interest is based on the beginning of year value of the Plan's interest in the trust plus actual contributions and allocated investment income less actual distributions and allocated administrative expenses. Investment income and administrative expenses relating to the Master Trust are allocated based on the Plan's interest in the net assets of the Master Trust. The following table presents the assets of the Master Trust at December 31, 2013 and 2012:

|                                     | <u>2013</u>           | <u>2012</u>           |
|-------------------------------------|-----------------------|-----------------------|
| Investments, at fair value:         |                       |                       |
| Short term investments              | \$ 13,126,784         | \$ 10,653,134         |
| Mutual funds                        | 163,895,103           | 173,679,539           |
| Common stocks                       | 217,407,391           | 155,185,427           |
| Corporate debt obligations          | 30,091,748            | 29,561,527            |
| U.S. government agency securities   | 68,204,461            | 65,663,524            |
| International government securities | 2,249,696             | 2,442,048             |
| Common collective trusts            | 74,121,950            | 62,193,063            |
| Private equity funds                | 21,952,640            | 30,920,975            |
| Real estate commingled funds        | 34,212,860            | 17,291,463            |
|                                     | <u>625,262,633</u>    | <u>547,590,700</u>    |
| Investments, at fair value          |                       |                       |
|                                     | 625,262,633           | 547,590,700           |
| Pending sales and purchases, net    | <u>1,073,080</u>      | <u>391,328</u>        |
| Total net assets                    | <u>\$ 626,335,713</u> | <u>\$ 547,982,028</u> |

During 2013 and 2012, the Master Trust investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated (depreciated) in value as follows:

|                                | <u>2013</u>          | <u>2012</u>          |
|--------------------------------|----------------------|----------------------|
| Mutual funds                   | \$ (3,039,691)       | \$ 6,443,481         |
| Common stocks                  | 54,626,764           | 15,471,380           |
| Corporate debt obligation      | (1,976,253)          | 284,081              |
| U.S. government securities     | (4,443,371)          | (450,388)            |
| Common collective trusts       | 11,924,950           | 6,287,068            |
| Real estate commingled funds   | 6,931,349            | 7,898,447            |
|                                | <u>64,023,748</u>    | <u>35,934,069</u>    |
| Net appreciation in fair value |                      |                      |
|                                | <u>\$ 64,023,748</u> | <u>\$ 35,934,069</u> |



## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
December 31, 2013 and 2012

The following are the changes in net assets for the Master Trust for the years ended December 31, 2013 and 2012:

|                                               | <b>2013</b>                  | <b>2012</b>                  |
|-----------------------------------------------|------------------------------|------------------------------|
| Net appreciation in fair value of investments | \$ 64,023,748                | \$ 35,934,069                |
| Interest and dividends                        | <u>10,239,515</u>            | <u>9,543,044</u>             |
| Total investment income                       | 74,263,263                   | 45,477,113                   |
| Investment expense                            | <u>(1,476,488)</u>           | <u>(1,750,849)</u>           |
| Net investment income in the Master Trust     | 72,786,775                   | 43,726,264                   |
| Transfer in                                   | 38,316,114                   | -                            |
| Other income                                  | -                            | 6,266,973                    |
| Contributions                                 | 8,500,000                    | 8,110,787                    |
| Benefit payments                              | (38,501,403)                 | (37,302,401)                 |
| Administrative expenses                       | <u>(2,747,801)</u>           | <u>(2,044,679)</u>           |
| Increase in net assets in the Master Trust    | 78,353,685                   | 18,756,944                   |
| Net assets:                                   |                              |                              |
| Beginning of year                             | <u>547,982,028</u>           | <u>529,225,084</u>           |
| End of year                                   | <u><u>\$ 626,335,713</u></u> | <u><u>\$ 547,982,028</u></u> |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
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The following table sets forth by level, within the fair value hierarchy, the Master Trust's fair value measurements at December 31, 2013:

|                                            | Master Trust Assets at Fair Value as of December 31, 2013 |         |         |               |
|--------------------------------------------|-----------------------------------------------------------|---------|---------|---------------|
|                                            | Level 1                                                   | Level 2 | Level 3 | Total         |
| Short-term investments                     | \$ 13,126,784                                             | \$ -    | \$ -    | \$ 13,126,784 |
| Mutual funds:                              |                                                           |         |         |               |
| Equity fund                                | 21,866,164                                                | -       | -       | 21,866,164    |
| Fixed income fund                          | 135,499,680                                               | -       | -       | 135,499,680   |
| International equity                       | 6,529,259                                                 | -       | -       | 6,529,259     |
| Total mutual funds                         | 163,895,103                                               | -       | -       | 163,895,103   |
| Common stocks:                             |                                                           |         |         |               |
| Advertising                                | 2,502,046                                                 | -       | -       | 2,502,046     |
| Aerospace and defense                      | 5,245,430                                                 | -       | -       | 5,245,430     |
| Agriculture                                | 1,743,346                                                 | -       | -       | 1,743,346     |
| Airlines                                   | 3,337,177                                                 | -       | -       | 3,337,177     |
| Apparel                                    | 868,764                                                   | -       | -       | 868,764       |
| Auto                                       | 1,235,158                                                 | -       | -       | 1,235,158     |
| Banks equity                               | 10,402,186                                                | -       | -       | 10,402,186    |
| Beverages-UK equity                        | 1,469,685                                                 | -       | -       | 1,469,685     |
| Biotechnology                              | 3,265,860                                                 | -       | -       | 3,265,860     |
| Chemicals equity                           | 2,878,622                                                 | -       | -       | 2,878,622     |
| Commercial services                        | 17,755,992                                                | -       | -       | 17,755,992    |
| Computers                                  | 8,330,488                                                 | -       | -       | 8,330,488     |
| Cosmetics and personal care                | 2,217,469                                                 | -       | -       | 2,217,469     |
| Diversified financial services equity      | 11,593,591                                                | -       | -       | 11,593,591    |
| Electric                                   | 1,909,869                                                 | -       | -       | 1,909,869     |
| Electric components and equipment equity   | 213,313                                                   | -       | -       | 213,313       |
| Electronics                                | 5,185,821                                                 | -       | -       | 5,185,821     |
| Engineering and construction               | 1,960,581                                                 | -       | -       | 1,960,581     |
| Entertainment                              | 233,138                                                   | -       | -       | 233,138       |
| Environmental control equity               | 4,369,875                                                 | -       | -       | 4,369,875     |
| Real estate investment trust (REIT) equity | 1,279,550                                                 | -       | -       | 1,279,550     |
| Food processing                            | 3,165,249                                                 | -       | -       | 3,165,249     |
| Forest products                            | 627,584                                                   | -       | -       | 627,584       |
| Gas                                        | 464,100                                                   | -       | -       | 464,100       |
| Health care equity                         | 3,796,052                                                 | -       | -       | 3,796,052     |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
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| Master Trust Assets at Fair Value as of December 31, 2013 |             |            |         |             |
|-----------------------------------------------------------|-------------|------------|---------|-------------|
|                                                           | Level 1     | Level 2    | Level 3 | Total       |
| Health care services equity                               | 5,660,358   | -          | -       | 5,660,358   |
| Home builders                                             | 1,390,244   | -          | -       | 1,390,244   |
| Home furnishing equity                                    | 690,184     | -          | -       | 690,184     |
| Household                                                 | 1,954,169   | -          | -       | 1,954,169   |
| Insurance                                                 | 11,890,790  | -          | -       | 11,890,790  |
| Internet equity                                           | 3,860,100   | -          | -       | 3,860,100   |
| Leisure time equity                                       | 1,904,729   | -          | -       | 1,904,729   |
| Lodging                                                   | 883,604     | -          | -       | 883,604     |
| Machinery-diversified equity                              | 1,601,199   | -          | -       | 1,601,199   |
| Media equity                                              | 2,768,364   | -          | -       | 2,768,364   |
| Miscellaneous manufacturer equity                         | 4,264,082   | -          | -       | 4,264,082   |
| Oil and gas equity                                        | 21,057,339  | -          | -       | 21,057,339  |
| Oil and gas services equity                               | 6,376,508   | -          | -       | 6,376,508   |
| Packaging products                                        | 3,694,739   | -          | -       | 3,694,739   |
| Pharmaceuticals equity                                    | 9,918,506   | -          | -       | 9,918,506   |
| Pipelines                                                 | 748,258     | -          | -       | 748,258     |
| Retail equity                                             | 13,268,509  | -          | -       | 13,268,509  |
| Semiconductors equity                                     | 5,753,557   | -          | -       | 5,753,557   |
| Software equity                                           | 12,526,075  | -          | -       | 12,526,075  |
| Telecommunications equity                                 | 1,620,386   | -          | -       | 1,620,386   |
| Transportation equity                                     | 3,848,660   | -          | -       | 3,848,660   |
| Wholesale dist equity                                     | 5,676,085   | -          | -       | 5,676,085   |
| Total common stocks                                       | 217,407,391 | -          | -       | 217,407,391 |
| Corporate debt obligations:                               |             |            |         |             |
| AAA                                                       | -           | 1,757,836  | -       | 1,757,836   |
| AA+                                                       | -           | 2,326,137  | -       | 2,326,137   |
| AA                                                        | -           | 1,923,640  | -       | 1,923,640   |
| AA-                                                       | -           | 4,982,285  | -       | 4,982,285   |
| A+                                                        | -           | 6,453,782  | -       | 6,453,782   |
| A                                                         | -           | 8,848,271  | -       | 8,848,271   |
| A-                                                        | -           | 2,831,396  | -       | 2,831,396   |
| Bbb+                                                      | -           | 968,401    | -       | 968,401     |
| Total corporate debt obligations                          | -           | 30,091,748 | -       | 30,091,748  |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
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|                                     | Master Trust Assets at Fair Value as of December 31, 2013 |             |            |             |
|-------------------------------------|-----------------------------------------------------------|-------------|------------|-------------|
|                                     | Level 1                                                   | Level 2     | Level 3    | Total       |
| U.S. government securities          | -                                                         | 68,204,461  | -          | 68,204,461  |
| International government securities | -                                                         | 2,249,696   | -          | 2,249,696   |
| Common collective trusts, Equity    | -                                                         | 74,121,950  | -          | 74,121,950  |
| Private equity funds:               |                                                           |             |            |             |
| Debt and capital markets            | -                                                         | -           | 8,659,403  | 8,659,403   |
| Real estate                         | -                                                         | -           | 13,293,237 | 13,293,237  |
| Total private equity                | -                                                         | -           | 21,952,640 | 21,952,640  |
| Real estate commingled funds        | -                                                         | -           | 34,212,860 | 34,212,860  |
| Total assets at fair value          | \$ 394,429,278                                            | 174,667,855 | 56,165,500 | 625,262,633 |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

The following table sets forth by level, within the fair value hierarchy, the Master Trust's fair value measurements at December 31, 2012:

|                                          | Master Trust Assets at Fair Value as of December 31, 2012 |         |         |               |
|------------------------------------------|-----------------------------------------------------------|---------|---------|---------------|
|                                          | Level 1                                                   | Level 2 | Level 3 | Total         |
| Short-term investments                   | \$ 10,653,134                                             | \$ -    | \$ -    | \$ 10,653,134 |
| Mutual funds:                            |                                                           |         |         |               |
| Equity fund                              | 5,305,324                                                 | -       | -       | 5,305,324     |
| Fixed income fund                        | 147,187,932                                               | -       | -       | 147,187,932   |
| International equity                     | 21,186,283                                                | -       | -       | 21,186,283    |
| Total mutual funds                       | 173,679,539                                               | -       | -       | 173,679,539   |
| Common stocks:                           |                                                           |         |         |               |
| Advertising                              | 2,088,353                                                 | -       | -       | 2,088,353     |
| Aerospace and defense                    | 1,968,102                                                 | -       | -       | 1,968,102     |
| Agriculture                              | 1,229,508                                                 | -       | -       | 1,229,508     |
| Airlines                                 | 953,282                                                   | -       | -       | 953,282       |
| Banks equity                             | 8,260,216                                                 | -       | -       | 8,260,216     |
| Basic industries equity                  | 754,418                                                   | -       | -       | 754,418       |
| Beverages-UK equity                      | 1,270,407                                                 | -       | -       | 1,270,407     |
| Biotechnology                            | 1,539,962                                                 | -       | -       | 1,539,962     |
| Building materials                       | 219,224                                                   | -       | -       | 219,224       |
| Business services equity                 | 776,216                                                   | -       | -       | 776,216       |
| Capital goods equity                     | 1,052,706                                                 | -       | -       | 1,052,706     |
| Chemicals equity                         | 4,733,809                                                 | -       | -       | 4,733,809     |
| Commercial services                      | 7,896,028                                                 | -       | -       | 7,896,028     |
| Computers                                | 3,858,460                                                 | -       | -       | 3,858,460     |
| Consumer non-durables equity             | 438,579                                                   | -       | -       | 438,579       |
| Consumer services equity                 | 1,075,477                                                 | -       | -       | 1,075,477     |
| Cosmetics and personal care              | 2,122,384                                                 | -       | -       | 2,122,384     |
| Diversified financial services equity    | 5,289,064                                                 | -       | -       | 5,289,064     |
| Electric                                 | 1,648,268                                                 | -       | -       | 1,648,268     |
| Electric components and equipment equity | 159,436                                                   | -       | -       | 159,436       |
| Electronics                              | 3,422,289                                                 | -       | -       | 3,422,289     |
| Energy equity                            | 1,473,720                                                 | -       | -       | 1,473,720     |
| Engineering and construction             | 929,942                                                   | -       | -       | 929,942       |
| Entertainment                            | 125,181                                                   | -       | -       | 125,181       |
| Environmental control equity             | 1,756,348                                                 | -       | -       | 1,756,348     |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

| Master Trust Assets at Fair Value as of December 31, 2012 |             |         |         |             |
|-----------------------------------------------------------|-------------|---------|---------|-------------|
|                                                           | Level 1     | Level 2 | Level 3 | Total       |
| Real estate investment trust (REIT) equity                | 3,515,007   | -       | -       | 3,515,007   |
| Financial services equity                                 | 2,053,542   | -       | -       | 2,053,542   |
| Food processing                                           | 1,379,178   | -       | -       | 1,379,178   |
| Forest products                                           | 565,728     | -       | -       | 565,728     |
| Gas                                                       | 581,660     | -       | -       | 581,660     |
| Hand/Machine tools                                        | 331,758     | -       | -       | 331,758     |
| Health care equity                                        | 5,799,688   | -       | -       | 5,799,688   |
| Health care services equity                               | 5,111,080   | -       | -       | 5,111,080   |
| Home builders                                             | 1,585,003   | -       | -       | 1,585,003   |
| Home furnishing equity                                    | 318,306     | -       | -       | 318,306     |
| Household                                                 | 371,492     | -       | -       | 371,492     |
| Insurance                                                 | 3,180,497   | -       | -       | 3,180,497   |
| Internet equity                                           | 2,242,605   | -       | -       | 2,242,605   |
| Leisure time equity                                       | 902,342     | -       | -       | 902,342     |
| Lodging                                                   | 585,310     | -       | -       | 585,310     |
| Machinery-construction and mining                         | 263,450     | -       | -       | 263,450     |
| Machinery-diversified equity                              | 2,925,992   | -       | -       | 2,925,992   |
| Media equity                                              | 521,285     | -       | -       | 521,285     |
| Miscellaneous manufacturer equity                         | 3,381,663   | -       | -       | 3,381,663   |
| Oil and gas equity                                        | 14,729,864  | -       | -       | 14,729,864  |
| Oil and gas services equity                               | 3,393,592   | -       | -       | 3,393,592   |
| Other equity                                              | 405,574     | -       | -       | 405,574     |
| Packaging products                                        | 1,659,823   | -       | -       | 1,659,823   |
| Pharmaceuticals equity                                    | 7,683,824   | -       | -       | 7,683,824   |
| Pipelines                                                 | 772,731     | -       | -       | 772,731     |
| Retail equity                                             | 9,297,273   | -       | -       | 9,297,273   |
| Semiconductors equity                                     | 1,632,125   | -       | -       | 1,632,125   |
| Software equity                                           | 7,663,202   | -       | -       | 7,663,202   |
| Technology equity                                         | 1,063,486   | -       | -       | 1,063,486   |
| Telecommunications equity                                 | 6,264,277   | -       | -       | 6,264,277   |
| Textiles                                                  | 858,900     | -       | -       | 858,900     |
| Toys and hobbies                                          | 574,934     | -       | -       | 574,934     |
| Transportation equity                                     | 5,251,727   | -       | -       | 5,251,727   |
| Wholesale dist equity                                     | 3,277,130   | -       | -       | 3,277,130   |
| Total common stocks                                       | 155,185,427 | -       | -       | 155,185,427 |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
December 31, 2013 and 2012

| Master Trust Assets at Fair Value as of December 31, 2012 |                |                |               |                |
|-----------------------------------------------------------|----------------|----------------|---------------|----------------|
|                                                           | Level 1        | Level 2        | Level 3       | Total          |
| Corporate debt obligations:                               |                |                |               |                |
| AAA                                                       | -              | 703,303        | -             | 703,303        |
| AA+                                                       | -              | 2,423,153      | -             | 2,423,153      |
| AA-                                                       | -              | 6,422,000      | -             | 6,422,000      |
| A+                                                        | -              | 7,315,866      | -             | 7,315,866      |
| A                                                         | -              | 9,572,452      | -             | 9,572,452      |
| A-                                                        | -              | 3,124,753      | -             | 3,124,753      |
| Total corporate debt obligations                          | -              | 29,561,527     | -             | 29,561,527     |
| U.S. government securities                                | -              | 65,663,524     | -             | 65,663,524     |
| International government securities                       | -              | 2,442,048      | -             | 2,442,048      |
| Common collective trusts, Equity                          | -              | 62,193,063     | -             | 62,193,063     |
| Private equity funds:                                     |                |                |               |                |
| Debt and capital markets                                  | -              | -              | 9,219,640     | 9,219,640      |
| Real estate                                               | -              | -              | 21,701,335    | 21,701,335     |
| Total private equity                                      | -              | -              | 30,920,975    | 30,920,975     |
| Real estate commingled funds                              | -              | -              | 17,291,463    | 17,291,463     |
| Total assets at fair value                                | \$ 339,518,100 | \$ 159,860,162 | \$ 48,212,438 | \$ 547,590,700 |

## Pension Plan for Employees of SKF USA

Notes to Financial Statements  
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The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the years ending December 31, 2013 and 2012:

|                                                                               | Fair Value Measurements at Reporting Date Using<br>Significant Unobservable Inputs (Level 3) |                                    |                      |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------|----------------------|
|                                                                               | Private<br>Equity                                                                            | Real Estate<br>Commingled<br>Funds | Total                |
| Balance, at January 1, 2012                                                   | \$ 33,713,803                                                                                | \$ 45,977,201                      | \$ 79,691,004        |
| Unrealized gains relating to instruments still<br>held at the reporting date  | 131,752                                                                                      | (8,828,298)                        | (8,696,546)          |
| Realized gains                                                                | 301,659                                                                                      | 13,477,721                         | 13,779,380           |
| Income                                                                        | 1,034,365                                                                                    | -                                  | 1,034,365            |
| Sales                                                                         | (4,522,384)                                                                                  | (33,335,161)                       | (37,857,545)         |
| Purchases                                                                     | 261,780                                                                                      | -                                  | 261,780              |
| Balance, at December 31, 2012                                                 | 30,920,975                                                                                   | 17,291,463                         | 48,212,438           |
| Unrealized losses relating to instruments still<br>held at the reporting date | (205,502)                                                                                    | 1,693,269                          | 1,487,767            |
| Realized gains                                                                | -                                                                                            | 1,046,340                          | 1,046,340            |
| Sales                                                                         | (8,869,542)                                                                                  | (2,018,212)                        | (10,887,754)         |
| Purchases                                                                     | 106,709                                                                                      | 16,200,000                         | 16,306,709           |
| Balance, at December 31, 2013                                                 | <u>\$ 21,952,640</u>                                                                         | <u>\$ 34,212,860</u>               | <u>\$ 56,165,500</u> |

Gains and losses (realized and unrealized) included in changes in net assets for the period above are reported in plan interest in Master Trust net income in the Statement of Changes in Net Assets Available for Benefit.

The following table presents the investments that represent 5 percent or more of the Master Trust's net assets:

|                                    | 2013           | 2012        |
|------------------------------------|----------------|-------------|
| Mutual funds:                      |                |             |
| Pimco Long-Term Credit Fund        | \$ 116,279,373 | \$ *        |
| JPMCB Strategic Property           | 34,212,860     | *           |
| Silchester International Investors | 50,399,830     | 43,394,880  |
| Pimco Short Term Fund              | *              | 137,638,109 |

\* Investment did not represent 5% or more of the Master Trust's net assets.



## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
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### 6. Funding Policy

The Company's contributions are determined by an independent actuary. The Company's contribution is actuarially computed annually based on the Projected Unit Credit Actuarial Cost Method. The present policy of the Company is to fund current service costs on a current basis and to amortize prior service costs over the remaining service life of the active participants. The Company met the minimum funding requirements of ERISA in 2013 and 2012.

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

### 7. Plan Termination

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

- 1) Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.
- 2) Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. Governmental agency) up to the applicable limitations (discussed below).
- 3) All other vested benefits (that is, vested benefits not insured by the PBGC).
- 4) All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor'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. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

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

## **Pension Plan for Employees of SKF USA**

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Notes to Financial Statements  
December 31, 2013 and 2012

### **8. Related-Party and Party In Interest Transactions**

The Plan owns property, consisting of two parcels of real property that is leased by one of the Company's subsidiaries. The properties are or have been used in the manufacturing of bearings.

The market value of the properties directly owned by the Plan has been determined by periodic independent appraisals as disclosed in Note 3.

The Hanover property is leased for 10 years ending in 2017, at which time renewal options are available. The Glasgow property is currently vacant, however a sale agreement is pending as of the issuance date of these financial statements.

The investments have been determined to be qualifying employer real property as defined by the regulations of ERISA.

The Plan's investments are administered under a contract with The Bank of New York Mellon/BNY Mellon N.A. and State Street Bank and Trust Company, the trustees of the Plan. Contributions are held and managed by the The Bank of New York Mellon/BNY Mellon N.A. and State Street Bank and Trust Company, who invests cash received, interest, and dividend income and makes distributions to participants. These transactions qualify as party in interest transactions which are exempt from the prohibited transactions rules of ERISA.

Certain expenses of The Bank of New York Mellon/BNY Mellon N.A. and State Street Bank and Trust Company are paid by the Plan related to plan operations and investment activity described in Note 1. Additionally, certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

### **9. Tax Status**

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter, dated June 20, 2012, that the Plan is designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed and is currently being operated in accordance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2013, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

## **Pension Plan for Employees of SKF USA**

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Notes to Financial Statements  
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During the 2012 plan year, the Plan identified certain operational and administrative process errors. In order to prevent the Plan from incurring a qualification defect, the Company has taken the necessary corrective action in accordance with the acceptable correction methods of the IRS Employee Plans Compliance Resolution System ("EPCRS"). The Company engaged external legal counsel to resolve these issues and has taken the necessary corrective actions for remediation to include reimbursement to the Plan. The Company believes the Plan has maintained its tax-exempt status. Therefore, no provision for income taxes has been included in the Plan's financial statements.

### **10. Information Certified by Trustees**

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2013 and 2012. Accordingly, The Bank of New York Mellon/BNY Mellon N.A. and State Street Bank and Trust Company, the trustees of the Plan, have certified to the completeness and accuracy of all investments, excluding the Plan's real estate investments, reported in the accompanying Statement of Net Assets Available for Benefits as of December 31, 2013 and 2012, and the related investment activity, except rental income and net depreciation in the fair value of real estate, reported on the Statement of Changes in Net Assets Available for Benefits for the years ended December 31, 2013 and 2012.

### **11. Risks and Uncertainties**

The Plan invests in the Master Trust which holds various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statement of Net Assets Available for Benefits.

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

In addition, the valuation of real estate, which is determined by an independent appraiser, may differ significantly from the values that would have been used had a readily ascertainable market for the real estate existed, and the differences could materially affect the amounts reported in the Statement of Net Assets Available for Benefits.

## Pension Plan for Employees of SKF USA

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Notes to Financial Statements  
December 31, 2013 and 2012

### 12. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits on the financial statements to Form 5500 as of December 31, 2012. There were no reconciling items as of December 31, 2013:

|                                                               | <u>2012</u>           |
|---------------------------------------------------------------|-----------------------|
| Net assets available for benefits on the financial statements | \$ 556,212,355        |
| Transfer in of assets of the Lincoln Plan                     | <u>36,882,830</u>     |
| Net assets available for benefits on the Form 5500            | <u>\$ 593,097,197</u> |

The following is a reconciliation of the increase in net assets available for benefits on the financial statements to Form 5500 for the year ended December 31, 2013:

|                                                                                                   | <u>2013</u>          |
|---------------------------------------------------------------------------------------------------|----------------------|
| Increase in net assets available for benefit per the financial statements                         | \$ 95,660,334        |
| Transfer in of assets of the Lincoln Plan                                                         | <u>(36,882,830)</u>  |
| Total increase in net assets available for benefit per the financial statements per the Form 5500 | <u>\$ 58,777,504</u> |

## Pension Plan for Employees of SKF USA Inc.

EIN: 23-1043740 Plan Number: 001

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2013

| (a) | Identity of Issue (b)                          | Description of Investment (c) | Cost (d)     | Current Value (e) |
|-----|------------------------------------------------|-------------------------------|--------------|-------------------|
| *   | Diversified Investment Advisors Core Bond Fund | Other                         | **           | 145,232           |
| *   | Real Estate                                    | Manufacturing facilities      | \$ 7,550,000 | \$ 5,850,000      |

\* Party in interest as defined by ERISA.

\*\* Cost information is not available from this custodian. This information is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

|                            |                                            |             |            |
|----------------------------|--------------------------------------------|-------------|------------|
| <b>Plan Name</b>           | PENSION PLAN FOR EMPLOYEES OF SKF USA INC. | <b>EIN:</b> | 23-1043740 |
| <b>Plan Sponsor's Name</b> | SKF USA INC.                               | <b>PN:</b>  | 001        |

[illegible]

**Pension Plan for Employees of SKF USA, Inc.**

**EIN / PN: 23-1043740 / 001**

**Schedule SB, Line 22 - Description of Weighted Average Retirement Age**

This table calculates the weighted average retirement age for all active persons in the plan.

| <b>(1)</b><br><b>Age</b>                                          | <b>(2)</b><br><b>Expected Active<br/>Headcount</b> | <b>(3)</b><br><b>Retirement<br/>Rate</b> | <b>(4)</b><br><b>Expected<br/>Retirements<br/>(2)*(3)</b> | <b>(5)</b><br><b>Weighted Age<br/>(1)*(4)</b> |
|-------------------------------------------------------------------|----------------------------------------------------|------------------------------------------|-----------------------------------------------------------|-----------------------------------------------|
| 55                                                                | 1,074.5733                                         | 0.0384                                   | 41.3081                                                   | 2,271.9429                                    |
| 56                                                                | 1,156.3156                                         | 0.0379                                   | 43.8412                                                   | 2,455.1071                                    |
| 57                                                                | 1,194.7308                                         | 0.0392                                   | 46.8599                                                   | 2,671.0129                                    |
| 58                                                                | 1,240.7212                                         | 0.0389                                   | 48.2193                                                   | 2,796.7195                                    |
| 59                                                                | 1,274.7835                                         | 0.0399                                   | 50.8210                                                   | 2,998.4368                                    |
| 60                                                                | 1,303.9356                                         | 0.0830                                   | 108.2484                                                  | 6,494.9061                                    |
| 61                                                                | 1,267.7290                                         | 0.0912                                   | 115.5981                                                  | 7,051.4811                                    |
| 62                                                                | 1,202.8257                                         | 0.3273                                   | 393.6301                                                  | 24,405.0632                                   |
| 63                                                                | 837.7154                                           | 0.2714                                   | 227.3815                                                  | 14,325.0326                                   |
| 64                                                                | 652.5747                                           | 0.2180                                   | 142.2627                                                  | 9,104.8126                                    |
| 65                                                                | 535.2725                                           | 0.9912                                   | 530.5359                                                  | 34,484.8336                                   |
| 66                                                                | 38.5369                                            | 0.8733                                   | 33.6534                                                   | 2,221.1230                                    |
| 67                                                                | 21.6335                                            | 0.7800                                   | 16.8752                                                   | 1,130.6351                                    |
| 68                                                                | 17.4203                                            | 0.7435                                   | 12.9517                                                   | 880.7170                                      |
| 69                                                                | 14.2024                                            | 0.7527                                   | 10.6897                                                   | 737.5862                                      |
| 70                                                                | 12.3528                                            | 0.9235                                   | 11.4076                                                   | 798.5306                                      |
| 71                                                                | 3.9185                                             | 1.0000                                   | 3.9185                                                    | 278.2157                                      |
| 72                                                                | 0.0000                                             | 1.0000                                   | 0.0000                                                    | 0.0000                                        |
| 73                                                                | 1.0000                                             | 1.0000                                   | <u>1.0000</u>                                             | <u>73.0000</u>                                |
| <b>Total</b>                                                      |                                                    |                                          | <b>1,839.2020</b>                                         | <b>115,179.1559</b>                           |
| <b>Weighted Average Retirement Age = 115,179.1559 / 1,839.202</b> |                                                    |                                          |                                                           | <b>62.62</b>                                  |
| <b>Rounded Weighted Average Retirement Age</b>                    |                                                    |                                          |                                                           | <b>63</b>                                     |

**Note to Column 2:** The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

**Note to Column 3:** At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

**General note:** The table presents values rounded to fewer significant digits than used in the calculation.

**Pension Plan for Employees of SKF USA, Inc.**  
**EIN/PN: 23-1043740 / 001**

**Schedule SB, line 25 – Change in Method**

The enrolled actuary and business organization providing actuarial services for the plan changed. The prior enrolled actuary may have used different valuation software and may have applied the overall funding method in a different manner than the current actuary.

The conditions required under IRS Regulation 430 and Announcement 2010-3 for automatic approval for any change in funding method of takeover plans and valuation software changes were met.



**Pension Plan for Employees of SKF USA, Inc.**  
**EIN/PN: 23-1043740 / 001**

**Schedule SB, line 26 Active Participant Data**

|          | Under 1 |            | 1-4 |            | 5-9 |            | 10-14 |            | 15-19 |            | 20-24 |            | 25-29 |            | 30-34 |            | 35-39 |            | 40 & up |            | Total |            |
|----------|---------|------------|-----|------------|-----|------------|-------|------------|-------|------------|-------|------------|-------|------------|-------|------------|-------|------------|---------|------------|-------|------------|
| Age      | No.     | Avg. Comp. | No. | Avg. Comp. | No. | Avg. Comp. | No.   | Avg. Comp. | No.   | Avg. Comp. | No.   | Avg. Comp. | No.   | Avg. Comp. | No.   | Avg. Comp. | No.   | Avg. Comp. | No.     | Avg. Comp. | No.   | Avg. Comp. |
| Under 25 | 12      |            | 21  | 58,783     | 2   |            | 0     |            | 0     |            | 0     |            | 0     |            | 0     |            | 0     |            | 0       |            | 35    |            |
| 25 to 29 | 20      | 56,436     | 55  | 55,269     | 25  | 69,554     | 1     |            | 0     |            | 0     |            | 0     |            | 0     |            | 0     |            | 0       |            | 101   |            |
| 30 to 34 | 13      |            | 53  | 64,493     | 47  | 78,578     | 27    | 83,730     | 0     |            | 0     |            | 0     |            | 0     |            | 0     |            | 0       |            | 140   |            |
| 35 to 39 | 13      |            | 41  | 73,953     | 76  | 81,888     | 51    | 81,320     | 40    | 81,963     | 2     |            | 0     |            | 0     |            | 0     |            | 0       |            | 223   |            |
| 40 to 44 | 19      |            | 64  | 85,178     | 78  | 85,726     | 62    | 86,562     | 91    | 96,199     | 32    | 84,461     | 5     |            | 0     |            | 0     |            | 0       |            | 351   |            |
| 45 to 49 | 13      |            | 51  | 93,536     | 82  | 89,316     | 72    | 102,554    | 98    | 100,252    | 82    | 106,919    | 36    | 117,644    | 3     |            | 0     |            | 0       |            | 437   |            |
| 50 to 54 | 16      |            | 60  | 96,793     | 80  | 90,335     | 69    | 100,665    | 82    | 105,451    | 78    | 106,559    | 58    | 101,867    | 66    | 97,664     | 7     |            | 0       |            | 516   |            |
| 55 to 59 | 7       |            | 33  | 82,237     | 75  | 93,615     | 69    | 93,699     | 70    | 92,031     | 68    | 90,776     | 76    | 114,563    | 77    | 118,432    | 87    | 73,053     | 8       |            | 570   |            |
| 60 to 64 | 1       |            | 10  |            | 30  | 84,923     | 41    | 89,255     | 54    | 75,121     | 47    | 108,192    | 30    | 87,993     | 55    | 111,822    | 63    | 91,232     | 28      | 82,395     | 359   |            |
| 65 to 69 | 0       |            | 3   |            | 13  |            | 13    |            | 9     |            | 5     |            | 5     |            | 12    |            | 12    |            | 26      | 112,650    | 98    |            |
| 70 & up  | 0       |            | 0   |            | 0   |            | 0     |            | 2     |            | 1     |            | 1     |            | 2     |            | 0     |            | 3       |            | 9     |            |
| Total    | 114     |            | 391 |            | 508 |            | 405   |            | 446   |            | 315   |            | 211   |            | 215   |            | 169   |            | 65      |            | 2,839 |            |

Average pay is not shown for cells with fewer than 20 participants. The compensation shown is the average compensation for only active participants with a salary related benefit. The compensation for each salaried participant is limited to \$250,000.

**Pension Plan for Employees of SKF USA, Inc.**  
**EIN/PN: 23-1043740 / 001**

**Notes to 2013 Schedule SB**

IRS approval has been requested to change to a single asset smoothing method as a result of the plan merger but has not yet been received. The 2013 Schedule SB has been prepared on the basis of the prior asset methods for the SKF and Lincoln plans. A revised 2013 Schedule SB will be filed once approval has been received from the IRS.

**Pension Plan for Employees of SKF USA, Inc.**  
**EIN/PN: 23-1043740 / 001**

**Schedule SB, line 32 – Schedule of Amortization Bases**

| <b>Date Established</b>                  | <b>Initial Amount</b> | <b>Remaining Installments</b> | <b>Shortfall Amortization Installment</b> | <b>Present Value of Remaining Installments as of January 1, 2013</b> |
|------------------------------------------|-----------------------|-------------------------------|-------------------------------------------|----------------------------------------------------------------------|
| January 1, 2011                          | \$ 97,961,788         | 5                             | \$16,117,571                              | \$ 73,349,425                                                        |
| January 1, 2012                          | (41,845,080)          | 6                             | (7,102,149)                               | (37,590,905)                                                         |
| January 1, 2013                          | 49,414,044            | 7                             | <u>8,246,813</u>                          | <u>49,414,044</u>                                                    |
| Total                                    |                       |                               | \$17,262,235                              | \$ 85,172,564                                                        |
| Amounts transferred in from Lincoln Plan |                       |                               |                                           |                                                                      |
| January 1, 2009                          | \$ 2,273,402          | 3                             | \$ 406,081                                | \$ 1,161,795                                                         |
| January 1, 2010                          | 4,771,233             | 4                             | 797,401                                   | 2,971,365                                                            |
| January 1, 2011                          | 4,632,572             | 5                             | 762,195                                   | 3,468,672                                                            |
| January 1, 2012                          | (6,585,082)           | 6                             | <u>(1,117,650)</u>                        | <u>(5,915,600)</u>                                                   |
| Total                                    |                       |                               | \$ 848,027                                | \$ 1,686,232                                                         |
| Totals                                   |                       |                               | \$18,110,262                              | \$ 86,858,796                                                        |

All of the above amortization bases are shortfall bases; there are no waiver bases.

**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

**2013****This Form is Open to Public  
Inspection**

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

▶ 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.

|                                                                                                                                                                          |  |                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------|
| <b>A</b> Name of plan<br>PENSION PLAN FOR EMPLOYEES OF SKF USA INC.                                                                                                      |  | <b>B</b> Three-digit plan number (PN) ▶ 001                 |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br>SKF USA INC.                                                                                 |  | <b>D</b> Employer Identification Number (EIN)<br>23-1043740 |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B <input type="checkbox"/> Other |  |                                                             |
| <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500                  |  |                                                             |

**Part I Basic Information**

|                                                                                                                                                                                                                 |              |                            |                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------|--------------------|
| <b>1</b> Enter the valuation date: Month 01 Day 01 Year 2013                                                                                                                                                    |              |                            |                    |
| <b>2</b> Assets:                                                                                                                                                                                                |              |                            |                    |
| <b>a</b> Market value .....                                                                                                                                                                                     |              | <b>2a</b>                  | 593026474          |
| <b>b</b> Actuarial value .....                                                                                                                                                                                  |              | <b>2b</b>                  | 593695320          |
| <b>3</b> Funding target/participant count breakdown:                                                                                                                                                            |              |                            |                    |
|                                                                                                                                                                                                                 |              | (1) Number of participants | (2) Funding Target |
| <b>a</b> For retired participants and beneficiaries receiving payment .....                                                                                                                                     | <b>3a</b>    | 4959                       | 373449188          |
| <b>b</b> For terminated vested participants .....                                                                                                                                                               | <b>3b</b>    | 2097                       | 55496579           |
| <b>c</b> For active participants:                                                                                                                                                                               |              |                            |                    |
| (1) Non-vested benefits .....                                                                                                                                                                                   | <b>3c(1)</b> |                            | 14535511           |
| (2) Vested benefits .....                                                                                                                                                                                       | <b>3c(2)</b> |                            | 223670402          |
| (3) Total active .....                                                                                                                                                                                          | <b>3c(3)</b> | 2839                       | 238205913          |
| <b>d</b> Total .....                                                                                                                                                                                            | <b>3d</b>    | 9895                       | 667151680          |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                           |              |                            |                    |
| <b>a</b> Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                       |              | <b>4a</b>                  |                    |
| <b>b</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 ..... |              | <b>4b</b>                  |                    |
| <b>5</b> Effective interest rate .....                                                                                                                                                                          |              | <b>5</b>                   | 6.30%              |
| <b>6</b> Target normal cost .....                                                                                                                                                                               |              | <b>6</b>                   | 18907878           |

**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.

|                               |                  |     |                                        |
|-------------------------------|------------------|-----|----------------------------------------|
| <b>SIGN HERE</b>              | Gerald E. Hopper | GEH | 10/13/2014                             |
| Signature of actuary          |                  |     | Date                                   |
| Gerald E. Hopper              |                  |     | 1403618                                |
| Type or print name of actuary |                  |     | Most recent enrollment number          |
| BUCK CONSULTANTS, LLC         |                  |     | 610-651-8550                           |
| Firm name                     |                  |     | Telephone number (including area code) |
| 200 Berwyn Park, Suite 110    |                  |     |                                        |
| Berwyn PA 19312-1178          |                  |     |                                        |
| 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) 2013

## Part II Beginning of Year Carryover Prefunding Balances

|           |                                                                                                                                           | (a) Carryover balance | (b) Prefunding balance |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b>  | Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                           | 29822704              | 0                      |
| <b>8</b>  | Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                        | 17487282              | 0                      |
| <b>9</b>  | Amount remaining (line 7 minus line 8) .....                                                                                              | 12335422              | 0                      |
| <b>10</b> | Interest on line 9 using prior year's actual return of <u>8.65%</u> .....                                                                 | 1067014               | 0                      |
| <b>11</b> | Prior year's excess contributions to be added to prefunding balance:                                                                      |                       |                        |
|           | <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                           |                       | 169453                 |
|           | <b>b</b> Interest on (a) using prior year's effective interest rate of <u>6.99%</u> except as otherwise provided (see instructions) ..... |                       | 14658                  |
|           | <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                             |                       | 184111                 |
|           | <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                           |                       | 0                      |
| <b>12</b> | Other reductions in balances due to elections or deemed elections .....                                                                   | 0                     | 0                      |
| <b>13</b> | Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....                                                        | 13402436              | 0                      |

### Part III Funding Percentages

|           |                                                                                                                                                                 |           |         |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>14</b> | Funding target attainment percentage.....                                                                                                                       | <b>14</b> | 86.98 % |
| <b>15</b> | Adjusted funding target attainment percentage .....                                                                                                             | <b>15</b> | 87.04 % |
| <b>16</b> | Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement..... | <b>16</b> | 97.78 % |
| <b>17</b> | If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....                                        | <b>17</b> | %       |

#### Part IV Contributions and liquidity shortfalls

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

| (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
|--------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
| 10/15/2013               | 7000000                           | 0                               |                          |                                   |                                 |
| 01/15/2014               | 7000000                           | 0                               |                          |                                   |                                 |
| 04/11/2014               | 50000                             | 0                               |                          |                                   |                                 |
| 09/10/2014               | 11500000                          | 0                               |                          |                                   |                                 |
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**19** Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

|                                                                                                                         |            |          |
|-------------------------------------------------------------------------------------------------------------------------|------------|----------|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....                    | <b>19a</b> | 0        |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                      | <b>19b</b> | 0        |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..... | <b>19c</b> | 23659253 |

**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

| Equity, balance at end of quarter of the prior 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**

|                                                                                                                                                                                              |                       |                       |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                                                                                                                                                                     |                       |                       |                                                     |
| <b>a</b> Segment rates:                                                                                                                                                                      | 1st segment:<br>4.94% | 2nd segment:<br>6.15% | 3rd segment:<br>6.76%                               |
|                                                                                                                                                                                              |                       |                       | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code).....                                                                                                                                                  |                       |                       | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age .....                                                                                                                                              |                       |                       | <b>22</b> 63                                        |
| <b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                       |                       |                                                     |

**Part VI Miscellaneous Items**

|                                                                                                                                                                        |  |                                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------|
| <b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. .... |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ....                                      |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>26</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ....                            |  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....                                    |  | <b>27</b>                                                           |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

|                                                                                                                                     |           |   |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>28</b> Unpaid minimum required contributions for all prior years .....                                                           | <b>28</b> | 0 |
| <b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... | <b>29</b> | 0 |
| <b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29) .....                                   | <b>30</b> | 0 |

**Part VIII Minimum Required Contribution For Current Year**

|                                                                                                                                                                                      |                   |                     |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------|---------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                   |                     |               |
| <b>a</b> Target normal cost (line 6).....                                                                                                                                            |                   | <b>31a</b>          | 18907878      |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           |                   | <b>31b</b>          | 0             |
| <b>32</b> Amortization installments:                                                                                                                                                 |                   | Outstanding Balance | Installment   |
| <b>a</b> Net shortfall amortization installment.....                                                                                                                                 |                   | 86858796            | 18110262      |
| <b>b</b> Waiver amortization installment.....                                                                                                                                        |                   | 0                   | 0             |
| <b>33</b> 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 ..... |                   | <b>33</b>           |               |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...                                                            |                   | <b>34</b>           | 37018140      |
|                                                                                                                                                                                      | Carryover balance | Prefunding balance  | Total balance |
| <b>35</b> Balances elected for use to offset funding requirement.....                                                                                                                | 13402436          | 0                   | 13402436      |
| <b>36</b> Additional cash requirement (line 34 minus line 35).....                                                                                                                   |                   | <b>36</b>           | 23615704      |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....                                                   |                   | <b>37</b>           | 23659253      |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                   |                     |               |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       |                   | <b>38a</b>          | 43549         |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                |                   | <b>38b</b>          | 43549         |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      |                   | <b>39</b>           | 0             |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  |                   | <b>40</b>           | 0             |

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

|                                                                                                |                                                                                                                         |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:                |                                                                                                                         |
| <b>a</b> Schedule elected .....                                                                | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made .....               | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |
| <b>42</b> Amount of acceleration adjustment .....                                              | <b>42</b>                                                                                                               |
| <b>43</b> Excess installment acceleration amount to be carried over to future plan years ..... | <b>43</b>                                                                                                               |

SKF USA Inc.  
EIN: 23-1043740  
PLAN: 001

2013  
SCHEDULE H Line 4i  
Schedule of Assets  
(Held at End of Plan Year)

This file consists of 28 pages  
(including the cover)



# BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
SKF G713644 REVALUED COST 1  
SKF USA COMBINED MGR 31 DECEMBER 2013 M1102E

| SHARES/<br>PAR VALUE        | SECURITY DESCRIPTION                                        | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|-----------------------------|-------------------------------------------------------------|--------------|----------|-----------------|-------------------------|
| U. S. GOVERNMENT SECURITIES |                                                             |              |          |                 |                         |
| 2,000,000.0000              | FEDERAL HOME LN BK CONS BD<br>6.700% 07/22/2014 DD 07/22/99 | 2,199,920.00 | 103.6360 | 2,072,720.00    | 127,200.00-             |
| 1,200,000.0000              | FINANCING CORP STRIP<br>9.400% 02/08/2018 DD 02/08/88       | 1,678,212.00 | 129.9040 | 1,558,848.00    | 119,364.00-             |
| 3,200,000.0000              | ISRAEL ST AID<br>0.000% 08/15/2023 DD 09/19/94              | 2,442,048.00 | 70.3030  | 2,249,696.00    | 192,352.00-             |
| 2,065,000.0000              | TENNESSEE VALLEY AUTH BD<br>4.500% 04/01/2018 DD 03/12/08   | 2,434,965.40 | 110.9570 | 2,291,262.05    | 143,703.35-             |
| 2,387,000.0000              | U S TREASURY BOND<br>6.250% 08/15/2023 DD 08/15/93          | 3,389,371.16 | 128.4530 | 3,066,173.11    | 323,198.05-             |
| 4,529,000.0000              | U S TREASURY BOND<br>6.500% 11/15/2026 DD 11/15/96          | 6,785,936.25 | 133.5630 | 6,049,068.27    | 736,867.98-             |
| 3,454,000.0000              | U S TREASURY NOTE<br>4.125% 05/15/2015 DD 05/15/05          | 3,718,978.87 | 105.3200 | 3,637,752.80    | 81,226.07-              |
| 5,173,000.0000              | U S TREASURY NOTE<br>4.750% 08/15/2017 DD 08/15/07          | 5,981,885.03 | 112.9770 | 5,844,300.21    | 137,584.82-             |
| 7,390,000.0000              | U S TREASURY NOTE<br>2.250% 01/31/2015 DD 01/31/10          | 7,684,323.74 | 102.2270 | 7,554,575.30    | 129,748.44-             |
| 1,500,000.0000              | U S TREASURY NOTE<br>2.625% 11/15/2020 DD 11/15/10          | 1,529,805.00 | 101.6250 | 1,524,375.00    | 5,430.00-               |
| 2,173,000.0000              | U S TREASURY NOTE<br>1.250% 03/15/2014 DD 03/15/11          | 2,185,224.19 | 100.2340 | 2,178,084.82    | 7,139.37-               |





BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
 SKF G713644 REVALUED COST 31 DECEMBER 2013  
 SKF USA COMBINED MGR PAGE: 2  
 M1102E

| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION                                       | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|------------------------------------------------------------|--------------|----------|-----------------|-------------------------|
| 2,212,000.0000       | U S TREASURY NOTE<br>0.875% 11/30/2016 DD 11/30/11         | 2,225,141.16 | 100.3200 | 2,219,078.40    | 6,062.76-               |
| 6,083,000.0000       | U S TREASURY NOTE<br>0.875% 07/31/2019 DD 07/31/12         | 5,767,468.71 | 94.1640  | 5,727,996.12    | 39,472.59-              |
| 2,787,000.0000       | U S TREASURY NOTE<br>1.625% 08/15/2022 DD 08/15/12         | 2,598,872.87 | 90.8520  | 2,532,045.24    | 66,827.63-              |
| 1,111,959.0700       | FHLMC POOL #A9-3351<br>4.000% 08/01/2040 DD 08/01/10       | 1,188,117.21 | 102.7720 | 1,142,782.58    | 45,334.63-              |
| 1,597,063.3800       | FHLMC POOL #A9-5504<br>4.000% 11/01/2040 DD 12/01/10       | 1,749,375.38 | 103.0070 | 1,645,087.08    | 104,288.30-             |
| 350,000.0000         | FEDERAL AGRIC MTG CORP NT<br>4.810% 02/03/2026 DD 02/03/11 | 424,168.50   | 105.8180 | 370,363.00      | 53,805.50-              |
| 3,170,439.2600       | FNMA POOL #0AJ9327<br>3.500% 01/01/2042 DD 01/01/12        | 3,420,491.85 | 99.5050  | 3,154,745.59    | 265,746.26-             |
| 1,777,014.3400       | FNMA POOL #0AT5856<br>3.500% 06/01/2043 DD 06/01/13        | 1,824,216.28 | 99.4720  | 1,767,631.70    | 56,584.58-              |
| 2,332,626.4400       | FNMA POOL #0AB1611<br>3.500% 10/01/2040 DD 09/01/10        | 2,507,853.39 | 99.4730  | 2,320,333.50    | 187,519.89-             |
| 4,539,591.9000       | FNMA POOL #0AE0826<br>4.500% 01/01/2041 DD 01/01/11        | 4,904,887.18 | 106.8080 | 4,848,647.32    | 56,239.86-              |
| 1,498,659.8500       | FNMA POOL #0AE2827<br>4.000% 09/01/2040 DD 09/01/10        | 1,608,151.98 | 102.9760 | 1,543,259.97    | 64,892.01-              |
| 835,266.8800         | GNMA POOL #0605617<br>5.000% 07/15/2034 DD 07/01/04        | 918,050.24   | 109.4250 | 913,990.78      | 4,059.46-               |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
SKF G713644  
SKF USA COMBINED MGR REVALUED COST 31 DECEMBER 2013  
PAGE: 3  
M1102E

| SHARES/<br>PAR VALUE                   | SECURITY DESCRIPTION                                       | COST          | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------------------------|------------------------------------------------------------|---------------|----------|-----------------|-------------------------|
| 378,226.5600                           | GNMA POOL #0550535<br>5.500% 07/15/2035 DD 07/01/05        | 416,953.21    | 109.9570 | 415,886.58      | 1,066.63-               |
| 401,143.1000                           | GNMA POOL #0782226<br>5.000% 04/15/2035 DD 11/01/07        | 443,094.70    | 109.9290 | 440,972.60      | 2,122.10-               |
| 152,501.6100                           | GNMA POOL #0615376<br>5.000% 07/15/2033 DD 07/01/03        | 167,901.27    | 109.4850 | 166,966.39      | 934.88-                 |
| 223,855.2800                           | GNMA POOL #0651753<br>5.500% 03/15/2036 DD 03/01/06        | 245,656.60    | 110.4300 | 247,203.39      | 1,546.79                |
| 74,000.0000                            | U S TREASURY BILL<br>0.000% 02/06/2014 DD 02/07/13         | 73,990.91     | 99.9877  | 73,990.91       | 0.00                    |
| 6,188,000.0000                         | U S TREASURY NT CPN STRIP<br>0.000% 02/15/2036 DD 02/15/06 | 2,966,645.83  | 40.7450  | 2,521,300.60    | 445,345.23-             |
| 872,000.0000                           | U S TREASURY NT CPN STRIP<br>0.000% 11/15/2030 DD 08/15/07 | 519,944.43    | 51.4920  | 449,010.24      | 70,934.19-              |
| TOTAL U. S. GOVERNMENT SECURITIES      |                                                            | 74,001,651.34 |          | 70,528,147.55   | 3,473,503.79-           |
| CORPORATE DEBT INSTRUMENTS - PREFERRED |                                                            |               |          |                 |                         |
| 1,000,000.0000                         | ANHEUSER-BUSCH COS LLC<br>6.500% 02/01/2043 DD 06/27/02    | 1,416,180.00  | 122.4170 | 1,224,170.00    | 192,010.00-             |
| 700,000.0000                           | BRISTOL-MYERS SQUIBB CO<br>5.450% 05/01/2018 DD 05/01/08   | 845,607.00    | 114.4730 | 801,311.00      | 44,296.00-              |
| 1,000,000.0000                         | BESTFOODS<br>7.000% 10/15/2017 DD 10/24/97                 | 1,255,730.00  | 119.0000 | 1,190,000.00    | 65,730.00-              |
| 2,000,000.0000                         | COCA-COLA CO/THE<br>3.200% 11/01/2023 DD 11/01/13          | 1,934,800.00  | 96.1820  | 1,923,640.00    | 11,160.00-              |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
 SKF G713644 REVALUED COST 31 DECEMBER 2013 PAGE: 4  
 SKF USA COMBINED MGR M1102E

| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION                                            | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|-----------------------------------------------------------------|--------------|----------|-----------------|-------------------------|
| 1,000,000.0000       | COLGATE-PALMOLIVE CO<br>5.200% 11/07/2016 DD 11/06/06           | 1,163,520.00 | 110.8110 | 1,108,110.00    | 55,410.00-              |
| 1,161,000.0000       | JOHN DEERE CAPITAL CORP<br>2.750% 03/15/2022 DD 02/27/12        | 1,183,163.49 | 94.6510  | 1,098,898.11    | 84,265.38-              |
| 1,120,000.0000       | DUKE ENERGY FLORIDA INC<br>3.100% 08/15/2021 DD 08/18/11        | 1,176,582.40 | 98.4230  | 1,102,337.60    | 74,244.80-              |
| 2,055,000.0000       | GENERAL ELECTRIC CO<br>5.250% 12/06/2017 DD 12/06/07            | 2,423,153.25 | 113.1940 | 2,326,136.70    | 97,016.55-              |
| 1,000,000.0000       | GEORGIA POWER CO<br>2.850% 05/15/2022 DD 05/11/12               | 1,030,230.00 | 94.3730  | 943,730.00      | 86,500.00-              |
| 1,183,000.0000       | INTEL CORP<br>2.700% 12/15/2022 DD 12/11/12                     | 1,153,283.04 | 92.1810  | 1,090,501.23    | 62,781.81-              |
| 1,000,000.0000       | INTERNATIONAL BUSINESS MACHINE<br>1.950% 07/22/2016 DD 07/22/11 | 1,039,270.00 | 102.7350 | 1,027,350.00    | 11,920.00-              |
| 1,000,000.0000       | JOHNSON & JOHNSON<br>4.950% 05/15/2033 DD 05/22/03              | 1,116,790.00 | 107.5910 | 1,075,910.00    | 40,880.00-              |
| 678,000.0000         | KFW<br>3.500% 03/10/2014 DD 03/10/09                            | 703,302.96   | 100.5790 | 681,925.62      | 21,377.34-              |
| 1,000,000.0000       | ELI LILLY & CO<br>5.200% 03/15/2017 DD 03/14/07                 | 1,167,100.00 | 111.6620 | 1,116,620.00    | 50,480.00-              |
| 2,000,000.0000       | MCDONALD'S CORP<br>5.300% 03/15/2017 DD 03/15/07                | 2,346,880.00 | 111.7070 | 2,234,140.00    | 112,740.00-             |
| 1,155,000.0000       | PEPSICO INC<br>2.750% 03/05/2022 DD 03/05/12                    | 1,186,543.05 | 95.0100  | 1,097,365.50    | 89,177.55-              |



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| <u>SHARES/<br/>PAR VALUE</u>                 | <u>SECURITY DESCRIPTION</u>                                     | <u>COST</u>   | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|----------------------------------------------|-----------------------------------------------------------------|---------------|--------------|-------------------------|---------------------------------|
| 1,187,000.0000                               | PRAXAIR INC<br>2.450% 02/15/2022 DD 02/06/12                    | 1,193,041.83  | 91.9280      | 1,091,185.36            | 101,856.47-                     |
| 1,000,000.0000                               | STATE STREET BANK AND TRUST CO<br>5.250% 10/15/2018 DD 09/24/03 | 1,185,880.00  | 112.9180     | 1,129,180.00            | 56,700.00-                      |
| 1,018,000.0000                               | SYSKO CORP<br>5.375% 03/17/2019 DD 03/17/09                     | 1,226,374.42  | 113.3410     | 1,153,811.38            | 72,563.04-                      |
| 1,500,000.0000                               | 3M CO<br>5.700% 03/15/2037 DD 03/29/07                          | 2,037,390.00  | 115.3470     | 1,730,205.00            | 307,185.00-                     |
| 1,000,000.0000                               | WACHOVIA BANK NA<br>6.000% 11/15/2017 DD 11/21/07               | 1,199,180.00  | 115.3900     | 1,153,900.00            | 45,280.00-                      |
| 950,000.0000                                 | WELLS FARGO & CO<br>5.625% 12/11/2017 DD 12/10/07               | 1,133,065.00  | 114.6200     | 1,088,890.00            | 44,175.00-                      |
| TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED |                                                                 | 29,117,066.44 |              | 27,389,317.50           | 1,727,748.94-                   |
| <u>CORPORATE DEBT INSTRUMENTS</u>            |                                                                 |               |              |                         |                                 |
| 1,500,000.0000                               | EATON CORP<br>6.500% 06/01/2025 DD 06/09/95                     | 1,938,210.00  | 115.6020     | 1,734,030.00            | 204,180.00-                     |
| 1,000,000.0000                               | OMNICOM GROUP INC<br>3.625% 05/01/2022 DD 04/23/12              | 998,500.00    | 96.8400      | 968,400.00              | 30,100.00-                      |
| TOTAL CORPORATE DEBT INSTRUMENTS             |                                                                 | 2,936,710.00  |              | 2,702,430.00            | 234,280.00-                     |



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| SHARES/<br>PAR VALUE            | SECURITY DESCRIPTION           | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|---------------------------------|--------------------------------|--------------|----------|-----------------|-------------------------|
| <u>CORPORATE STOCK - COMMON</u> |                                |              |          |                 |                         |
| 4,012.0000                      | AMDOCS LTD COM                 | 137,817.25   | 41.2400  | 165,454.88      | 27,637.63               |
| 21,840.0000                     | AXIS CAPITAL HLDGS LTD SHS     | 802,604.23   | 47.5700  | 1,038,928.80    | 236,324.57              |
| 21,200.0000                     | NABORS INDUSTRIES LTD SHS      | 362,656.60   | 16.9900  | 360,188.00      | 2,468.60-               |
| 12,900.0000                     | RENAISSANCE RE HOLDINGS LTD    | 1,159,026.78 | 97.3400  | 1,255,686.00    | 96,659.22               |
| 5,320.0000                      | CORE LABORATORIES N V          | 586,477.40   | 190.9500 | 1,015,854.00    | 429,376.60              |
| 29,493.0000                     | FLEXTRONICS INTERNATIONAL LTD  | 243,191.28   | 7.7700   | 229,160.61      | 14,030.67-              |
| 4,840.0000                      | AAR CORP                       | 124,877.03   | 28.0100  | 135,568.40      | 10,691.37               |
| 10,400.0000                     | AT&T INC                       | 349,042.20   | 35.1600  | 365,664.00      | 16,621.80               |
| 19,081.0000                     | ACACIA RESEARCH - ACACIA TECHN | 449,547.03   | 14.5400  | 277,437.74      | 172,109.29-             |
| 16,527.0000                     | ACCELRYX INC                   | 161,988.93   | 9.5400   | 157,667.58      | 4,321.35-               |
| 4,855.0000                      | ADVANCE AUTO PARTS INC         | 395,662.96   | 110.6800 | 537,351.40      | 141,688.44              |
| 7,399.0000                      | ADVISORY BOARD CO/THE          | 364,540.94   | 63.6700  | 471,094.33      | 106,553.39              |
| 6,235.0000                      | ADVENT SOFTWARE INC            | 172,968.26   | 34.9520  | 217,925.72      | 44,957.46               |
| 5,564.0000                      | AETNA INC                      | 350,876.01   | 68.5900  | 381,634.76      | 30,758.75               |
| 14,217.0000                     | AGILYSYS INC                   | 162,176.03   | 13.9220  | 197,929.07      | 35,753.04               |
| 5,522.0000                      | ALASKA AIR GROUP INC           | 251,428.82   | 73.3700  | 405,149.14      | 153,720.32              |
| 4,051.0000                      | ALLIANCE DATA SYSTEMS CORP     | 593,345.55   | 262.9300 | 1,065,129.43    | 471,783.88              |



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| <u>SHARES/<br/>PAR VALUE</u> | <u>SECURITY DESCRIPTION</u>    | <u>COST</u>  | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|------------------------------|--------------------------------|--------------|--------------|-------------------------|---------------------------------|
| 1,882.0000                   | ALLIANT TECHSYSTEMS INC        | 185,116.95   | 121.6800     | 229,001.76              | 43,884.81                       |
| 11,000.0000                  | ALLSTATE CORP/THE              | 497,448.60   | 54.5400      | 599,940.00              | 102,491.40                      |
| 19,681.0000                  | AMERICAN EXPRESS CO            | 1,174,866.33 | 90.7300      | 1,785,657.13            | 610,790.80                      |
| 6,205.0000                   | AMERICAN FINANCIAL GROUP INC/O | 300,847.36   | 57.7200      | 358,152.60              | 57,305.24                       |
| 8,438.0000                   | AMERISOURCEBERGEN CORP         | 484,985.47   | 70.3100      | 593,275.78              | 108,290.31                      |
| 5,200.0000                   | AMGEN INC                      | 447,800.99   | 114.0800     | 593,216.00              | 145,415.01                      |
| 5,900.0000                   | ANADARKO PETROLEUM CORP        | 493,616.03   | 79.3200      | 467,988.00              | 25,628.03--                     |
| 27,120.0000                  | ANSYS INC                      | 1,835,498.70 | 87.2000      | 2,364,864.00            | 529,365.30                      |
| 6,900.0000                   | APACHE CORP                    | 582,663.53   | 85.9400      | 592,986.00              | 10,322.47                       |
| 24,860.0000                  | APOLLO EDUCATION GROUP INC     | 499,748.96   | 27.3200      | 679,175.20              | 179,426.24                      |
| 1,500.0000                   | APPLE INC                      | 798,259.50   | 561.0200     | 841,530.00              | 43,270.50                       |
| 7,146.0000                   | ARROW ELECTRONICS INC          | 347,970.18   | 54.2500      | 387,670.50              | 39,700.32                       |
| 7,983.0000                   | ASBURY AUTOMOTIVE GROUP INC    | 332,233.16   | 53.7400      | 429,006.42              | 96,773.26                       |
| 9,293.0000                   | ASSURANT INC                   | 506,777.95   | 66.3700      | 616,776.41              | 109,998.46                      |
| 5,668.0000                   | AUTONATION INC                 | 275,039.70   | 49.6900      | 281,642.92              | 6,603.22                        |
| 724.0000                     | AUTOZONE INC                   | 298,602.16   | 477.9400     | 346,028.56              | 47,426.40                       |
| 25,129.0000                  | AVNET INC                      | 1,019,552.85 | 44.1100      | 1,108,440.19            | 88,887.34                       |
| 38,700.0000                  | AVON PRODUCTS INC              | 676,300.00   | 17.2200      | 666,414.00              | 9,886.00--                      |



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| <u>SHARES/<br/>PAR VALUE</u> | <u>SECURITY DESCRIPTION</u>    | <u>COST</u>  | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|------------------------------|--------------------------------|--------------|--------------|-------------------------|---------------------------------|
| 9,800.0000                   | BAKER HUGHES INC               | 499,820.50   | 55.2600      | 541,548.00              | 41,727.50                       |
| 24,300.0000                  | BALL CORP                      | 1,089,470.73 | 51.6600      | 1,255,338.00            | 165,867.27                      |
| 35,822.0000                  | BANK OF AMERICA CORP           | 419,708.92   | 15.5700      | 557,748.54              | 138,039.62                      |
| 18,570.0000                  | BAXTER INTERNATIONAL INC       | 1,266,531.74 | 69.5500      | 1,291,543.50            | 25,011.76                       |
| 6,200.0000                   | BECTON DICKINSON AND CO        | 497,773.00   | 110.4900     | 685,038.00              | 187,265.00                      |
| 7,508.0000                   | BENCHMARK ELECTRONICS INC      | 166,077.65   | 23.0800      | 173,284.64              | 7,206.99                        |
| 7,399.0000                   | BOEING CO/THE                  | 785,888.55   | 136.4900     | 1,009,889.51            | 224,000.96                      |
| 10,726.0000                  | CIGNA CORPORATION COM          | 693,797.81   | 87.4800      | 938,310.48              | 244,512.67                      |
| 2,600.0000                   | CMS ENERGY CORP                | 69,277.00    | 26.7700      | 69,602.00               | 325.00                          |
| 28,901.0000                  | CVS CAREMARK CORP              | 1,447,721.55 | 71.5700      | 2,068,444.57            | 620,723.02                      |
| 20,100.0000                  | CABOT OIL & GAS CORP           | 575,491.60   | 38.7600      | 779,076.00              | 203,584.40                      |
| 10,400.0000                  | CANADIAN NATURAL RESOURCES LTD | 300,248.00   | 33.8400      | 351,936.00              | 51,688.00                       |
| 3,289.0000                   | CANADIAN PACIFIC RAILWAY LTD   | 348,581.74   | 151.3200     | 497,691.48              | 149,109.74                      |
| 10,835.0000                  | CAPITAL ONE FINANCIAL CORP     | 652,895.65   | 76.6100      | 830,069.35              | 177,173.70                      |
| 26,717.0000                  | CARDINAL HEALTH INC            | 1,234,998.07 | 66.8100      | 1,784,962.77            | 549,964.70                      |
| 6,908.0000                   | CARMAX INC                     | 319,647.38   | 47.0200      | 324,814.16              | 5,166.78                        |
| 34,000.0000                  | CARNIVAL CORP                  | 1,218,931.78 | 40.1700      | 1,365,780.00            | 146,848.22                      |
| 6,375.0000                   | CELGENE CORP                   | 517,659.17   | 168.9680     | 1,077,171.00            | 559,511.83                      |



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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION            | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|---------------------------------|--------------|----------|-----------------|-------------------------|
| 30,987.0000          | CENTURY CASINOS INC             | 96,248.44    | 5.2100   | 161,442.27      | 65,193.83               |
| 22,010.0000          | CEVA INC                        | 366,165.78   | 15.2200  | 334,992.20      | 31,173.58-              |
| 12,553.0000          | CHEESECAKE FACTORY INC/THE      | 546,362.77   | 48.2700  | 605,933.31      | 59,570.54               |
| 18,100.0000          | CHEVRON CORP                    | 2,005,293.97 | 124.9100 | 2,260,871.00    | 255,577.03              |
| 5,277.0000           | CIRRUS LOGIC INC                | 102,145.35   | 20.4250  | 107,782.73      | 5,637.38                |
| 20,000.0000          | CINTAS CORP                     | 824,191.50   | 59.5900  | 1,191,800.00    | 367,608.50              |
| 16,448.0000          | CLEAN HARBORS INC               | 910,935.97   | 59.9600  | 986,222.08      | 75,286.11               |
| 1,986.0000           | COGNIZANT TECHNOLOGY SOLUTIONS  | 146,585.55   | 100.9800 | 200,546.28      | 53,960.73               |
| 12,300.0000          | COLGATE-PALMOLIVE CO            | 647,905.51   | 65.2100  | 802,083.00      | 154,177.49              |
| 13,000.0000          | COMCAST CORP                    | 650,426.40   | 51.9650  | 675,545.00      | 25,118.60               |
| 5,150.0000           | COMPUTER SCIENCES CORP          | 230,284.60   | 55.8800  | 287,782.00      | 57,497.40               |
| 11,815.0000          | CONCUR TECHNOLOGIES INC         | 824,612.29   | 103.1800 | 1,219,071.70    | 394,459.41              |
| 9,200.0000           | CONOCOPHILLIPS                  | 533,120.88   | 70.6500  | 649,980.00      | 116,859.12              |
| 6,908.0000           | CONVERGYS CORP                  | 114,566.11   | 21.0500  | 145,413.40      | 30,847.29               |
| 12,019.0000          | CORPORATE EXECUTIVE BOARD CO/IT | 689,856.70   | 77.4300  | 930,631.17      | 240,774.47              |
| 6,101.0000           | COSTAR GROUP INC                | 553,517.67   | 184.5800 | 1,126,122.58    | 572,604.91              |
| 30,700.0000          | CROWN HOLDINGS INC              | 1,337,822.88 | 44.5700  | 1,368,299.00    | 30,476.12               |
| 41,110.0000          | CUMULUS MEDIA INC               | 216,942.75   | 7.7300   | 317,760.30      | 100,837.55              |





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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION           | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|--------------------------------|--------------|----------|-----------------|-------------------------|
| 2,852.0000           | DST SYSTEMS INC                | 189,725.95   | 90.7400  | 258,790.48      | 69,064.53               |
| 34,724.0000          | DENNY'S CORP                   | 199,213.50   | 7.1900   | 249,665.56      | 50,452.06               |
| 30,200.0000          | DEVON ENERGY CORP              | 1,641,989.62 | 61.8700  | 1,868,474.00    | 226,484.38              |
| 16,484.0000          | DEVRY EDUCATION GROUP          | 507,956.57   | 35.5000  | 585,182.00      | 77,225.43               |
| 7,100.0000           | DOVER CORP                     | 505,813.50   | 96.5400  | 685,434.00      | 179,620.50              |
| 13,237.0000          | EMC CORP/MA                    | 316,331.68   | 25.1500  | 332,910.55      | 16,578.87               |
| 4,000.0000           | EOG RESOURCES INC              | 568,425.00   | 167.8400 | 671,360.00      | 102,935.00              |
| 7,800.0000           | EASTMAN CHEMICAL CO            | 530,790.00   | 80.7000  | 629,460.00      | 98,670.00               |
| 16,535.0000          | ECOLAB INC                     | 1,210,882.60 | 104.2700 | 1,724,104.45    | 513,221.85              |
| 9,400.0000           | ENERGEN CORP                   | 542,246.93   | 70.7500  | 665,050.00      | 122,803.07              |
| 12,700.0000          | ENERGY CORP                    | 809,221.80   | 63.2700  | 803,529.00      | 5,692.80-               |
| 8,113.0000           | ESTERLINE TECHNOLOGIES CORP    | 606,700.14   | 101.9600 | 827,201.48      | 220,501.34              |
| 35,450.0000          | EXPEDITORS INTERNATIONAL OF WA | 1,405,612.50 | 44.2500  | 1,568,662.50    | 163,050.00              |
| 10,271.0000          | EXPONENT INC                   | 527,048.17   | 77.2740  | 793,681.25      | 266,633.08              |
| 5,088.0000           | EZCORP INC                     | 100,690.82   | 11.6900  | 59,478.72       | 41,212.10-              |
| 16,891.0000          | EXXON MOBIL CORP               | 1,462,694.07 | 101.2000 | 1,709,369.20    | 246,675.13              |
| 51,851.0000          | FASTENAL CO                    | 2,423,363.60 | 47.5100  | 2,463,441.01    | 40,077.41               |
| 37,000.0000          | FIFTH THIRD BANCORP            | 562,400.00   | 21.0300  | 778,110.00      | 215,710.00              |



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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION           | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|--------------------------------|--------------|----------|-----------------|-------------------------|
| 25,682.0000          | FISERV INC                     | 1,028,313.96 | 59.0500  | 1,516,522.10    | 488,208.14              |
| 2,585.0000           | GARTNER INC                    | 122,928.58   | 71.0500  | 183,664.25      | 60,735.67               |
| 43,422.0000          | GENWORTH FINANCIAL INC         | 543,870.70   | 15.5300  | 674,343.66      | 130,472.96              |
| 2,709.0000           | GLOBAL PAYMENTS INC            | 123,976.92   | 64.9900  | 176,057.91      | 52,080.99               |
| 5,878.0000           | GRAHAM CORP                    | 145,389.06   | 36.2900  | 213,312.62      | 67,923.56               |
| 3,098.0000           | GROUP 1 AUTOMOTIVE INC         | 215,727.93   | 71.0200  | 220,019.96      | 4,292.03                |
| 5,277.0000           | HAIN CELESTIAL GROUP INC/THE   | 348,572.34   | 90.7800  | 479,046.06      | 130,473.72              |
| 24,500.0000          | HALLIBURTON CO                 | 1,094,332.45 | 50.7500  | 1,243,375.00    | 149,042.55              |
| 15,181.0000          | HARTFORD FINANCIAL SERVICES GR | 449,531.04   | 36.2300  | 550,007.63      | 100,476.59              |
| 36,055.0000          | HEALTHCARE SERVICES GROUP INC  | 838,299.44   | 28.3700  | 1,022,880.35    | 184,580.91              |
| 8,100.0000           | HELMERICH & PAYNE INC          | 525,865.92   | 84.0800  | 681,048.00      | 155,182.08              |
| 3,723.0000           | JACK HENRY & ASSOCIATES INC    | 151,036.20   | 59.2100  | 220,438.83      | 69,402.63               |
| 3,226.0000           | HUMANA INC                     | 228,731.34   | 103.2200 | 332,987.72      | 104,256.38              |
| 3,812.0000           | ICU MEDICAL INC                | 230,973.07   | 63.7100  | 242,862.52      | 11,889.45               |
| 10,212.0000          | ITT EDUCATIONAL SERVICES INC   | 330,638.53   | 33.5800  | 342,918.96      | 12,280.43               |
| 10,000.0000          | ILLINOIS TOOL WORKS INC        | 620,233.95   | 84.0800  | 840,800.00      | 220,566.05              |
| 10,925.0000          | INGRAM MICRO INC               | 257,981.70   | 23.4600  | 256,300.50      | 1,681.20-               |
| 8,153.0000           | INSIGHT ENTERPRISES INC        | 172,933.62   | 22.7100  | 185,154.63      | 12,221.01               |



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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION           | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|--------------------------------|--------------|----------|-----------------|-------------------------|
| 17,000.0000          | INTEL CORP                     | 410,748.00   | 25.9550  | 441,235.00      | 30,487.00               |
| 13,111.0000          | INTERMUNE INC                  | 174,229.46   | 14.7300  | 193,125.03      | 18,895.57               |
| 4,944.0000           | INTERNATIONAL BUSINESS MACHINE | 949,292.83   | 187.5700 | 927,346.08      | 21,946.75-              |
| 12,800.0000          | INTERNATIONAL PAPER CO         | 524,528.58   | 49.0300  | 627,584.00      | 103,055.42              |
| 36,200.0000          | JPMORGAN CHASE & CO            | 1,647,616.96 | 58.4800  | 2,116,976.00    | 469,359.04              |
| 14,188.0000          | JABIL CIRCUIT INC              | 320,496.13   | 17.4400  | 247,438.72      | 73,057.41-              |
| 18,525.0000          | JACOBS ENGINEERING GROUP INC   | 807,811.82   | 62.9900  | 1,166,889.75    | 359,077.93              |
| 22,100.0000          | JOHNSON & JOHNSON              | 1,735,605.94 | 91.5900  | 2,024,139.00    | 288,533.06              |
| 12,400.0000          | JOHNSON CONTROLS INC           | 512,914.01   | 51.3000  | 636,120.00      | 123,205.99              |
| 10,900.0000          | KLA-TENCOR CORP                | 520,584.00   | 64.4600  | 702,614.00      | 182,030.00              |
| 6,800.0000           | KIMBERLY-CLARK CORP            | 619,091.73   | 104.4600 | 710,328.00      | 91,236.27               |
| 21,500.0000          | KOHL'S CORP                    | 929,690.37   | 56.7500  | 1,220,125.00    | 290,434.63              |
| 17,835.0000          | KROGER CO/THE                  | 464,066.70   | 39.5300  | 705,017.55      | 240,950.85              |
| 62,775.0000          | LKQ CORP                       | 1,349,822.44 | 32.9000  | 2,065,297.50    | 715,475.06              |
| 2,048.0000           | L-3 COMMUNICATIONS HOLDINGS IN | 187,475.23   | 106.8600 | 218,849.28      | 31,374.05               |
| 14,880.0000          | LAM RESEARCH CORP              | 559,217.77   | 54.4500  | 810,216.00      | 250,998.23              |
| 10,763.0000          | LEXMARK INTERNATIONAL INC      | 363,740.53   | 35.5200  | 382,301.76      | 18,561.23               |
| 11,467.0000          | LIFE TIME FITNESS INC          | 548,042.32   | 47.0000  | 538,949.00      | 9,093.32-               |



BNY MELLON

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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION         | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|------------------------------|--------------|----------|-----------------|-------------------------|
| 16,600.0000          | LINCOLN NATIONAL CORP        | 723,594.20   | 51.6200  | 856,892.00      | 133,297.80              |
| 7,135.0000           | LITHIA MOTORS INC            | 369,933.75   | 69.4200  | 495,311.70      | 125,377.95              |
| 2,254.0000           | LOCKHEED MARTIN CORP         | 279,756.60   | 148.6600 | 335,079.64      | 55,323.04               |
| 26,947.0000          | MDC PARTNERS INC             | 314,354.34   | 25.5100  | 687,417.97      | 373,063.63              |
| 3,806.0000           | MAGELLAN HEALTH SERVICES INC | 189,889.78   | 59.9100  | 228,017.46      | 38,127.68               |
| 7,300.0000           | MAGNA INTERNATIONAL INC      | 413,284.39   | 82.0600  | 599,038.00      | 185,753.61              |
| 21,300.0000          | MARATHON OIL CORP            | 704,007.80   | 35.3000  | 751,890.00      | 47,882.20               |
| 3,063.0000           | MARKEL CORP                  | 1,370,835.52 | 580.3500 | 1,777,612.05    | 406,776.53              |
| 13,100.0000          | MCDONALD'S CORP              | 1,176,328.64 | 97.0300  | 1,271,093.00    | 94,764.36               |
| 9,876.0000           | MCKESSON CORP                | 1,420,193.78 | 161.4000 | 1,593,986.40    | 173,792.62              |
| 16,846.0000          | MEDIFAST INC                 | 430,488.36   | 26.1300  | 440,185.98      | 9,697.62                |
| 14,800.0000          | METLIFE INC                  | 673,794.24   | 53.9200  | 798,016.00      | 124,221.76              |
| 21,500.0000          | MICROSOFT CORP               | 586,584.83   | 37.4100  | 804,315.00      | 217,730.17              |
| 4,664.0000           | MOLINA HEALTHCARE INC        | 165,137.78   | 34.7500  | 162,074.00      | 3,063.78                |
| 4,505.0000           | MONSANTO CO                  | 427,620.25   | 116.5500 | 525,057.75      | 97,437.50               |
| 15,036.0000          | MOODY'S CORP                 | 1,082,196.22 | 78.4700  | 1,179,874.92    | 97,678.70               |
| 1,820.0000           | MOOG INC                     | 94,991.66    | 67.9400  | 123,650.80      | 28,659.14               |
| 18,000.0000          | MYLAN INC/PA                 | 494,100.00   | 43.4000  | 781,200.00      | 287,100.00              |



BNY MELLON

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FINAL 122203

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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION                  | COST         | PRICE      | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|---------------------------------------|--------------|------------|-----------------|-------------------------|
| 15,944.0000          | MYRIAD GENETICS INC                   | 437,149.54   | 20.9800    | 334,505.12      | 102,644.42-             |
| 19,550.0000          | NIC INC                               | 326,444.21   | 24.8700    | 486,208.50      | 159,764.29              |
| 34,255.0000          | NPS PHARMACEUTICALS INC               | 509,421.78   | 30.3600    | 1,039,981.80    | 530,560.02              |
| 1,355.0000           | NVR INC                               | 1,239,861.81 | 1,026.0100 | 1,390,243.55    | 150,381.74              |
| 6,500.0000           | NATIONAL FUEL GAS CO                  | 329,485.00   | 71.4000    | 464,100.00      | 134,615.00              |
| 5,700.0000           | NATIONAL OILWELL VARCO INC            | 412,159.05   | 79.5300    | 453,321.00      | 41,161.95               |
| 15,193.0000          | NEKTAR THERAPEUTICS                   | 171,902.74   | 11.3500    | 172,440.55      | 537.81                  |
| 15,491.0000          | NEW ORIENTAL EDUCATION & TECHN<br>ADR | 327,931.42   | 31.5000    | 487,966.50      | 160,035.08              |
| 26,200.0000          | NEWFIELD EXPLORATION CO               | 733,991.95   | 24.6300    | 645,306.00      | 88,685.95-              |
| 11,500.0000          | NOBLE ENERGY INC                      | 637,835.00   | 68.1100    | 783,265.00      | 145,430.00              |
| 2,978.0000           | NORTHROP GRUMMAN CORP                 | 278,881.55   | 114.6100   | 341,308.58      | 62,427.03               |
| 6,000.0000           | OCCIDENTAL PETROLEUM CORP             | 516,731.10   | 95.1000    | 570,600.00      | 53,868.90               |
| 11,800.0000          | OMNICARE INC                          | 552,291.92   | 60.3600    | 712,248.00      | 159,956.08              |
| 24,400.0000          | OMNICOM GROUP INC                     | 1,258,527.86 | 74.3700    | 1,814,628.00    | 556,100.14              |
| 16,300.0000          | OMEGA HEALTHCARE INVESTORS INC        | 533,396.31   | 29.8000    | 485,740.00      | 47,656.31-              |
| 19,456.0000          | ON SEMICONDUCTOR CORP                 | 148,545.18   | 8.2400     | 160,317.44      | 11,772.26               |
| 15,000.0000          | ORACLE CORP                           | 499,800.00   | 38.2600    | 573,900.00      | 74,100.00               |
| 13,700.0000          | PNC FINANCIAL SERVICES GROUP I        | 826,631.90   | 77.5800    | 1,062,846.00    | 236,214.10              |



BNY MELLON

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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION          | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|-------------------------------|--------------|----------|-----------------|-------------------------|
| 2,977.0000           | PANERA BREAD CO               | 477,809.69   | 176.6900 | 526,006.13      | 48,196.44               |
| 8,200.0000           | PARKER HANNIFIN CORP          | 742,247.58   | 128.6400 | 1,054,848.00    | 312,600.42              |
| 4,168.0000           | PATTERSON COS INC             | 176,077.24   | 41.2000  | 171,721.60      | 4,355.64-               |
| 2,500.0000           | PIONEER NATURAL RESOURCES CO  | 266,475.00   | 184.0700 | 460,175.00      | 193,700.00              |
| 3,599.0000           | PORTFOLIO RECOVERY ASSOCIATES | 157,594.35   | 52.8400  | 190,171.16      | 32,576.81               |
| 11,338.0000          | T ROWE PRICE GROUP INC        | 742,862.04   | 83.7700  | 949,784.26      | 206,922.22              |
| 9,200.0000           | PROCTER & GAMBLE CO/THE       | 631,310.10   | 81.4100  | 748,972.00      | 117,661.90              |
| 30,700.0000          | PROGRESSIVE CORP/THE          | 653,123.48   | 27.2700  | 837,189.00      | 184,065.52              |
| 15,215.0000          | QLOGIC CORP                   | 170,838.58   | 11.8300  | 179,993.45      | 9,154.87                |
| 33,425.0000          | QUALCOMM INC                  | 2,139,528.10 | 74.2500  | 2,481,806.25    | 342,278.15              |
| 21,100.0000          | QUEST DIAGNOSTICS INC/DE      | 1,232,810.96 | 53.5400  | 1,129,694.00    | 103,116.96-             |
| 7,813.0000           | QUESTCOR PHARMACEUTICALS INC  | 246,731.25   | 54.4500  | 425,417.85      | 178,686.60              |
| 17,916.0000          | QUIDEL CORP                   | 404,674.66   | 30.8900  | 553,425.24      | 148,750.58              |
| 10,847.0000          | RAYTHEON CO                   | 923,592.71   | 90.7000  | 983,822.90      | 60,230.19               |
| 25,205.0000          | RED HAT INC                   | 1,251,078.12 | 56.0400  | 1,412,488.20    | 161,410.08              |
| 10,200.0000          | ROCK TENN CO                  | 769,210.93   | 105.0100 | 1,071,102.00    | 301,891.07              |
| 11,546.0000          | ROPER INDUSTRIES INC          | 1,331,734.63 | 138.6800 | 1,601,199.28    | 269,464.65              |
| 42,360.0000          | SEI INVESTMENTS CO            | 997,422.64   | 34.7300  | 1,471,162.80    | 473,740.16              |



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| <u>SHARES/<br/>PAR VALUE</u> | <u>SECURITY DESCRIPTION</u>  | <u>COST</u>  | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|------------------------------|------------------------------|--------------|--------------|-------------------------|---------------------------------|
| 26,781.0000                  | SLM CORP                     | 565,674.66   | 26.2800      | 703,804.68              | 138,130.02                      |
| 10,216.0000                  | SALIX PHARMACEUTICALS LTD    | 543,769.11   | 89.9400      | 918,827.04              | 375,057.93                      |
| 5,419.0000                   | SANDISK CORP                 | 313,579.59   | 70.5400      | 382,256.26              | 68,676.67                       |
| 13,030.0000                  | SAPIENT CORP                 | 143,033.79   | 17.3600      | 226,200.80              | 83,167.01                       |
| 4,613.0000                   | HENRY SCHEIN INC             | 491,884.03   | 114.2600     | 527,081.38              | 35,197.35                       |
| 22,050.0000                  | SCHLUMBERGER LTD             | 1,595,422.35 | 90.1100      | 1,986,925.50            | 391,503.15                      |
| 34,700.0000                  | CHARLES SCHWAB CORP/THE      | 518,181.76   | 26.0000      | 902,200.00              | 384,018.24                      |
| 54,558.0000                  | SENNONYX INC                 | 242,905.20   | 5.0600       | 276,063.48              | 33,158.28                       |
| 27,528.0000                  | SOUTHWEST AIRLINES CO        | 296,397.47   | 18.8400      | 518,627.52              | 222,230.05                      |
| 16,915.0000                  | SOUTHWESTERN ENERGY CO       | 566,374.95   | 39.3300      | 665,266.95              | 98,892.00                       |
| 9,337.0000                   | SPARTON CORP                 | 234,481.50   | 27.9500      | 260,969.15              | 26,487.65                       |
| 18,480.0000                  | STAMPS.COM INC               | 625,662.48   | 42.1000      | 778,008.00              | 152,345.52                      |
| 31,400.0000                  | STATE STREET CORP            | 1,660,077.97 | 73.3900      | 2,304,446.00            | 644,368.03                      |
| 16,430.0000                  | STERICYCLE INC               | 1,558,844.05 | 116.1700     | 1,908,673.10            | 349,829.05                      |
| 3,995.0000                   | STRAYER EDUCATION INC        | 164,421.67   | 34.4700      | 137,707.65              | 26,714.02-                      |
| 8,600.0000                   | SUPERIOR ENERGY SERVICES INC | 178,192.00   | 26.6100      | 228,846.00              | 50,654.00                       |
| 7,466.0000                   | SYNAPTICS INC                | 313,732.84   | 51.8100      | 386,813.46              | 73,080.62                       |
| 4,265.0000                   | SYNNEX CORP                  | 262,534.89   | 67.4000      | 287,461.00              | 24,926.11                       |



BNY MELLON

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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION       | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|----------------------------|--------------|----------|-----------------|-------------------------|
| 3,456.0000           | TELEFLEX INC               | 284,059.68   | 93.8600  | 324,380.16      | 40,320.48               |
| 7,916.0000           | TETRA TECH INC             | 227,760.74   | 27.9800  | 221,489.68      | 6,271.06-               |
| 15,521.0000          | 3D SYSTEMS CORP            | 567,928.82   | 92.9300  | 1,442,366.53    | 874,437.71              |
| 12,000.0000          | 3M CO                      | 1,124,470.12 | 140.2500 | 1,683,000.00    | 558,529.88              |
| 4,860.0000           | TOTAL SYSTEM SERVICES INC  | 107,644.49   | 33.2800  | 161,740.80      | 54,096.31               |
| 71,410.0000          | TRIMBLE NAVIGATION LTD     | 2,111,777.26 | 34.7000  | 2,477,927.00    | 366,149.74              |
| 2,503.0000           | TRIUMPH GROUP INC          | 183,744.08   | 76.0700  | 190,403.21      | 6,659.13                |
| 9,112.0000           | TYLER TECHNOLOGIES INC     | 456,888.64   | 102.1300 | 930,608.56      | 473,719.92              |
| 3,800.0000           | UNION PACIFIC CORP         | 477,736.00   | 168.0000 | 638,400.00      | 160,664.00              |
| 7,900.0000           | UNITED PARCEL SERVICE INC  | 586,958.50   | 105.0800 | 830,132.00      | 243,173.50              |
| 5,400.0000           | UNITED TECHNOLOGIES CORP   | 507,839.22   | 113.8000 | 614,520.00      | 106,680.78              |
| 21,601.0000          | UNITEDHEALTH GROUP INC     | 1,316,359.62 | 75.3000  | 1,626,555.30    | 310,195.68              |
| 3,099.0000           | VAIL RESORTS INC           | 188,198.91   | 75.2300  | 233,137.77      | 44,938.86               |
| 9,800.0000           | VERIZON COMMUNICATIONS INC | 424,046.00   | 49.1400  | 481,572.00      | 57,526.00               |
| 7,200.0000           | WAL-MART STORES INC        | 491,256.00   | 78.6900  | 566,568.00      | 75,312.00               |
| 20,765.0000          | WALGREEN CO                | 864,363.57   | 57.4400  | 1,192,741.60    | 328,378.03              |
| 28,730.0000          | WASTE CONNECTIONS INC      | 1,002,829.37 | 43.6300  | 1,253,489.90    | 250,660.53              |
| 3,061.0000           | WELLCARE HEALTH PLANS INC  | 153,869.61   | 70.4200  | 215,555.62      | 61,686.01               |





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TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14

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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION                            | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|-------------------------------------------------|--------------|----------|-----------------|-------------------------|
| 51,046.0000          | WELLS FARGO & CO                                | 1,754,904.22 | 45.4000  | 2,317,488.40    | 562,584.18              |
| 5,026.0000           | WESTERN DIGITAL CORP                            | 313,386.55   | 83.9000  | 421,681.40      | 108,294.85              |
| 4,400.0000           | WHIRLPOOL CORP                                  | 558,131.52   | 156.8600 | 690,184.00      | 132,052.48              |
| 19,400.0000          | WILLIAMS COS INC/THE                            | 663,065.83   | 38.5700  | 748,258.00      | 85,192.17               |
| 12,100.0000          | WORLD FUEL SERVICES CORP                        | 500,558.32   | 43.1600  | 522,236.00      | 21,677.68               |
| 17,800.0000          | XCEL ENERGY INC                                 | 475,438.00   | 27.9400  | 497,332.00      | 21,894.00               |
| 2,978.0000           | ACCENTURE PLC                                   | 208,213.19   | 82.2200  | 244,851.16      | 36,637.97               |
| 7,400.0000           | ENSCO PLC                                       | 423,298.40   | 57.1800  | 423,132.00      | 166.40-                 |
| 14,800.0000          | ROWAN COS PLC                                   | 492,808.48   | 35.3600  | 523,328.00      | 30,519.52               |
| 14,480.0000          | SEAGATE TECHNOLOGY                              | 617,917.22   | 56.1600  | 813,196.80      | 195,279.58              |
| 12,706.0000          | SIGNET JEWELERS LTD                             | 946,472.56   | 78.7000  | 999,962.20      | 53,489.64               |
| 19,600.0000          | WILLIS GROUP HOLDINGS PUBLIC<br>LIMITED COMPANY | 719,943.06   | 44.8100  | 878,276.00      | 158,332.94              |
| 7,797.0000           | TE CONNECTIVITY LTD                             | 397,908.35   | 55.1100  | 429,692.67      | 31,784.32               |
| 21,827.0000          | ATTUNITY LTD                                    | 172,655.94   | 10.3600  | 226,127.72      | 53,471.78               |
| 4,207.0000           | ITURAN LOCATION AND CONTROL<br>LTD              | 68,035.48    | 21.6400  | 91,039.48       | 23,004.00               |
| 3,756.0000           | STRATASYS LTD                                   | 302,658.41   | 134.7000 | 505,933.20      | 203,274.79              |
| 8,320.0000           | VISTAPRINT NV                                   | 351,825.35   | 56.8500  | 472,992.00      | 121,166.65              |



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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION           | COST       | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|--------------------------------|------------|----------|-----------------|-------------------------|
| 2,730.0000           | COPA HOLDINGS S A CL A         | 284,045.69 | 160.1100 | 437,100.30      | 153,054.61              |
| 14,112.0000          | ABBVIE INC                     | 432,943.86 | 52.8100  | 745,254.72      | 312,310.86              |
| 9,428.0000           | ACI WORLDWIDE INC              | 438,542.63 | 65.0000  | 612,820.00      | 174,277.37              |
| 19,421.0000          | AMERICAN AIRLS GROUP INC       | 274,928.56 | 25.2500  | 490,380.25      | 215,451.69              |
| 10,238.0000          | AMERICAN INTERNATIONAL GROUP I | 452,555.97 | 51.0500  | 522,649.90      | 70,093.93               |
| 9,945.0000           | AMERICAN TOWER CORP            | 767,974.15 | 79.8200  | 793,809.90      | 25,835.75               |
| 20,500.0000          | APPROACH RESOURCES INC         | 505,012.03 | 19.3000  | 395,650.00      | 109,362.03              |
| 5,540.0000           | BOFI HOLDING INC               | 234,343.66 | 78.4300  | 434,502.20      | 200,158.54              |
| 9,500.0000           | BERKSHIRE HATHAWAY INC         | 859,255.50 | 118.5600 | 1,126,320.00    | 267,064.50              |
| 28,302.0000          | BRAVO BRIO RESTAURANT GROUP IN | 473,875.06 | 16.2700  | 460,473.54      | 13,401.52               |
| 4,540.0000           | BRIDGEPOINT EDUCATION INC      | 75,583.47  | 17.7100  | 80,403.40       | 4,819.93                |
| 7,983.0000           | CBOE HOLDINGS INC              | 292,409.19 | 51.9600  | 414,796.68      | 122,387.49              |
| 20,900.0000          | CA INC                         | 642,807.50 | 33.6500  | 703,285.00      | 60,477.50               |
| 11,200.0000          | CAMERON INTERNATIONAL CORP     | 658,615.65 | 59.5300  | 666,736.00      | 8,120.35                |
| 3,599.0000           | CAPELLA EDUCATION CO           | 162,599.51 | 66.4400  | 239,117.56      | 76,518.05               |
| 5,127.0000           | CHEFS' WAREHOUSE HOLDINGS LLC  | 95,638.37  | 29.1600  | 149,503.32      | 53,864.95               |
| 23,813.0000          | CLEVELAND BIOLABS INC          | 43,552.23  | 1.1700   | 27,861.21       | 15,691.02               |
| 17,700.0000          | COCA-COLA ENTERPRISES INC      | 573,661.51 | 44.1300  | 781,101.00      | 207,439.49              |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION                    | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|-----------------------------------------|--------------|----------|-----------------|-------------------------|
| 6,442.0000           | COGENT COMMUNICATIONS GROUP IN          | 178,934.28   | 40.4100  | 260,321.22      | 81,386.94               |
| 9,220.0000           | CONCHO RESOURCES INC/MIDLAND T          | 768,057.13   | 108.0000 | 995,760.00      | 227,702.87              |
| 24,696.0000          | CONSTANT CONTACT INC                    | 377,029.00   | 31.0700  | 767,304.72      | 390,275.72              |
| 10,288.0000          | CORELOGIC INC                           | 276,440.62   | 36.5300  | 365,532.64      | 89,092.02               |
| 22,324.0000          | DEALERTRACK TECHNOLOGY INC              | 657,675.23   | 48.0800  | 1,073,337.92    | 415,662.69              |
| 43,174.0000          | DELTA AIR LINES INC                     | 611,241.86   | 27.4700  | 1,185,989.78    | 574,747.92              |
| 5,200.0000           | DIAGEO PLC<br>ADR                       | 608,370.61   | 132.4200 | 688,584.00      | 80,213.39               |
| 38,552.0000          | DISCOVER FINANCIAL SERVICES             | 1,653,680.39 | 55.9500  | 2,156,984.40    | 503,304.01              |
| 6,600.0000           | EQT CORP                                | 415,144.11   | 89.7800  | 592,548.00      | 177,403.89              |
| 20,151.0000          | ECHO GLOBAL LOGISTICS INC               | 378,730.61   | 21.4800  | 432,843.48      | 54,112.87               |
| 17,730.0000          | EXAMWORKS GROUP INC                     | 439,480.54   | 29.8700  | 529,595.10      | 90,114.56               |
| 12,389.0000          | EXELIS INC                              | 187,107.67   | 19.0600  | 236,134.34      | 49,026.67               |
| 1,820.0000           | FLEETCOR TECHNOLOGIES INC               | 155,353.18   | 117.1700 | 213,249.40      | 57,896.22               |
| 12,087.0000          | FRESH MARKET INC/THE                    | 488,436.41   | 40.5000  | 489,523.50      | 1,087.09                |
| 2,667.0000           | GAMCO INVESTORS INCORPORATED<br>CLASS A | 139,628.86   | 86.9700  | 231,948.99      | 92,320.13               |
| 45,354.0000          | GFI GROUP INC                           | 181,155.13   | 3.9100   | 177,334.14      | 3,820.99-               |
| 2,535.0000           | GEOSPACE TECHNOLOGIES CORP              | 191,284.46   | 94.6360  | 239,902.26      | 48,617.80               |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION          | COST       | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|-------------------------------|------------|----------|-----------------|-------------------------|
| 9,000.0000           | HANESBRANDS INC               | 485,371.70 | 70.2700  | 632,430.00      | 147,058.30              |
| 8,590.0000           | HENKEL AG & CO KGAA<br>ADR    | 592,675.08 | 104.2280 | 895,318.52      | 302,643.44              |
| 3,000.0000           | HENKEL AG & CO KGAA<br>ADR    | 247,639.10 | 116.1740 | 348,522.00      | 100,882.90              |
| 8,200.0000           | HESS CORP                     | 523,549.48 | 83.0000  | 680,600.00      | 157,050.52              |
| 7,899.0000           | HURON CONSULTING GROUP INC    | 406,662.54 | 62.6700  | 495,030.33      | 88,367.79               |
| 34,987.0000          | ICG GROUP INC                 | 429,541.42 | 18.6300  | 651,807.81      | 222,266.39              |
| 5,953.0000           | ICONIX BRAND GROUP INC        | 171,030.26 | 39.7000  | 236,334.10      | 65,303.84               |
| 14,436.0000          | INTERACTIVE BROKERS GROUP INC | 216,575.74 | 24.3400  | 351,372.24      | 134,796.50              |
| 5,972.0000           | J2 GLOBAL INC                 | 247,162.39 | 50.0100  | 298,659.72      | 51,497.33               |
| 16,789.0000          | LIQUIDITY SERVICES INC        | 556,362.90 | 22.6600  | 380,438.74      | 175,924.16              |
| 14,800.0000          | LORILLARD INC                 | 643,328.62 | 50.6800  | 750,064.00      | 106,735.38              |
| 789.0000             | MASTERCARD INC                | 426,926.07 | 835.4600 | 659,177.94      | 232,251.87              |
| 12,188.0000          | NEUSTAR INC                   | 538,604.85 | 49.8600  | 607,693.68      | 69,088.83               |
| 6,300.0000           | NEXTERA ENERGY INC            | 435,897.00 | 85.6200  | 539,406.00      | 103,509.00              |
| 122.0000             | NORTEL NETWORKS CORP          | 0.61       | 0.0080   | 0.98            | 0.37                    |
| 4,199.0000           | O'REILLY AUTOMOTIVE INC       | 462,794.94 | 128.7100 | 540,453.29      | 77,658.35               |
| 7,446.0000           | PENSKE AUTOMOTIVE GROUP INC   | 239,320.45 | 47.1600  | 351,153.36      | 111,832.91              |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| SHARES/<br>PAR VALUE | SECURITY DESCRIPTION           | COST         | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|----------------------|--------------------------------|--------------|----------|-----------------|-------------------------|
| 7,756.0000           | PHARMERICA CORP                | 94,941.41    | 21.5000  | 166,754.00      | 71,812.59               |
| 11,400.0000          | PHILIP MORRIS INTERNATIONAL IN | 970,862.65   | 87.1300  | 993,282.00      | 22,399.35               |
| 10,930.0000          | POINTS INTERNATIONAL LTD       | 192,722.51   | 25.4100  | 277,731.30      | 85,008.79               |
| 8,658.0000           | POOL CORP                      | 430,314.49   | 58.1400  | 503,376.12      | 73,061.63               |
| 15,400.0000          | QEP RESOURCES INC              | 473,952.90   | 30.6500  | 472,010.00      | 1,942.90-               |
| 7,200.0000           | QUALCOMM INC                   | 532,476.00   | 74.2500  | 534,600.00      | 2,124.00                |
| 10,300.0000          | ROYAL DUTCH SHELL PLC<br>ADR   | 698,820.51   | 71.2700  | 734,081.00      | 35,260.49               |
| 6,391.0000           | RYANAIR HOLDINGS PLC<br>ADR    | 230,864.88   | 46.9300  | 299,929.63      | 69,064.75               |
| 7,200.0000           | SM ENERGY CO                   | 554,184.72   | 83.1100  | 598,392.00      | 44,207.28               |
| 10,052.0000          | SANMINA CORP                   | 165,067.15   | 16.7000  | 167,868.40      | 2,801.25                |
| 8,988.0000           | SHUTTERFLY INC                 | 438,310.61   | 50.9300  | 457,758.84      | 19,448.23               |
| 29,300.0000          | STATOIL ASA<br>ADR             | 649,509.41   | 24.1300  | 707,009.00      | 57,499.59               |
| 31,100.0000          | TWENTY FIRST CENTURY FOX INC   | 970,884.41   | 35.1700  | 1,093,787.00    | 122,902.59              |
| 26,500.0000          | UNILEVER NV                    | 1,036,338.50 | 40.2300  | 1,066,095.00    | 29,756.50               |
| 21,745.0000          | VERISK ANALYTICS INC           | 1,357,553.41 | 65.7200  | 1,429,081.40    | 71,527.99               |
| 7,800.0000           | VIACOM INC                     | 667,118.40   | 87.3400  | 681,252.00      | 14,133.60               |
| 12,410.0000          | VISA INC                       | 1,920,083.10 | 222.6800 | 2,763,458.80    | 843,375.70              |



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| SHARES/<br>PAR VALUE                      | SECURITY DESCRIPTION                                | COST           | PRICE      | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|-------------------------------------------|-----------------------------------------------------|----------------|------------|-----------------|-------------------------|
| 16,253.0000                               | WAGEWORKS INC                                       | 390,565.77     | 59.4400    | 966,078.32      | 575,512.55              |
| 6,987.0000                                | WELLPOINT INC                                       | 517,156.97     | 92.3900    | 645,528.93      | 128,371.96              |
| 69,314.0000                               | WESTERN UNION CO/THE                                | 958,564.52     | 17.2500    | 1,195,666.50    | 237,101.98              |
| 9,800.0000                                | WYNDHAM WORLDWIDE CORP                              | 521,458.00     | 73.6900    | 722,162.00      | 200,704.00              |
| 18,700.0000                               | SKF USA TYROL INC GLASGOW KY                        | 1,500,000.00   | 53.4759    | 1,000,000.00    | 500,000.00-             |
| 3,916.2700                                | SKF USA HANOVER PPTY PENN TWP<br>YORK PA            | 5,100,000.00   | 1,289.4922 | 5,050,000.00    | 50,000.00-              |
| 1,560,600.4200                            | REAL ESTATE TRUST CASH                              | 130,327.30     | 0.6354     | 991,744.40      | 861,417.10              |
|                                           | TOTAL CORPORATE STOCK - COMMON                      | 180,887,439.44 |            | 224,568,195.10  | 43,680,755.66           |
| <u>PARTNERSHIP/JOINT VENTURE INTEREST</u> |                                                     |                |            |                 |                         |
| 1,090,366.0000                            | TA REALTY ASSOCIATES FUND VI<br>LIMITED PARTNERSHIP | 3,151,707.85   | 1.0000     | 1,090,366.00    | 2,061,341.85-           |
| 2,115,080.0000                            | METROPOLITAN REAL ESTATE<br>PARTNERS II LP          | 1,980,493.46   | 1.0000     | 2,115,080.00    | 134,586.54              |
| 10,087,791.0000                           | TA REALTY ASSOCIATION VII                           | 9,892,911.92   | 1.0000     | 10,087,791.00   | 194,879.08              |
| 8,659,403.0000                            | ALINDA INFRASTRUCTURE FD I LP                       | 7,891,188.00   | 1.0000     | 8,659,403.00    | 768,215.00              |
|                                           | TOTAL PARTNERSHIP/JOINT VENTURE INTEREST            | 22,916,301.23  |            | 21,952,640.00   | 963,661.23-             |



# BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| <u>SHARES/<br/>PAR VALUE</u>      | <u>SECURITY DESCRIPTION</u>                                | <u>COST</u>   | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|-----------------------------------|------------------------------------------------------------|---------------|--------------|-------------------------|---------------------------------|
| <u>WRITTEN OPTIONS</u>            |                                                            |               |              |                         |                                 |
| 55.0000-                          | S & P 500 INDEX (SPX)<br>CALL JAN 14 1820.000 ED 011814    | 115,283.01-   | 3,510.0000   | 193,050.00-             | 77,766.99-                      |
| TOTAL WRITTEN OPTIONS             |                                                            | 115,283.01-   |              | 193,050.00-             | 77,766.99-                      |
| <u>COMMON/COLLECTIVE TRUST</u>    |                                                            |               |              |                         |                                 |
| 1,760,228.3540                    | THORNBURG DEVELOPING WORLD FD                              | 18,500,000.00 | 10.9000      | 19,186,489.06           | 686,489.06                      |
| 13,126,784.0600                   | EB TEMP INV FD<br>VAR RT 12/31/49 FEE CL 15                | 13,126,784.06 | 1.0000       | 13,126,784.06           | 0.00                            |
| 137,680.2580                      | STATE STREET BK DONALD SMITH G<br>TRUST #6T01              | 5,007,028.15  | 172.2986     | 23,722,120.11           | 18,715,091.96                   |
| 15,725.5750                       | JPMCB MGT STRATEGIC PROPERTY<br>FD                         | 30,997,462.93 | 2,175.6190   | 34,212,859.76           | 3,215,396.83                    |
| TOTAL COMMON/COLLECTIVE TRUST     |                                                            | 67,631,275.14 |              | 90,248,252.99           | 22,616,977.85                   |
| <u>103-12 INVESTMENT ENTITIES</u> |                                                            |               |              |                         |                                 |
| 505,710.8600                      | SILCHESTER INTL INVESTORS INTL<br>VALUE EQUITY GROUP TRUST | 9,580,161.28  | 99.6613      | 50,399,829.55           | 40,819,668.27                   |
| TOTAL 103-12 INVESTMENT ENTITIES  |                                                            | 9,580,161.28  |              | 50,399,829.55           | 40,819,668.27                   |



# BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
 SKF G713644 REVALUED COST  
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| SHARES/<br>PAR VALUE            | SECURITY DESCRIPTION                                | COST           | PRICE    | MARKET<br>VALUE | UNREALIZED<br>GAIN/LOSS |
|---------------------------------|-----------------------------------------------------|----------------|----------|-----------------|-------------------------|
| REGISTERED INVESTMENT COMPANIES |                                                     |                |          |                 |                         |
| 10,403.0000                     | ISHARES IBOX \$ INVESTMENT GRA                      | 1,177,256.57   | 114.1875 | 1,187,892.56    | 10,635.99               |
| 2,441.0000                      | ISHARES J P MORGAN USD<br>EMERGING MARKETS BOND ETF | 269,010.89     | 108.1600 | 264,018.56      | 4,992.33-               |
| 14,189.0000                     | ISHARES MBS ETF                                     | 1,534,997.95   | 104.5700 | 1,483,743.73    | 51,254.22-              |
| 7,552.0000                      | ISHARES INTERMEDIATE CREDIT<br>BOND ETF             | 820,263.98     | 107.8800 | 814,709.76      | 5,554.22-               |
| 7,211.0000                      | ISHARES 3-7 YEAR TREASURY BOND<br>ETF               | 882,027.66     | 120.0300 | 865,536.33      | 16,491.33-              |
| 11,410.0000                     | CURRENCYSHARES JAPANESE YEN TR                      | 1,132,372.78   | 92.7600  | 1,058,391.60    | 73,981.18-              |
| 3,024.0000                      | ISHARES MSCI SOUTH AFRICA ETF                       | 200,590.96     | 64.4900  | 195,017.76      | 5,573.20-               |
| 8,537.0000                      | ISHARES S&P LATIN AMERICA 40 I                      | 366,454.18     | 37.0400  | 316,210.48      | 50,243.70-              |
| 10,507.0000                     | ISHARES S&P/CITIGROUP INTERNAT                      | 1,052,050.00   | 100.1900 | 1,052,696.33    | 646.33                  |
| 24,421.0000                     | ISHARES MSCI ALL COUNTRY ASIA<br>EX JAPAN ETF       | 1,387,119.75   | 60.3100  | 1,472,830.51    | 85,710.76               |
| 3,147.0000                      | ISHARES CORE MSCI EMERGING MAR                      | 160,496.69     | 49.8100  | 156,752.07      | 3,744.62-               |
| 4,376.0000                      | MARKET VECTORS - RUSSIA ETF                         | 124,369.65     | 28.8700  | 126,335.12      | 1,965.47                |
| 1,290,570.2200                  | PIMCO SHORT-TERM FUND                               | 12,666,614.66  | 9.8500   | 12,712,116.67   | 45,502.01               |
| 9,981,062.0210                  | PIMCO LONG-TERM CREDIT FUND                         | 120,535,391.04 | 11.6500  | 116,279,372.54  | 4,256,018.50-           |
| 10,796.0000                     | POWERSHARES SENIOR LOAN PORTFO                      | 269,128.51     | 24.8800  | 268,604.48      | 524.03-                 |





BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR 2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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| <u>SHARES/<br/>PAR VALUE</u>          | <u>SECURITY DESCRIPTION</u>                                 | <u>COST</u>    | <u>PRICE</u> | <u>MARKET<br/>VALUE</u> | <u>UNREALIZED<br/>GAIN/LOSS</u> |
|---------------------------------------|-------------------------------------------------------------|----------------|--------------|-------------------------|---------------------------------|
| 15,179.0000                           | POWERSHARES BUILD AMERICA BOND                              | 434,040.20     | 27.2900      | 414,234.91              | 19,805.29-                      |
| 54,209.0000                           | PROSHARES SHORT DOW30                                       | 1,599,447.07   | 26.1100      | 1,415,396.99            | 184,050.08-                     |
| 74,898.0000                           | PROSHARES SHORT RUSSELL2000                                 | 1,484,788.16   | 16.8800      | 1,264,278.24            | 220,509.92-                     |
| 2,342.0000                            | SPDR S&P EMERGING EUROPE ETF                                | 95,545.79      | 40.2490      | 94,263.16               | 1,282.63-                       |
| 8,707.0000                            | SPDR BARCLAYS SHORT TERM<br>INTERNATIONAL TREASURY BOND ETF | 310,054.99     | 35.8200      | 311,884.74              | 1,829.75                        |
| 51,166.0000                           | SPDR BARCLAYS INTERNATIONAL<br>TREASURY BOND ETF            | 3,013,488.15   | 57.7400      | 2,954,324.84            | 59,163.31-                      |
| TOTAL REGISTERED INVESTMENT COMPANIES |                                                             | 149,515,509.63 |              | 144,708,611.38          | 4,806,898.25-                   |
| GRAND TOTAL                           |                                                             | 536,470,831.49 |              | 632,304,374.07          | 0.00 C                          |
|                                       |                                                             |                |              |                         | 95,833,542.58 I                 |
|                                       |                                                             |                |              |                         | 95,833,542.58                   |



LINCOLN INDUSTRIAL CORPORATION  
PLAN NO. CT73040 01

Asset Summary

Statement Period  
January 1, 2013 - December 31, 2013

| Asset Category      | Beginning Balance |            | Net Transactions  | Investment Gain/Loss | Ending Balance |            |
|---------------------|-------------------|------------|-------------------|----------------------|----------------|------------|
|                     | Dollars           | % of Total |                   |                      | Dollars        | % of Total |
| Bond                | \$15,463,628.88   | 41.90%     | (\$15,034,175.32) | (\$284,221.90)       | \$145,231.66   | 100.00%    |
| Dvfd Core Bd        | \$13,516,259.54   | 36.60%     | (\$13,134,940.69) | (\$236,087.19)       | \$145,231.66   | 100.00%    |
| Dvfd High Yield Bd  | \$790,438.62      | 2.20%      | (\$821,222.92)    | \$30,784.30          | \$0.00         | 0.00%      |
| Dvfd Infl -Prot Sec | \$1,156,930.72    | 3.10%      | (\$1,078,011.71)  | (\$78,919.01)        | \$0.00         | 0.00%      |
| US Common Stock     | \$14,487,483.02   | 39.30%     | (\$18,007,766.64) | \$3,520,283.62       | \$0.00         | 0.00%      |
| Columbia SmCap Val  | \$734,868.60      | 2.00%      | (\$952,594.58)    | \$217,725.98         | \$0.00         | 0.00%      |
| Dvfd Lg Val         | \$3,597,710.93    | 9.70%      | (\$4,589,811.13)  | \$992,100.20         | \$0.00         | 0.00%      |
| Dvfd Stk Indx       | \$4,667,690.24    | 12.70%     | (\$5,729,391.35)  | \$1,061,701.11       | \$0.00         | 0.00%      |
| Fidelity Contrafnd  | \$4,525,266.56    | 12.30%     | (\$5,560,551.63)  | \$1,035,285.07       | \$0.00         | 0.00%      |
| Nuveen SmCap Sel    | \$961,946.69      | 2.60%      | (\$1,175,417.95)  | \$213,471.26         | \$0.00         | 0.00%      |
| International       | \$3,508,777.35    | 9.50%      | (\$3,881,497.65)  | \$372,720.30         | \$0.00         | 0.00%      |
| Dvfd Intl Eqty      | \$2,914,700.81    | 7.90%      | (\$3,287,415.64)  | \$372,714.83         | \$0.00         | 0.00%      |
| Lazard Emrg Mkts    | \$594,076.54      | 1.60%      | (\$594,082.01)    | \$5.47               | \$0.00         | 0.00%      |
| Alternatives        | \$3,422,940.88    | 9.30%      | (\$3,624,027.69)  | \$201,086.81         | \$0.00         | 0.00%      |
| Dvfd REstate        | \$3,422,940.88    | 9.30%      | (\$3,624,027.69)  | \$201,086.81         | \$0.00         | 0.00%      |
| Total Assets        | \$36,882,830.13   | 100.00%    | (\$40,547,467.30) | \$3,809,868.83       | \$145,231.66   | 100.00%    |

SKF USA Inc.  
EIN: 23-1043740  
PLAN: 001

2013  
SCHEDULE H Line 4j  
Series of Transactions  
in excess of 5% of the  
current value of Plan  
Assets

This file consists of 3 pages  
(including the cover)



BNY MELLON

TRDSKF SKFG71364400 5500 FINAL 122203 SINGLE TRANSACTIONS IN EXCESS OF FIVE PERCENT  
OF THE CURRENT VALUE OF THE PLAN ASSETS  
FOR THE PERIOD 01 JANUARY 2013 THROUGH 31 DECEMBER 2013  
SKF G713644  
SKF USA COMBINED MGR

2013-12-31 CYCLE 3 12:22:07 RUN DATE: 31-MAR-14  
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T6400

| TRAN<br>CODE | SHARES/<br>PAR VALUE | SECURITY DESCRIPTION        | TRANSACTION<br>EXPENSE | 5% VALUE:            |                        |                            | GAIN/LOSS  |
|--------------|----------------------|-----------------------------|------------------------|----------------------|------------------------|----------------------------|------------|
|              |                      |                             |                        | COST OF<br>PURCHASES | PROCEEDS<br>FROM SALES | COST OF ASSETS<br>DISPOSED |            |
| S            | 12,729,124.23        | PIMCO SHORT-TERM FUND       | .00                    | .00                  | 125,000,000.00         | 124,758,493.51             | 241,506.49 |
| B            | 10,322,047.89        | PIMCO LONG-TERM CREDIT FUND | .00                    | 125,000,000.00       | .00                    | .00                        | .00        |
| B            | 125,000,000.00       | COMMIT TO PUR MUTUAL FD     | .00                    | 125,000,000.00       | .00                    | .00                        | .00        |
| S            | 125,000,000.00       | COMMIT TO PUR MUTUAL FD     | .00                    | .00                  | 125,000,000.00         | 125,000,000.00             | .00        |



BNY MELLON

TRDSKF SKFG71364400 5500      FINAL      122203      2013-12-31      CYCLE 3      12:22:07      RUN DATE: 31-MAR-14  
SKF G713644      5500 CONTRIBUTIONS, EXPENSES, & TRANSFERS DETAIL TRANSACTION REPORT      PAGE: 14  
SKF USA COMBINED MGR      FOR THE PERIOD 01 JANUARY 2013 THROUGH 31 DECEMBER 2013      M2570E

| <u>TRAN CODE</u> | <u>SHARES/<br/>PAR VALUE</u> | <u>SECURITY DESCRIPTION</u>                                                                  | <u>PAY/TRADE<br/>EFF DATE</u> | <u>AMOUNT</u> | <u>CASH</u> |
|------------------|------------------------------|----------------------------------------------------------------------------------------------|-------------------------------|---------------|-------------|
| CD               |                              | SKF USA MASTER TRUST UNIT<br>REP UNITS BOUGHT IN<br>ACCT SKFF8613422<br>SKF USA-CASH MANAGER | 19-SEP-13                     | 38,316,113.88 | .00         |

**Pension Plan for Employees of SKF USA, Inc.**  
**EIN/PN: 23-1043740 / 001**

**Schedule SB, Part V – Summary of Plan Provisions**

**Effective Date**

The Original Pension Plan for Employees of SKF USA, Inc. became effective December 1, 1950. The restated plan became effective as of January 1, 2011.

**Most Recent Amendment Effective Date**

The Lincoln Industrial Corporation Omnibus Plan was merged into this plan effective December 31, 2012.

**Participation Date**

Immediate

**DEFINITIONS**

**Covered Employees**

All salaried employees (regardless of location), all hourly employees from the Hanover and MRC locations (within SKF's bearings division), all hourly employees from the Warehouse and Seneca locations (within SKF's Chicago Rawhide division) and Hourly employees from the Chicago Rawhide division's Elgin location who were hired on or before November 16, 1985.

**Plan Year**

The twelve-month period commencing on any January 1 and ending on December 31.

**Employee contributions**

None.

**CREDITED SERVICE**

**Vesting Service**

For (1) salaried employees, (2) hourly employees from the Hanover location within SKF's bearings division, and (3) hourly employees from the Warehouse and Seneca locations within SKF's Chicago Rawhide division, all periods of time from the date on which a person first performs an Hour of Service to such person's Severance from Service Date, measured in years and completed months. Non-successive periods of Vesting Service and less than whole year periods of Vesting Service shall be aggregated on the basis that 365 days of Vesting Service equals one whole year of Vesting Service, 30 days of Vesting Service equals one month of Vesting Service, and any remaining period of 15 to 30 days of Vesting Service equals one month of Vesting Service (any remaining period of less than 15 days shall be disregarded). If a person quits, is discharged, or retires and then performs an Hour of Service within 12 months after his Severance from Service Date (or if earlier, his or her date of first absence), the Period of Severance shall be included in Vesting Service. Also, Vesting Service shall not be considered interrupted by, and shall include (1) any period of US armed-forces military service (provided he or she returns to employment within the time and under the conditions which entitle him or her to re-employment rights), (2) any period covered by an Authorized Leave of Absence (limited to one year for hourly employees from Seneca), and (3) any period of temporary layoff, provided he or she returns when recalled (limited to three years for hourly employees from Hanover, limited to one year for hourly employees from Seneca, and limited to zero years for hourly employees from Warehouse).

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For hourly employees from the MRC location within SKF's bearings division, Vesting Service shall not be determined under the elapsed-time method described above, but instead shall be determined in accordance with the hours-of-service method set forth in the prior MRC pension plan.

For covered hourly employees from the Elgin location within SKF's Chicago Rawhide division, the number of Plan Years credited with 1,000 or more Hours of Service, including (1) any period of US armed-forces military service (provided he or she returns to employment within the time and under the conditions which entitle him or her to re-employment rights), (2) any period covered by an Authorized Leave of Absence, provided he or she returns to employment at the end of such absence, and (3) any period of temporary layoff, provided he or she returns when recalled or during the time period authorized.

There are special historical provisions for certain specific groups of former employees which we have not summarized.

**Benefit Service**

For (1) salaried employees, (2) hourly employees from the Hanover location within SKF's bearings division, and (3) hourly employees from the Warehouse and Seneca locations within SKF's Chicago Rawhide division, all periods of time from the date on which a person first performs an Hour of Service (or, in the case of salaried employees from the MRC location within SKF's bearings division, no earlier than July 25, 1986) to such person's Severance from Service Date, measured in years and completed months. Non-successive periods of Benefit Service and less than whole year periods of Benefit Service shall be aggregated on the basis that 365 days of Benefit Service equals one whole year of Benefit Service, 30 days of Benefit Service equals one month of Benefit Service, and any remaining period of 15 to 30 days of Benefit Service equals one month of Benefit Service (any remaining period of less than 15 days shall be disregarded). Benefit Service shall not be considered interrupted by, and shall include (1) any period of US armed-forces military service (provided he or she returns to employment within the time and under the conditions which entitle him or her to re-employment rights), (2) any period covered by an Authorized Leave of Absence (limited to one year for hourly employees from Seneca), and (3) any period of temporary layoff, provided he or she returns when recalled (limited to three years for hourly employees from Hanover, limited to one year for hourly employees from Seneca, and limited to zero years for hourly employees from Warehouse). Also, Benefit Service shall exclude (1) periods of service with respect to which a lump sum distribution of the entire present value was received, and (2) periods of service as a common law employee for an Affiliated Employer or for an Employer as other than an Employee (if not retiring from current location).

For hourly employees from the MRC location within SKF's bearings division, Benefit Service shall not be determined under the elapsed-time method described above, but instead shall be determined in accordance with the hours-of-service method set forth in the prior MRC pension plan. Also, the accrued benefit formula for these employees is based on two different types of service: (1) all service (including service earned before July 25, 1986), and (2) service earned before July 25, 1986.

For covered hourly employees from the Elgin location within SKF's Chicago Rawhide division, the number of Plan Years credited with 1,000 or more Hours of Service, including (1) any period of US armed-forces military service (provided he or she returns to employment within the time and under the conditions which entitle him or her to re-employment rights), (2) any period covered by an Authorized Leave of Absence, provided he or she returns to employment at the end of such absence, and (3) any period of temporary layoff, provided he or she returns when recalled or during the time period authorized.

There are special historical provisions for certain specific groups of former employees which we have not summarized.

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**Pensionable Earnings**

For salaried employees, total cash compensation (including base salary, commissions, overtime & night shift premiums, and bonuses), plus elective 401(k)/125 contributions and 132(f)(4) fringe benefits, minus all of the following:

- (a) Expense allowances and reimbursements (e.g., auto),
- (b) Reimbursements and allowances for relocation,
- (c) Taxable fringe benefits (e.g., life insurance premiums),
- (d) Cash compensation paid in lieu of specific fringe benefits,
- (e) Payments under LTI or deferred compensation plans, and
- (f) Any other extraordinary payments to HCEs.

For covered hourly employees from the Elgin location within Chicago Rawhide, annual rate of compensation in effect two months prior to an employee's anniversary (January 1 if benefit service began between July 2 and January 1, otherwise July 1).

**Final Average Earnings**

For salaried employees, average of pensionable earnings received during the five calendar years out of the ten calendar years immediately preceding or ending with termination during which total pensionable earnings were the greatest. If a participant has not completed five or ten calendar years, his or her actual period of employment shall be substituted for such period.

For covered hourly employees from the Elgin location within SKF's Chicago Rawhide division, average of pensionable earnings for the five consecutive anniversaries out of the ten anniversaries immediately preceding or ending with termination during which total pensionable earnings were the greatest. If a participant has not completed five or ten anniversaries, his or her actual period of employment shall be substituted for such period. Also, after an employee reaches age 55, his or her final average earnings shall not be less than the applicable pensionable earnings for the anniversary immediately preceding his or her 55th birthday.

**Accrued Benefit**

For salaried employees from the Chicago Rawhide division who were hired before April 1, 2007:

- (a) 1.64% of final average earnings multiplied by projected service at normal retirement date ( $\leq 30$ ), multiplied by
- (b) a fraction ( $\leq 1$ ), the numerator of which is service at termination and the denominator of which is projected service at normal retirement date, the result reduced by
- (c) the actuarially equivalent benefit payable from Colt Industries for service from January 1, 1982 to November 1, 1983, the overall result of which cannot be less than
- (d) the December 31, 1990 prior-formula accrued benefit.

For all other salaried employees, the greater of 1.25% of final average earnings or \$210 multiplied by benefit service.

For hourly employees from Hanover within SKF's bearings division, \$516 multiplied by benefit service. For hourly employees from MRC within SKF's bearings division, the sum of (1) \$408 multiplied by benefit service, and (2) \$186 multiplied by benefit service earned before July 25, 1986.

For Warehouse hourly employees with Chicago Rawhide whose status of last employment was Warehouse, \$120 multiplied by benefit service.



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For Seneca hourly employees within SKF's Chicago Rawhide division, \$252 (\$264 for retirements or terminations on or after January 1, 2012) multiplied by benefit service.

For covered Elgin hourly employees within Chicago Rawhide:

- (a) 40% of final average earnings, minus \$360, plus
- (b) \$24 multiplied by benefit service in excess of 30 years, disregarding any fraction of a year, the sum multiplied by
- (c) a fraction, the numerator of which is projected benefit service at normal retirement date ( $\leq 15$  years) and the denominator of which is 15, the result then multiplied by
- (d) another fraction, the numerator of which is benefit service at termination and the denominator of which is projected benefit service at normal retirement date.

## **BENEFITS**

### **Normal Retirement**

#### *Eligibility*

Generally, the later of (1) the last day of the month in which a participant attains age 65, or (2) the last day of the month in which a participant celebrates his or her fifth anniversary of plan participation.

For covered Elgin hourly employees within Chicago Rawhide, the later of (1) the participant's 65th birthday, or (2) the fifth anniversary of the date he became a participant. A fractional payment is made for the month in which the pension commences. Subsequent payments are made monthly thereafter on the first day of each month.

#### *Amount of Benefit*

Accrued benefit based on benefit service and pensionable earnings through normal retirement date.

### **Early Retirement**

#### *Eligibility*

Salaried employees from Chicago Rawhide hired before April 1, 2007 become eligible for early retirement upon attaining age 55 and completing five years of vesting service. All other salaried employees become eligible for voluntary early retirement upon the earlier of (1) attainment of age 55 and completion of five years of benefit service, or (2) if hired prior to May 14, 2001 completion of 30 years of benefit service that included benefit service completed prior to May 14, 2001. All other salaried employees are eligible for an involuntary early retirement benefit if their employment ceases by reason of involuntary termination and they had attained age 45 as of the termination date and completed 20 years of benefit service that includes benefit service completed prior to May 14, 2001.

Hourly Hanover employees become early-retirement eligible upon the earlier of (1) age 55 & ten years of benefit service or (2) 30 years of benefit service.

Hourly MRC employees become early-retirement eligible upon the earliest of (1) age 55 & ten years of benefit service, (2) age 62 & ten years of benefit service, (3) age 60 & 90 age-plus-benefit-service points (unreduced benefit), or (4) 86 age-plus-benefit-service points. There are also special shutdown eligibility provisions which we have not summarized.

Hourly Warehouse employees become early-retirement eligible upon attaining age 55 and completing ten years of vesting service. Hourly Seneca employees become early-retirement eligible upon attaining age 60 and completing ten years of vesting service.

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Covered hourly Elgin employees become early-retirement eligible upon the earliest of (1) the later of age 55 or ten years of vesting service, (2) 30 years of benefit service, or (3) attained age (in full years) plus benefit service (in full years) totals 90 or more.

There are special historical provisions for certain specific groups of former employees which we have not summarized.

Salaried employees from Chicago Rawhide hired before April 1, 2007 receive their accrued benefit reduced by (1/180)th for each month that commencement precedes 65 (to 60) and by another (1/300)th for each month that commencement precedes 60, unless they retire on or after having attained age 62, in which case the accrued benefit is only reduced by (1/300)th for each month that commencement precedes age 65.

All other salaried employees receive their accrued benefit without reduction if they satisfy either the involuntary or "30 and out" voluntary eligibility requirements. Otherwise, they receive their accrued benefit reduced by (1/180)th for each month that commencement precedes 65 (to 60) and by another (1/360)th for each month that commencement precedes 60.

In addition, upon retirement (early, late or normal), all salaried employees are eligible for a special lump sum benefit based on attained age (in full years) at retirement:

| Age | Amount | Age | Amount | Age | Amount  | Age | Amount  |
|-----|--------|-----|--------|-----|---------|-----|---------|
| <55 | \$500  | 57  | \$850  | 60  | \$1,050 | 63  | \$1,300 |
| 55  | 750    | 58  | 900    | 61  | 1,125   | 64  | 1,400   |
| 56  | 800    | 59  | 975    | 62  | 1,200   | 65+ | 1,500   |

*Amount of Benefit*

Hourly Hanover employees receive their accrued benefit without reduction if they've satisfied "30 and out" requirements. Otherwise, their accrued benefit is reduced similarly to salaried employees who aren't CR salaried employees hired before April 1, 2007.

Hourly MRC employees receive their accrued benefit without reduction if they've satisfied the "62/10", "Rule of 90" or "Rule of 86" eligibility requirements. Such employees are also eligible for an additional temporary monthly benefit payable until age 62 such that the total monthly benefit until age 62 (or until the participant is qualified to receive social security benefits, whichever is earlier) including both the unreduced lifetime benefit payable from the SKF plan and the benefit payable from the TRW pension plan equals \$2,400. Other eligible MRC hourly employees receive their accrued benefit reduced for commencement prior to age 62 as follows:

| Age | Reduction Factor |
|-----|------------------|
| 61  | 0.921            |
| 60  | 0.851            |
| 59  | 0.788            |
| 58  | 0.731            |
| 57  | 0.681            |
| 56  | 0.635            |
| 55  | 0.593            |

Hourly Warehouse employees receive their accrued benefit reduced by (1/180)th for each month commencement precedes 65 (to 60) and by another (1/300)th for each month commencement precedes 60 (unless they retire on or after having attained age 62, in which case the accrued benefit is only reduced by

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(1/300)th for each month that commencement precedes age 65. Hourly Seneca employees receive their accrued benefit reduced by (1/180)th for each month that benefit commencement precedes 65.

Covered hourly Elgin employees receive their accrued benefit without reduction if they've satisfied either the "30 and out" or "rule of 90" eligibility requirements. Otherwise, they receive their accrued benefit reduced similarly to hourly Warehouse employees.

**Late Retirement**

*Eligibility*

Any time after normal retirement.

*Amount of Benefit*

Accrued benefit based on benefit service and pensionable earnings through late retirement.

**Deferred Vested**

*Eligibility*

Completion of five years of vesting service.

*Amount of Benefit*

Accrued benefit based on benefit service and pensionable earnings through termination date. Participants who satisfy the service conditions for early retirement are eligible to retire early with the same reduction factors as for early retirements from active status.

**Disability**

*Eligibility*

Total and permanent disability that happened while employed and has continued for six consecutive months. Differing exclusions apply depending on location. In addition, disabled participants at all divisions/locations except for Elgin hourly must have completed ten years of benefit service (vesting service for non-Elgin Chicago Rawhide employees).

*Amount of Benefit*

For salaried employees from SKF's Chicago Rawhide division hired before April 1, 2007, the accrued benefit based on benefit service to retirement date (reduced if early retirement elected). Benefit commences at retirement date & ceases upon earliest of (1) death, (2) recovery from total/permanent disability, or (3) attainment of normal retirement eligibility (at which time the normal retirement benefit (based on benefit service to retirement date) commences).

For all other salaried employees, and for Hanover hourly employees, the greater of the accrued benefit based on benefit service to retirement date (without reduction) or a minimum annual amount (\$2,100 for all other salaried employees and \$1,800 for Hanover hourly employees). Benefit commences at the participant's retirement date and ceases upon the earliest of (1) recovery from total/permanent disability, (2) attainment of normal retirement eligibility (at which time the normal retirement benefit (based on benefit service to retirement date) commences), or (3) death.

For MRC hourly employees, an annual amount equal to \$2,700, reduced by any comparable benefits provided under the TRW pension plan. Benefit commences after 13th week of disability or, if later, after group sickness or accident insurance or similar governmental plan coverage ends. Benefit ceases upon the earliest of (1) recovery from total/permanent disability, (2) attainment of normal retirement eligibility (at which time the greater of \$2,700 or the normal retirement benefit (based on benefit service to retirement date and the benefit formula in effect six months after such date) commences), or (3) death.

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For Elgin and Warehouse hourly employees, the accrued benefit based on benefit service to retirement date (reduced for early retirement). For Seneca hourly employees, the accrued benefit based on benefit service to retirement date (without reduction). In either case, the benefit commences at the participant's retirement date and ceases upon the earliest of (1) recovery from total/permanent disability, (2) attainment of normal retirement eligibility (at which time the normal retirement benefit (based on benefit service to retirement date) commences), or (3) death.

**Death**

*Eligibility*

Generally, death after having completed five years of vesting service, and after having been married throughout the preceding one-year period. Elgin hourly and Seneca hourly employees do not have to have been married throughout the preceding one-year period. Elgin hourly employees also do not have to have completed five years of vesting service. And salaried employees (other than salaried employees from SKF's Chicago Rawhide division hired before April 1, 2007) who have completed 15 years of benefit service are eligible for a more generous pre-retirement death benefit.

*Amount of Benefit prior to earliest retirement date*

Amount that would have been paid to a surviving spouse had the deceased participant separated from service on the day of death, survived to earliest retirement age, retired with an immediate QJSA, and died the next day. (Chicago Rawhide salaried participants and MRC hourly participants can elect a later commencement date, but no later than the participant's normal retirement date.)

Salaried employees (other than salaried employees from SKF's Chicago Rawhide division hired before April 1, 2007) who satisfy the more restrictive eligibility requirements described above are also eligible to receive (1) the greater of \$1,200 or 50% of the deceased participant's accrued benefit (without reduction) before the surviving spouse attains age 60, and (2) the greater of \$600 or 50% of the deceased participant's accrued benefit (without reduction) reduced by 50% of the applicable Social Security widow/widower's benefit on or after the surviving spouse attains age 60. The \$1,200 and \$600 respective minimum amounts are prorated for former TRW pension plan participants to reflect the portion of vesting service which reflects service for SKF.

*Benefit on or after earliest retirement date*

Amount that would have been paid to a surviving spouse had the deceased participant retired with an immediate QJSA on the day before death. (Chicago Rawhide salaried participants and MRC hourly participants can elect a later commencement date, but no later than the participant's normal retirement date.)

Salaried employees (other than salaried employees from SKF's Chicago Rawhide division hired before April 1, 2007) who satisfy the more restrictive eligibility requirements described above are also eligible to receive (1) the greater of \$1,200 or 50% of the deceased participant's accrued benefit (without reduction) before the surviving spouse attains age 60, and (2) the greater of \$600 or 50% of the deceased participant's accrued benefit (without reduction) reduced by 50% of the applicable Social Security widow/widower's benefit on or after the surviving spouse attains age 60. The \$1,200 and \$600 respective minimum amounts are prorated for former TRW pension plan participants to reflect the portion of vesting service which reflects service for SKF.

**Supplemental "Medicare" Benefit**

*Eligibility*

MRC hourly participants hired after 1977 who (1) retire and (2) are eligible to receive postretirement medical benefits.

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*Amount of Benefit*

\$1,200 annual lifetime benefit commencing at attainment of age 62.

**Form of Benefits**

*Automatic form for unmarried participants*

Ten-year certain-and life annuity for Elgin hourly participants. Single life annuity for all other participants.

*Automatic form for married participants*

60% joint-and-survivor annuity for MRC hourly participants. 50% joint-and-survivor annuity for all other participants.

*Optional forms*

For salaried employees from SKF's Chicago Rawhide division hired before April 1, 2007, a 10-year C&C annuity option, a 66-2/3% joint-and-last-survivor annuity option and 75%/100% joint-and-surviving-spouse-annuity options.

For all other salaried employees, and for hourly employees from SKF's bearings division (excluding MRC hourly employees), a single life annuity option and 50%/75%/100% contingent-annuitant options. (Certain former TRW pension plan participants are also eligible to receive a 10-year C&C option, a 25% contingent-annuitant option and a lump-sum option.)

For MRC hourly employees, a 75% joint-and-surviving-spouse-annuity option.

For Elgin hourly employees, a single life annuity option, a 66-2/3% joint-and-last-survivor annuity option and 75%/100% joint-and-surviving-spouse-annuity options.

For Warehouse hourly employees, a single life annuity option, a 10-year C&C annuity option, and 75%/100% joint-and-surviving-spouse-annuity options.

For Seneca hourly employees, a single life annuity option and a 75% joint-and-surviving-spouse-annuity option.

*Optional forms*

Factors as set forth in Appendix B of the respective salaried and hourly portions of the plan document. Factors not included in these appendices are calculated based on mortality in accordance with the 2013 PPA Unisex Mortality Table and a 6% annual interest rate.

**Miscellaneous**

*Maximum compensation*

In accordance with IRC Section 401(a)(17) (currently \$255,000).

*Maximum benefits*

In accordance with IRC Section 415(b) (currently \$205,000).

*Administration*

The plan is administered by an administrative committee which is appointed by the Board of Directors. For MRC hourly employees certain administrative aspects of the plan may involve a joint union/SKF board of administration.

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*Benefit not included in valuation*

We have not included involuntary termination benefits or shutdown benefits in this valuation.

## ***Summary of Plan Provisions - Lincoln***

**Effective Date**

December 21, 2001. Last restatement as of January 1, 2008. Most recent amendment effective May 1, 2010.

**Plan Year**

January 1 through December 31.

**Covered Employees**

All UAW and IAM hourly employees at Lincoln Industrial. Effective June 3, 2006, no new UAW hourly employees are eligible for the Plan. Effective May 5, 2007, no new IAM employees are eligible for the Plan. Salaried employees who were participants in the Lincoln Industrial Corporation Pension Plan (LICPP) as of December 31, 2001 are covered under this plan.

**Participation**

All covered employees participate after reaching age 21 and completing one year of service. No new participants will enter the Plan (see Covered Employees).

**Vesting Service**

Full and fractional years of service, to the nearest month.

**Credited Service**

One-twelfth of a year for each month the employee performs at least one hour of service.

**Normal Retirement**

*Eligibility*

The later of age 65 and 5 years of participation.

*Benefit*

For Salaried participants:

The normal retirement benefit is 1.0% of Final Average Earnings up to Covered Compensation, plus 1.5% of Final Average Earnings in excess of Covered Compensation, such sum multiplied by years of Credited Service up to 35 years. All benefits are frozen as of December 21, 2001.

For UAW participants:

The normal retirement benefit is equal to the sum of (a), (b) and (c).

- (a) Total credited service accrued prior to June 1, 1996, times \$25.
- (b) Total credited service accrued from June 1, 1996, through May 31, 2009, times \$30.
- (c) Total credited service accrued beginning on June 1, 2009, through the benefit commencement date, times \$32 (previously \$30).

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For IAM participants:

The normal retirement benefit is equal to the sum of (a), (b), (c), (d) and (e).

- (a) Total credited service accrued prior to May 1, 1985, times \$17 (previously \$16.50).
- (b) Total credited service accrued from May 1, 1985, through April 30, 1995, times \$27 (previously \$25).
- (c) Total credited service accrued from May 1, 1995, through April 30, 2004, times \$37 (previously \$35).
- (d) Total credited service accrued from May 1, 2004, through April 30, 2007, times \$37.
- (e) Total credited service accrued beginning on May 1, 2007, through the benefit commencement date times \$40.

**Early Retirement**

*Eligibility*

Salaried

Age 55 with 10 years of vesting service.

UAW

Age 60 with 10 years of vesting service.

IAM

Age 55 with 10 years of vesting service.

*Benefit*

Salaried

The early retirement benefit is the frozen accrued benefit reduced by 2% per year for each of the first 3 years, 4.8% per year for each of the next 3 years, and 6% per year for each of the next 4 years by which the commencement of benefits precedes the Normal Retirement Date. The same reduction is used for terminated vested Salaried participants.

IAM and UAW

The amount equal to the normal retirement benefit based on service at termination, reduced by 7.2% per year commencement precedes age 62. A temporary supplement of \$250 is payable until age 62 for UAW participants who are early retirement eligible and commence immediately after termination.

For eligible IAM and UAW terminated vested participants, the accrued benefit is reduced by 7.2% per year for each year prior to Normal Retirement Date.

**Vesting**

*Salaried*

A Member's accrued benefit payable at age 65 is 30% vested after 3 years of service, 40% after 4 years of service, 60% after 5 years of service, 80% after 6 years of service, and 100% vested after 7 years of service.

*IAM and UAW*



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A participant whose employment is terminated before death or retirement and who has five or more years of Vesting Service is eligible for a vested deferred retirement benefit.

**Pre-Retirement Death Benefit**

*Salaried*

The death benefit is based on the beneficiary's benefit of 50% Joint and Survivor form.

*For Active IAM and UAW*

Participants who are eligible for early retirement on the date of death, surviving spouses are entitled to a monthly benefit equal to the amount that the spouse would have received had the participant retired and elected to commence his benefit on the first of the month following his death in the form of a 66-2/3% joint and survivor option.

The spouse of a participant who dies after becoming vested, and is not immediately eligible for early retirement, is entitled to an amount equal to 50% of the benefit the participant would have received had he retired under a 50% joint and survivor annuity on the first of the month following his death, or at his earliest commencement age, if later.

**Disability**

*Eligibility*

For IAM and UAW participants, eligibility after 10 years of vesting service and 6 months following the later of date of disability or last day worked.

*Benefit*

Amount equal to the normal retirement benefit accrued to the date of disability, commencing immediately, without reduction for early commencement.

**Normal Form of Payment**

Unless otherwise elected, any benefit payable under the Plan will be paid:

- (a) As a life-only annuity for a single participant; or

As a 66-2/3% joint and survivor annuity, if the employee had been married to his current spouse for at least one year.

**Summary of Changes from the January 1, 2012 Valuation**

- The MRC monthly benefit multiplier was changed from \$30 to \$34 and the monthly temporary supplemental benefit payable from the TRW pension plan was increased from \$2,350 to \$2,400. Both changes were effective November 1, 2012.
- The IRS Section 401(a)(17) compensation and IRC Section 415(b) benefit limits were updated from 2012 to 2013.



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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

***Prescribed Funding Assumptions and Methods***

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**Funding interest rates**

|               |                                         |       |
|---------------|-----------------------------------------|-------|
| Current Year: | Segment Rates with four month lookback: |       |
|               | First Segment Rate                      | 1.75% |
|               | Second Segment Rate                     | 4.62% |
|               | Third Segment Rate                      | 5.72% |

In accordance with MAP-21, the first, second and third Segment Rates are constrained to an 85%-115% Corridor around the average Segment Rates for the 25-year period ending September 30, 2012, or **4.94%, 6.15% and 6.76%**, respectively for minimum funding and benefit restrictions but not maximum tax-deductible purposes.

|                         |       |
|-------------------------|-------|
| Effective Interest Rate | 6.30% |
| (Based on MAP-21 rates) |       |

|             |                                         |       |
|-------------|-----------------------------------------|-------|
| Prior Year: | Segment Rates with four month lookback: |       |
|             | First Segment Rate                      | 2.06% |
|             | Second Segment Rate                     | 5.25% |
|             | Third Segment Rate                      | 6.32% |

In accordance with MAP-21, the first, second and third Segment Rates are constrained to a 90%-110% Corridor around the average Segment Rates for the 25-year period ending September 30, 2011, or **5.54%, 6.85% and 7.52%**, respectively for minimum funding and benefit restrictions but not for maximum tax-deductible purposes.

|                         |       |
|-------------------------|-------|
| Effective Interest Rate | 6.99% |
| (Based on MAP-21 rates) |       |

**Mortality**

Mortality tables mandated by PPA as specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.

**Actuarial cost method**

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan related expenses to be paid from plan assets during the year.

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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

***Non-Prescribed Funding Assumptions and Methods***

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**Salary increases**

**- SKF**

Current Year:

| Age   | Increase |
|-------|----------|
| 20-24 | 4.50%    |
| 25-29 | 4.25     |
| 30-34 | 4.25     |
| 35-39 | 4.00     |
| 40-44 | 3.75     |
| 45-49 | 3.50     |
| 50-54 | 3.50     |
| 55-59 | 3.25     |
| 60+   | 3.00     |

Prior Year:

5.00%

**- Lincoln Omnibus**

N/A

**Frequency of optional payment forms**

It is assumed that all Benefits are assumed to be paid as a single life annuity.

**Marital percentage**

**- SKF**

80% of male participants and 50% of female participants are assumed to be married with husbands assumed to be 3 years older than their wives.

**- Lincoln Omnibus**

85% of active participants are assumed to be married with husbands assumed to be 3 years older than their wives.

**Expenses**

Expected plan related expenses of \$3,000,000 were added to the Target Normal Cost.

**Pension Plan for Employees of SKF USA, Inc.**  
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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

**Retirement rates**

- SKF

| Age   | Salaried              |                        | Hourly                |                        |
|-------|-----------------------|------------------------|-----------------------|------------------------|
|       | Retirement<br>in 2013 | Retirement<br>in 2014+ | Retirement<br>in 2013 | Retirement<br>in 2014+ |
| <55   | 0.00%                 | 0.00%                  | 0.00%                 | 0.00%                  |
| 55-58 | 1.00%                 | 5.00%                  | 1.00%                 | 5.00%                  |
| 59    | 2.00%                 | 5.00%                  | 2.00%                 | 5.00%                  |
| 60    | 3.00%                 | 10.00%                 | 3.00%                 | 10.00%                 |
| 61    | 5.00%                 | 10.00%                 | 5.00%                 | 12.50%                 |
| 62    | 15.00%                | 25.00%                 | 15.00%                | 35.00%                 |
| 63    | 10.00%                | 30.00%                 | 10.00%                | 30.00%                 |
| 64    | 10.00%                | 25.00%                 | 10.00%                | 25.00%                 |
| 65    | 100.00%               | 100.00%                | 100.00%               | 100.00%                |

**– Lincoln Omnibus**

100% of active IAM and UAW participants are assumed to retire at age 62 or completion of 10 years of service, if later. 100% of active salaried participants are assumed to retire at age 65.

**Assumed commencement age for deferred vested participants**

The later of current age and age 65.

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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

**Withdrawal rates for active participants not eligible for retirement**

**– SKF**

| Service   | Select rates |        |
|-----------|--------------|--------|
|           | Salaried     | Hourly |
| <1        | 18.0%        | 22.0%  |
| 1-2 years | 16.5%        | 20.0%  |
| 2-3 years | 15.0%        | 18.0%  |
| 3-4 years | 11.0%        | 13.0%  |
| 4-5 years | 7.0%         | 8.0%   |

| Age | Ultimate rates<br>(5+ years of service) |        |
|-----|-----------------------------------------|--------|
|     | Salaried                                | Hourly |
| 25  | 16.0%                                   | 22.0%  |
| 30  | 12.0%                                   | 13.0%  |
| 35  | 8.0%                                    | 10.0%  |
| 40  | 7.0%                                    | 9.0%   |
| 45  | 7.0%                                    | 7.0%   |
| 50  | 6.0%                                    | 6.0%   |
| 55+ | 0.0%                                    | 0.0%   |

**– Lincoln Omnibus**

| Age | Males | Females |
|-----|-------|---------|
| 25  | 9.93% | 14.97%  |
| 30  | 6.91  | 9.96    |
| 35  | 4.87  | 6.95    |
| 40  | 2.81  | 4.94    |
| 45  | 1.67  | 2.91    |
| 50  | 0.40  | 1.83    |
| 55  | 0.00  | 0.70    |
| 60  | 0.00  | 0.00    |
| 65  | 0.00  | 0.00    |

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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

**Disability rates**

**- SKF**

| Age | Salaried |        | Hourly |        |
|-----|----------|--------|--------|--------|
|     | Male     | Female | Male   | Female |
| 25  | 0.03%    | 0.07%  | 0.03%  | 0.07%  |
| 30  | 0.03%    | 0.07%  | 0.03%  | 0.07%  |
| 35  | 0.03%    | 0.07%  | 0.03%  | 0.07%  |
| 40  | 0.09%    | 0.18%  | 0.09%  | 0.18%  |
| 45  | 0.24%    | 0.49%  | 0.24%  | 0.49%  |
| 50  | 0.47%    | 0.93%  | 0.47%  | 0.93%  |
| 55  | 0.81%    | 1.63%  | 0.81%  | 1.63%  |
| 56  | 0.90%    | 1.81%  | 0.90%  | 1.81%  |
| 57  | 0.99%    | 1.99%  | 0.99%  | 1.99%  |
| 58  | 1.08%    | 2.17%  | 1.08%  | 2.17%  |
| 59  | 1.17%    | 2.34%  | 1.17%  | 2.34%  |
| 60  | 1.26%    | 2.51%  | 1.26%  | 2.51%  |
| 61  | 1.34%    | 2.69%  | 1.34%  | 2.69%  |
| 62  | 1.43%    | 2.86%  | 1.43%  | 2.86%  |
| 63  | 1.52%    | 3.03%  | 1.52%  | 3.03%  |
| 64  | 1.60%    | 3.21%  | 1.60%  | 3.21%  |
| 65+ | 0.00%    | 0.00%  | 0.00%  | 0.00%  |

**- Lincoln**

| Age | Males | Females |
|-----|-------|---------|
| 25  | 0.10% | 0.20%   |
| 30  | 0.11  | 0.22    |
| 35  | 0.11  | 0.22    |
| 40  | 0.17  | 0.33    |
| 45  | 0.17  | 0.33    |
| 50  | 0.34  | 0.68    |
| 55  | 0.34  | 0.68    |
| 60  | 1.08  | 2.16    |
| 65  | 1.08  | 2.16    |

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**Schedule SB, Part V – Statement of Actuarial Assumptions/Methods**

**Asset valuation method**

**- SKF**

The Actuarial Value of Assets is Market Value as of the valuation date, including discounted receivable contributions, reduced by 2/3 and 1/3 of the of the gain/(loss) in the prior two quarters, respectively. The gain/(loss) for each period is determined as the actual return on Market Value during the period less the expected return on Market Value based on an assumed earnings rate chosen by the plan administrator but required by PPA to be not greater than the applicable third segment rate. The resulting value is constrained to be within a corridor of 90% to 110% of Market Value, including discounted receivable contributions.

The expected return on plan assets is 7.50% per annum for 2012 limited by PPA to the Third Segment Rate of 7.52%.

**- Lincoln**

The Actuarial Value of Assets is Market Value as of the valuation date, including discounted receivable contributions, reduced by 2/3 and 1/3 of the of the gain/(loss) in the prior two years, respectively. The gain/(loss) for each period is determined as the actual return on Market Value during the period less the expected return on Market Value based on an assumed earnings rate chosen by the plan administrator but required by PPA to be not greater than the applicable third segment rate. The resulting value is constrained to be within a corridor of 90% to 110% of Market Value, including discounted receivable contributions.

The expected return on plan assets is 7.50% per annum, limited by PPA to the applicable Third Segment Rate as follows:

|                          |       |
|--------------------------|-------|
| 2012 measurement period: | 7.52% |
| 2011 measurement period: | 6.57% |

**Pension Plan for Employees of SKF USA, Inc.**  
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**Schedule SB, line 24 – Change in Actuarial Assumptions**

The assumed rate of salary increase was changed from 5.00% per annum for all SKF participants to a graded salary scale that varies by age.

The expense load added to the Target Normal Cost was changed from \$1,500,000<sup>1</sup> to \$3,000,000.

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<sup>1</sup> SKF expense load only. The 2012 expense load for Lincoln was \$200,000.