

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089
		2015
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☒ a single-employer plan; ☐ a DFE (specify) ____ B This return/report is: ☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months). C If the plan is a collectively-bargained plan, check here. ☐ D Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan <u>04/04/1990</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>FIBERWEB, INC.</u> <u>70 OLD HICKORY BLVD.</u> <u>OLD HICKORY, TN 37138</u>	2b Employer Identification Number (EIN) <u>57-0833773</u> 2c Plan Sponsor's telephone number <u>615-847-7222</u> 2d Business code (see instructions) <u>339900</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/14/2016</u>	<u>DAVID BERKMAN</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN	
		4c PN	
5 Total number of participants at the beginning of the plan year		5	1113
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	2
a(2) Total number of active participants at the end of the plan year		6a(2)	2
b Retired or separated participants receiving benefits.....		6b	539
c Other retired or separated participants entitled to future benefits.....		6c	489
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	1030
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....		6e	69
f Total. Add lines 6d and 6e		6f	1099
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A 3H 1I			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

Part III	Form M-1 Compliance Information (to be completed by welfare benefit plans)
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11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

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

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

11c Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>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).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015	
Round off amounts to nearest dollar.	
Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF FIBERWEB, INC.	D Employer Identification Number (EIN) 57-0833773
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2015			
2	Assets:			
	a Market value	2a	70101314	
	b Actuarial value	2b	68614205	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
	a For retired participants and beneficiaries receiving payment	587	35506971	35506971
	b For terminated vested participants	524	20167036	20167036
	c For active participants	2	181169	181169
	d Total	1113	55855176	55855176
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
	a Funding target disregarding prescribed at-risk assumptions	4a		
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	6.24%	
6	Target normal cost	6	224055	

Statement by Enrolled Actuary

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

SIGN HERE		07/26/2016
	Signature of actuary	Date
ADRIENNE C. WILLIAMS	Type or print name of actuary	14-07122
		Most recent enrollment number
AON HEWITT	Firm name	615-591-3342
		Telephone number (including area code)
501 CORPORATE CENTER DRIVE SUITE 300 FRANKLIN, TN 37067	Address of the firm	

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	17191751
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	2767091
9 Amount remaining (line 7 minus line 8)	0	14424660
10 Interest on line 9 using prior year's actual return of <u>12.29</u> %	0	1772791
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.45</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
c Total available at beginning of current plan year to add to prefunding balance.....		0
d Portion of (c) to be added to prefunding balance		
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	16197451

Part III Funding Percentages		
14 Funding target attainment percentage.....	14	93.84 %
15 Adjusted funding target attainment percentage	15	122.84 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	91.98 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ►			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?..... ☒ Yes ☐ No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
(4) 4th		
0		

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

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 0
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	224055	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	3438422	1405689	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	1629744	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	1629744	1629744
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

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

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

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
A Name of plan AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 FIBERWEB, INC.	D Employer Identification Number (EIN) 57-0833773	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

RYAN LABS INC.

13-3451974

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	RETAINED BY CLIENT	108320	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAPFINANCIAL PARTNERS LLC

PO BOX 600071
RALEIGH, NC 27675

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 50 49	RETAINED BY CLIENT	77000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HEWITT ASSOCIATES

36-2235791

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	RETAINED BY EMPLOYER	49582	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

NEW YORK LIFE INVESTMENT MANAGEMENT

52-2206685

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 62 64 18	RETAINED BY CLIENT	38124	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

JOHN HANCOCK RETIREMENT PLAN SERVIC

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 64	RETAINED BY CLIENT	32817	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

LATTIMORE BLACK MORGAN & CAIN, P.C.

62-1199757

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	RETAINED BY EMPLOYER	15250	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

TOWERS WATSON

901 NORTH GLEBE ROAD
ARLINGTON, VA 22203

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	RETAINED BY CLIENT	13412	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18	RETAINED BY EMPLOYER	11466	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
A Name of plan AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 FIBERWEB, INC.	D Employer Identification Number (EIN) 57-0833773	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	281823	287644
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	444130	335872
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	1610693
(2) U.S. Government securities.....	1c(2)	13221395	10910912
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	26414717	0
(B) All other.....	1c(3)(B)	15495435	33829252
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	12924999	17686472
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	1318813	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	70101312	64660845

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	70101312	64660845
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	112	
(B) U.S. Government securities	2b(1)(B)	215228	
(C) Corporate debt instruments	2b(1)(C)	1403307	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	24828	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1643475
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	272524	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		272524
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	8248339	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	8176005	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		72334
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-3356527
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-1368194

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3719898	
(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)		3719898
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)	64832	
(2) Contract administrator fees	2i(2)	99723	
(3) Investment advisory and management fees	2i(3)	110820	
(4) Other	2i(4)	77000	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		352375
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4072273

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-5440467
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: **LBMCC, PC**

(2) EIN: **62-1199757**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	N/A	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒		
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	N/A	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.				
o Did the plan trust incur unrelated business taxable income?				
p Were in-service distributions made during the plan year?				

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

6a Name of trust	6b Trust's EIN
6c Name of trustee or custodian	6d Trustee's or custodian's telephone number

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan <u>AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FIBERWEB, INC.</u>	D Employer Identification Number (EIN) <u>57-0833773</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>13-3808042</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>9</u>

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☒ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☒ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2015
v. 150123

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents) _____

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

14	Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:		
	a The current year	14a	
	b The plan year immediately preceding the current plan year	14b	
	c The second preceding plan year	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
	a The corresponding number for the plan year immediately preceding the current plan year	15a	
	b The corresponding number for the second preceding plan year	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
	a Enter the number of employers who withdrew during the preceding plan year	16a	
	b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐		

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

18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐
19	If the total number of participants is 1,000 or more, complete lines (a) through (c)
	a Enter the percentage of plan assets held as: Stock: <u>20.0</u> % Investment-Grade Debt: <u>80.0</u> % High-Yield Debt: _____% Real Estate: _____% Other: _____%
	b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☒ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more
	c What duration measure was used to calculate line 19(b)? ☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

Part VII	IRS Compliance Questions
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20a Is the plan a 401(k) plan?	☐ Yes	☐ No
20b If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	☐ Design-based safe harbor method	☐ ADP/ACP test
20c If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii))?	☐ Yes	☐ No
21a Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	☐ Ratio percentage test	☐ Average benefit test
21b Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	☐ Yes	☐ No
22a Has the plan been timely amended for all required tax law changes?	☐ Yes	☐ No ☐ N/A
22b Date the last plan amendment/restatement for the required tax law changes was adopted ____/____/____. Enter the applicable code _____. (See instructions for tax law changes and codes).		
22c If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter ____/____/____ and the letter's serial number _____.		
22d If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter ____/____/____.		
23 Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	☐ Yes	☐ No

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Financial Statements and Supplemental Schedules

December 31, 2015 and 2014

(With Independent Auditors' Report Thereon)



AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

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Independent Auditors' Report

The Plan Administrator
Amended and Restated Fiberweb Retirement Plan:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Amended and Restated Fiberweb Retirement Plan, which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of January 1, 2015, the related statement of changes in accumulated plan benefits for the year ended January 1, 2015, 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 3, which was certified by John Hancock Trust Company LLC ("John Hancock"), custodian, and Matrix Trust Company ("Matrix"), the trustee of the Plan, and New York Life Trust Company ("NYL"), the custodian 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 John Hancock and Matrix held the Plan's investment assets and executed investment transactions as of and for the year ended December 31, 2015, and that NYL held the Plan's investment assets and executed investment transactions as of and for the year ended December 31, 2014. The plan administrator has obtained certifications from the trustee and custodians as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustee and custodians 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 of assets (held at end of year) as of December 31, 2015 and the schedule of reportable transactions for the year then ended are required by the DOL's Rules and Regulation for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are 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 these supplemental schedules.

Report on Form and Content in Compliance with DOL's Rules and Regulations

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

LBMC, PC

Brentwood, Tennessee

October 14, 2016

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Statements of Net Assets Available for Benefits

December 31, 2015 and 2014

	<u>2015</u>	<u>2014</u>
Assets:		
Non-interest bearing cash	\$ 287,644	\$ 281,823
Investments, at fair value	64,037,328	69,375,359
Accrued investment income	<u>335,872</u>	<u>444,130</u>
Net assets available for benefits	\$ <u>64,660,844</u>	\$ <u>70,101,312</u>

See accompanying notes to the financial statements.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Statements of Changes in Net Assets Available for Benefits

Years ended December 31, 2015 and 2014

	<u>2015</u>	<u>2014</u>
Additions (reductions) to net assets attributed to:		
Net appreciation (depreciation) in fair value of investments	\$ (3,284,194)	\$ 5,669,491
Interest and dividend income	<u>1,915,999</u>	<u>2,394,022</u>
Net change resulting from investment activity	<u>(1,368,195)</u>	<u>8,063,513</u>
Deductions from net assets attributed to:		
Benefits paid	3,719,898	3,635,096
Administrative expenses	<u>352,375</u>	<u>402,084</u>
Total deductions	<u>4,072,273</u>	<u>4,037,180</u>
Net increase (decrease)	(5,440,468)	4,026,333
Net assets available for benefits at beginning of year	<u>70,101,312</u>	<u>66,074,979</u>
Net assets available for benefits at end of year	\$ <u>64,660,844</u>	\$ <u>70,101,312</u>

See accompanying notes to the financial statements.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Statement of Accumulated Plan Benefits

January 1, 2015

Actuarial present value of accumulated plan benefits:

Vested benefits:

Participants currently receiving payments

\$ 41,764,665

Other participants

26,640,177

Total actuarial present value of accumulated plan benefits

\$ 68,404,842

See accompanying notes to the financial statements.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Statement of Changes in Accumulated Plan Benefits

Year ended January 1, 2015

Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 61,389,373</u>
Increase (decrease) during the year attributable to:	
Change in actuarial assumptions	7,405,507
Interest accumulation	3,516,274
Benefits Paid	(3,635,096)
Other Changes	<u>(271,216)</u>
Net increase	<u>7,015,469</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 68,404,842</u>

See accompanying notes to the financial statements.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(1) Description of plan

The following description of the Amended and Restated Fiberweb Retirement Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

As of November 17, 2006, the plan document was amended and restated in its entirety to define the "Employer" of the Plan to mean Fiberweb Simpsonville, Inc. Effective July 31, 2009, the plan document was amended to include Fiberweb Newco 2, Inc. ("FiestaFiberweb") as a participating employer. For the plan year ended December 31, 2009 and thereafter, Fiberweb Simpsonville, Inc. and FiestaFiberweb are defined as the "Employers" of the Plan.

Effective April 2, 2004, the Plan's management approved an amendment to freeze plan operations. This amendment resulted in a cessation of benefit accruals under the Plan, and no additional participants are allowed to enter or re-enter the Plan as of the effective date.

Effective January 1, 2012, the Plan was amended to make Fiberweb, Inc. the Plan Sponsor and Employer of the Plan. On October 1, 2015, Berry Plastics Group, Inc. ("Berry") acquired Fiberweb, Inc.

(a) General

The Plan is a non-contributory defined benefit plan that provides pension, disability and death benefits to eligible salaried or similarly compensated employees of the Employers, hourly employees of the Simpsonville plant and any other employees covered by an agreement that provides participation in the Plan.

All contributions to the Plan are made by the Plan Sponsor based upon recommendations of a consulting actuary in an amount necessary to meet the minimum funding requirements of ERISA. Contributions by the Plan Sponsor are irrevocable and may be used only for the benefit of the participants and their beneficiaries. According to the Plan's consulting actuary, the minimum funding requirements under ERISA have been met as of December 31, 2015 and 2014.

(b) Vesting

A participant becomes 100% vested in his or her accrued retirement benefit after five years of service. Effective April 2, 2004, each participant who was not fully vested under the Plan became fully vested in his or her accrued plan benefit.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(c) Payment of benefits

The Plan generally provides for normal retirement at age 65; however, at the request of the Employer, a participant may remain in the employment of the Employer after his or her normal retirement date, thereby deferring his or her retirement benefits. The plan also provides for early retirement at age 55 if a participant has completed at least ten years of service.

The Plan provides for payments of retirement, disability and death benefits to participants or beneficiaries under various payment options. The determination of benefit payments depends primarily on average earnings and years of service by an employee, as outlined in the plan document.

(d) Administrative expenses

Certain expenses of maintaining the Plan are paid directly by the Plan Sponsor and are excluded from these financial statements. Certain fees incurred by the Plan are netted within net appreciation (depreciation) in fair value of investments, as they are paid through revenue sharing, rather than a direct payment from the Plan.

(e) Plan termination

Although it has not expressed any intent to do so, the Plan Sponsor has the right under the plan agreement to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, assets of the Plan would be allocated to participants in order of preference as specified by Section 4044 of ERISA.

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

Any residual assets shall be distributed to the Plan Sponsor if all liabilities under the Plan to participants, their spouses and other beneficiaries have been satisfied.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(2) Summary of significant accounting policies

(a) Basis of accounting

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

(b) Recently adopted accounting standards

In July 2015, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2015-12, *"Plan Accounting: Defined Benefit Pension Plan (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient."* ASU No. 2015-12 simplifies accounting for employee benefit plans as follows:

Part I is not applicable to the Plan.

Part II

- the requirement to disclose investments that represent 5 percent or more of net assets available for benefits has been eliminated,
- the net appreciation or depreciation in investments for the period should be presented in the aggregate, but are no longer required to be disaggregated and disclosed by general type,
- the disclosure of information about fair value measurements shall be provided by general type of Plan Asset,

Part III is not applicable to the Plan.

The Plan Sponsor elected to early-adopt ASU 2015-12 as of December 31, 2015, and has applied the provisions retrospectively. The Plan Sponsor has eliminated its historical disclosure of individual investments which comprise 5% or more of total net assets available for benefits, as well as the net appreciation or depreciation of fair values by type. There was no other impact on the statements of net assets available for benefits as of December 31, 2015 and 2014, or the statements of changes in net assets available for benefits for the years then ended.

(c) Non-interest bearing cash

The Plan's trustee places temporary cash with high credit quality financial institutions. At times such investments may be in excess of the Federal Deposit Insurance Corporation ("FDIC") insurance limit.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(d) Investment valuation and income recognition

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

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned on the accrual basis. Dividend income is recorded on the ex-dividend date. Net appreciation (depreciation) includes Plan's gains and losses on investments bought and sold as well as held during the year.

(e) Payment of benefits

Benefits are recorded when paid.

(f) Accumulated plan benefits

Accumulated plan benefits are future periodic payments that are attributable to service participants have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated participants or their beneficiaries, (b) beneficiaries of participants who are deceased, and (c) present participants or their beneficiaries. The Plan's benefits are based on the average compensation for the highest consecutive 60 months of compensation after December 31, 1988 and prior to April 2, 2004 and years of service, as defined in the plan document. Benefits payable under all circumstances (retirement, death, disability and termination of employment) are included, to the extent they are deemed attributable to participant service rendered, as of the valuation date.

The actuarial present value of accumulated plan benefits is determined by a consulting actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Actuarially estimated Plan costs are computed using the Projected Unit Credit Cost Method.

The significant actuarial assumptions used in the valuation as of January 1, 2015 were (a) life expectancy of participants (RP-2014 Aggregate Mortality Table Fully Generational Under Scale MP-2014), (b) retirement age assumption is age 65, adjusted for early retirement, and (c) a discount rate of 4.9%. Except for a reduction in the discount rate from 5.9% to 4.9%, there were no significant changes in actuarial assumptions in the January 1, 2015 valuation.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

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

(g) Use of estimates

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

(h) Events occurring after reporting date

The Plan's management has evaluated events and transactions that occurred between December 31, 2015 and October 14, 2016, which is the date that the financial statements were available to be issued, for possible recognition or disclosure in the financial statements.

(3) Summary of information certified by trustees and custodian

The following information was certified as complete and accurate by John Hancock Trust Company LLC, the custodian, and Matrix Trust Company, the trustee, as of and for the year ended December 31, 2015 and New York Life Trust Company, the custodian, as of and for the year ended December 31, 2014.

	<u>2015</u>	<u>2014</u>
Non-interest bearing cash	\$ <u>287,644</u>	\$ <u>281,823</u>
Investments, at fair value	\$ <u>64,037,328</u>	\$ <u>69,375,359</u>
Accrued investment income	\$ <u>335,872</u>	\$ <u>444,130</u>
Net change resulting from investment activity	\$ <u>(1,368,195)</u>	\$ <u>8,063,513</u>

During 2015, John Hancock Trust Company LLC replaced New York Life Trust Company and assumed its responsibilities.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(4) Fair value measurements

FASB Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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, 2015 and 2014.

- (i) **Bonds:** Valued at the closing price reported on the active and inactive markets on which the individual securities are traded.
- (ii) **Mutual funds, money market funds, and exchange traded funds:** Valued at the net asset value of shares held by the Plan at year end.

The methods described above 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's management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2015 and 2014:

Fair Value Measurements as of December 31, 2015 using the following inputs

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Interest-bearing cash	\$ 194,851	\$ -	\$ -	\$ 194,851
Mutual funds	4,636,821	-	-	4,636,821
Money market funds	1,415,841	-	-	1,415,841
Exchange traded funds	13,049,651	-	-	13,049,651
Bonds	<u>38,756,610</u>	<u>5,983,554</u>	<u>-</u>	<u>44,740,164</u>
Investments, at fair value	<u>\$ 58,053,774</u>	<u>\$ 5,983,554</u>	<u>\$ -</u>	<u>\$ 64,037,328</u>

Fair Value Measurements as of December 31, 2014 using the following inputs

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 12,913,486	\$ -	\$ -	\$ 12,913,486
Money market funds	11,513	-	-	11,513
Bonds	<u>51,040,756</u>	<u>5,409,604</u>	<u>-</u>	<u>56,450,360</u>
Investments, at fair value	<u>\$ 63,965,755</u>	<u>\$ 5,409,604</u>	<u>\$ -</u>	<u>\$ 69,375,359</u>

(5) Income tax status

The Plan obtained a favorable determination letter from the Internal Revenue Service ("IRS") on June 18, 2014, stating that the Plan and related trust are in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan is required to operate in conformity with the IRC to maintain its qualification. The plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability or asset 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, 2015 and 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset 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.

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

Notes to the Financial Statements

December 31, 2015 and 2014

(6) Related party transactions

As of December 31, 2015, the Plan holds shares of a money market fund managed by an affiliate of Matrix, which qualify as party-in-interest transactions. Additionally, administrative expenses amounting to \$69,097 and \$183,548 were paid to the trustee and custodians in 2015 and 2014, respectively. During the years ended December 31, 2015 and 2014, the Employers provided the Plan with certain accounting and administrative services for which no fees were charged.

(7) Risks and uncertainties

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

The actuarial present value of benefit obligations is reported based on certain assumptions pertaining to interest 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 could be material to the financial statements.

(8) Subsequent events

In 2016, the Plan transferred all assets held to a new trustee, Fifth Third Bank. In addition, the Plan elected to include Berry stock within the investment policy, not to exceed 10% of total plan net assets available for benefits. During 2016 the Plan was also amended to change the Plan year-end date to September 30, subject to IRS approval.

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2015

Attained Age	Number of Participants and Average Compensation									
	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34										
35-39										
40-44										
45-49										
50-54										
55-59					1					
60-64					1					
65-69										
70+										

N-2

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

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

For ERISA Requirements

Interest Rates for Minimum Funding Purposes	Based on segment rates with no lookback (as of January 2015), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA
1st Segment Rate	4.72%
2nd Segment Rate	6.11%
3rd Segment Rate	6.81%
Interest Rates for Maximum Tax Purposes	Based on segment rates with no lookback (as of January 2015), without regard to interest rate stabilization
1st Segment Rate	1.22%
2nd Segment Rate	4.11%
3rd Segment Rate	5.20%
Retirement Age	
Active Participants	See Table 1
Terminated Vested Participants	Age 65
Mortality Rates	
Healthy and Disabled	Generational Mortality Table for annuitants and non-annuitants per §1.430(h)(3)-1(e)
Withdrawal Rates	See Table 2
Disability Rates	None
Decrement Timing	Beginning of year decrements, with 100% retirement occurring at beginning of year
Surviving Spouse Benefit	It is assumed that 90% of males and 90% of females have an eligible spouse, and that males are three years older than their spouses.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of \$210,000

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Expected Return on Assets

2013 Plan Year

6.00%

2014 Plan Year

5.90%

Trust Expenses Included in Target Normal Cost

Equal to prior years expenses (\$224,055 for 2015 assumptions)

Actuarial Method

Standard unit credit cost method

Valuation Date

January 1, 2015

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Actuarial Assumptions and Methods

Table 1

Retirement Rates

<u>Age</u>	<u>Rate</u>
55	5.00%
56	5.00%
57	5.00%
58	5.00%
59	5.00%
60	10.00%
61	10.00%
62	30.00%
63	20.00%
64	20.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Table 2

Withdrawal Rates

Age	Rate	Age	Rate
19	0.0000%	49	14.2014%
20	29.8152%	50	12.6744%
21	29.6694%	51	11.0472%
22	29.5194%	52	9.3684%
23	29.3634%	53	7.6986%
24	29.1996%	54	6.1044%
25	29.0226%	55	4.6464%
26	28.8342%	56	3.3744%
27	28.6314%	57	2.3154%
28	28.4112%	58	1.4820%
29	28.1718%	59	0.8640%
30	27.9096%	60	0.4398%
31	27.6198%	61	0.1782%
32	27.3000%	62	0.0456%
33	26.9460%	63+	0.0000%
34	26.5536%		
35	26.1186%		
36	25.6398%		
37	25.1154%		
38	24.5448%		
39	23.9268%		
40	23.2632%		
41	22.5456%		
42	21.7668%		
43	20.9280%		
44	20.0274%		
45	19.0620%		
46	18.0162%		
47	16.8684%		
48	15.6000%		

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

EIN 57-0833773, PLAN No. 001

Schedule H, Line 4j - Schedule of Reportable Transactions

Year ended December 31, 2015

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of loan)	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
<u>Single Transactions Reportable</u>								
Vanguard	Vanguard 500 Index Fd Admiral	-	3,558,858	-	-	3,401,330	3,558,858	157,528
State Street Bank & Trust	SPDR S&P 500 ETF Trust	4,912,982	-	-	-	4,912,982	4,912,982	-
State Street Bank & Trust	SPDR S&P 500 ETF Trust	4,747,005	-	-	-	4,747,005	4,747,005	-
* Wilmington Funds	U.S. Government Money Market Fund	4,978,552	-	-	-	4,978,552	4,978,552	-
* Wilmington Funds	U.S. Government Money Market Fund	-	11,004,993	-	-	11,004,993	11,004,993	-
<u>Aggregate Transactions in One Issue of Securities</u>								
Vanguard	Vanguard 500 Index Fd Admiral	-	3,649,033 (29 sales)	-	-	3,488,359	3,649,033	160,674
State Street Bank & Trust	SPDR S&P 500 ETF Trust	9,696,325 (3 purchases)	-	-	-	9,696,325	9,696,325	-
* Wilmington Funds	U.S. Government Money Market Fund	18,678,440 (72 purchases)	-	-	-	18,678,440	18,678,440	-
* Wilmington Funds	U.S. Government Money Market Fund	-	18,421,863 (17 sales)	-	-	18,421,863	18,421,863	-
Dreyfus	Treasury Securities CM	3,612,190 (63 purchases)	-	-	-	3,612,190	3,612,190	-
Dreyfus	Treasury Securities CM	-	3,623,703 (35 sales)	-	-	3,623,703	3,623,703	-

* Represents a party-in-interest.

The above data is based upon information which has been certified as complete and accurate by John Hancock Trust Company LLC, custodian, and Matrix Trust Company, trustee.

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation**Single-Employer Defined Benefit Plan
Actuarial Information**

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

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

OMB No. 1210-0110

2015**This Form is Open to Public
Inspection**For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF FIBERWEB, INC.		D Employer Identification Number (EIN) 57-0833773
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value		2a	70,101,314
b Actuarial value		2b	68,614,205
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	587	35,506,971	35,506,971
b For terminated vested participants	524	20,167,036	20,167,036
c For active participants	2	181,169	181,169
d Total	1,113	55,855,176	55,855,176
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions		4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor		4b	
5 Effective interest rate	5	6.24%	
6 Target normal cost	6	224,055	

Statement by Enrolled Actuary

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

SIGN HERE	<i>Adrienne C. Williams</i>	07/26/2016
Signature of actuary		Date
ADRIENNE C. WILLIAMS		1407122
Type or print name of actuary		Most recent enrollment number
AON HEWITT		615-591-3342
Firm name		Telephone number (including area code)
501 CORPORATE CENTER DRIVE SUITE 300 FRANKLIN TN 37067		
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) 2015
v. 150123

(b) Prefunding balance

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 0
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a “funding shortfall” for the prior year?	☒ Yes ☐ No
b If line 20a is “Yes,” were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If line 20a is “Yes,” see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	224,055	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:			
a Net shortfall amortization installment	Outstanding Balance	Installment	
	3,438,422	1,405,689	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	1,629,744	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	1,629,744	1,629,744
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

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

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

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

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

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55	0.0500	1.0000	2.75
56	0.0500	0.9500	2.66
57	0.0500	0.9025	2.57
58	0.0500	0.8574	2.49
59	0.0500	0.8145	2.40
60	0.1000	0.7738	4.64
61	0.1000	0.6964	4.25
62	0.3000	0.6268	11.66
63	0.2000	0.4387	5.53
64	0.2000	0.3510	4.49
65	1.0000	0.2808	18.25
Weighted Average			61.69

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

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

For ERISA Requirements

Interest Rates for Minimum Funding Purposes	Based on segment rates with no lookback (as of January 2015), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA
1st Segment Rate	4.72%
2nd Segment Rate	6.11%
3rd Segment Rate	6.81%
Interest Rates for Maximum Tax Purposes	Based on segment rates with no lookback (as of January 2015), without regard to interest rate stabilization
1st Segment Rate	1.22%
2nd Segment Rate	4.11%
3rd Segment Rate	5.20%
Retirement Age	
Active Participants	See Table 1
Terminated Vested Participants	Age 65
Mortality Rates	
Healthy and Disabled	Generational Mortality Table for annuitants and non-annuitants per §1.430(h)(3)-1(e)
Withdrawal Rates	See Table 2
Disability Rates	None
Decrement Timing	Beginning of year decrements, with 100% retirement occurring at beginning of year
Surviving Spouse Benefit	It is assumed that 90% of males and 90% of females have an eligible spouse, and that males are three years older than their spouses.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of \$210,000

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Expected Return on Assets

2013 Plan Year

6.00%

2014 Plan Year

5.90%

Trust Expenses Included in Target Normal Cost

Equal to prior years expenses (\$224,055 for 2015 assumptions)

Actuarial Method

Standard unit credit cost method

Valuation Date

January 1, 2015

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Actuarial Assumptions and Methods

Table 1

Retirement Rates

<u>Age</u>	<u>Rate</u>
55	5.00%
56	5.00%
57	5.00%
58	5.00%
59	5.00%
60	10.00%
61	10.00%
62	30.00%
63	20.00%
64	20.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
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Table 2

Withdrawal Rates

Age	Rate	Age	Rate
19	0.0000%	49	14.2014%
20	29.8152%	50	12.6744%
21	29.6694%	51	11.0472%
22	29.5194%	52	9.3684%
23	29.3634%	53	7.6986%
24	29.1996%	54	6.1044%
25	29.0226%	55	4.6464%
26	28.8342%	56	3.3744%
27	28.6314%	57	2.3154%
28	28.4112%	58	1.4820%
29	28.1718%	59	0.8640%
30	27.9096%	60	0.4398%
31	27.6198%	61	0.1782%
32	27.3000%	62	0.0456%
33	26.9460%	63+	0.0000%
34	26.5536%		
35	26.1186%		
36	25.6398%		
37	25.1154%		
38	24.5448%		
39	23.9268%		
40	23.2632%		
41	22.5456%		
42	21.7668%		
43	20.9280%		
44	20.0274%		
45	19.0620%		
46	18.0162%		
47	16.8684%		
48	15.6000%		

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Schedule SB, Part V—Summary of Plan Provisions

General Information

Original Effective Date	April 4, 1990
Plan Year	January 1 to December 31
Employer Fiscal Year	January 1 to December 31
Plan Administrator	Fiberweb, Inc.

Eligibility Requirements

To be eligible for plan participation, an employee must have attained 21 and completed one year of service. No new participants will enter the plan after April 2, 2004.

Plan Entry Dates

An eligible employee will participate in the plan on the January 1 or July 1 immediately following completion of the age and service requirements.

Service

Service shall equal total years of service with the employer. A year of service is credited for each plan year in which an employee works 1,000 hours. Prior Veratec participants will be credited with years and months of service from August 1, 1998 through December 31, 1999.

A break in service occurs at the start of any plan year in which the employee works less than 501 hours for the Employer in such year. Service will not be interrupted by:

- a. A leave of absence not in excess of one year granted by the employer;
- b. A period of service in the Armed Forces of the United States under which employment rights are granted; or
- c. A period of disability during which the participant is being paid directly or indirectly by the employer.

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

- a. The employee had a vested interest in his accrued benefit at the time of his break in service; or
- b. The employee's period of absence was less than the greater of his pre-break service or five years.

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Average Compensation

Average compensation is the highest consecutive 60 months of compensation after December 31, 1988 and prior to April 2, 2004.

Vesting

All participants shall be vested based upon a five-year cliff vesting schedule.

All active employees are 100% vested as of April 2, 2004.

Normal Retirement
Eligibility

The normal retirement date for each participant is the attainment of age 65 and five years of plan participation.

Benefit

A monthly retirement benefit equal to the sum of 1.05% of his average monthly compensation plus 0.65% of his average monthly compensation in excess of the 2003 covered compensation (Table II) times years of service, not to exceed 35.

The minimum benefit is the accrued benefit under the prior plans.

For former participants of the Fiberweb North America Retirement Plan for Hourly Employees at Simpsonville, the accrued benefit as of December 31, 1991 shall be added to the benefit calculated above based on service after December 31, 1991.

For prior Veratec participants, the accrued benefit as of July 31, 1998 shall be added to the benefit calculated above based on service after July 31, 1998.

No service shall be credited after April 2, 2004, except non-highly compensated employees who have met the requirements for early retirement as of April 2, 2004 shall be credited with an additional three years, not to exceed 35 years.

Accrued Benefit

The monthly accrued benefit, with respect to the formula above, as of any date.

Delayed Retirement

A participant may continue in employment after his normal retirement age and will accrue benefits until the late retirement date, but not after April 2, 2004.

Schedule SB Attachment (Form 5500)—2015 Plan Year
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Early Retirement

A participant's optional early retirement date shall be upon the attainment of age 55 and 10 years of service. If the payment date precedes the normal retirement date, the benefit shall be reduced by 1/15 for each of the first five years early and 1/30 for each of the next five years.

The accrued benefit as of December 31, 1999 for prior Veratec participants shall be reduced for early retirement according to the provisions of their prior plan.

Effective December 30, 2011 employees who are terminated from Fiberweb Inc. and become employees of FitesaFiberweb Inc. as a result of the sale of the Hygiene business are deemed to have met the service requirement for early retirement eligibility.

Preretirement Death Benefit

If a vested participant should die prior to retirement, his spouse shall be entitled to the vested accrued benefit as of the date of death, but payable as if the participant had elected payment to begin on his earliest retirement date in the form of a joint and 50% survivor benefit.

In no event shall a participant receive less than the employee contributions with interest.

Methods of Payments

The normal form of retirement benefit payable to a retired participant is a straight life annuity. If the participant is married, the pension is paid as an actuarial equivalent joint and 50% survivor benefit unless the participant and his spouse elect otherwise.

Other than the normal form of payment, a participant may elect to receive an annuity under one of the following actuarially equivalent optional modes:

- a. Former Simpsonville and Washougal participants may elect to receive one of the following:
 - (1) A reduced benefit is paid to the participant for life, with 120 or 240 monthly payments guaranteed. If the participant dies within the guarantee period, the payments continue to be paid to a beneficiary until the balance of payments has been paid.

Schedule SB Attachment (Form 5500)—2015 Plan Year
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- (2) A reduced benefit is paid to the participant for life, with such benefit (50% or 100% of such benefit thereof) continued after death for the subsequent lifetime of the surviving spouse.
 - (3) A lump sum payment of the actuarial equivalence of the participant's retirement benefit if the lump sum does not exceed \$10,000.
- b. A former International Paper participant may elect to receive one of the following:
 - (1) A reduced benefit is paid to the participant for life, with 60, 120, 180 or 240 monthly payments guaranteed. If the participant dies within the guarantee period, the payments continue to be paid to a beneficiary until the balance of payments has been paid.
 - (2) A reduced benefit is paid to the participant for life, with such benefit (50%, 75% or 100% of such benefit thereof) continued after death for the subsequent lifetime of the surviving spouse.
 - (3) An increased benefit is paid to the participant prior to age 62, with such benefit being reduced at age 62 to reflect the Social Security income for the life of the participant, or for the life of the participant with reduction by 50% after death for the subsequent lifetime of the surviving spouse.
 - (4) A lump sum payment of the actuarial equivalence of the participant's retirement benefit. The lump sum may not exceed \$10,000 unless the participant was a nonunion hourly employee.

Contributions

No employee contributions are required after December 31, 1991. All participants are 100% vested in their employee contributions with interest.

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Amendments

The employer reserves the right to amend or terminate the plan at any time. Generally, the Pension Benefit Guaranty Corporation reserves the right to terminate the plan if the employer fails to meet the minimum funding standards, or is unable to pay benefits when due. If the plan is terminated, the plan assets will be distributed among the plan participants based upon a priority allocation procedure and the employer shall be liable for any unfunded vested benefits to the extent required by law.

Plan Changes Since the Prior Year

The funding, financial accounting, and plan reporting valuations reflect no plan change

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

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

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
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Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2015

Attained Age	Number of Participants and Average Compensation									
	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34										
35-39										
40-44										
45-49										
50-54										
55-59					1					
60-64					1					
65-69										
70+										

N-2

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
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Schedule SB, line 32—Schedule of Amortization Bases

Type of Base	Present Value of Installment	Date Established	Years Remaining	Amortization Installment
Shortfall	\$ 106,533	January 1, 2009	1	\$ 106,533
Shortfall	\$ 1,623,606	January 1, 2010	2	\$ 830,520
Shortfall	\$ 3,063,724	January 1, 2011	3	\$ 1,068,686
Shortfall	\$ (3,932,137)	January 1, 2012	4	\$ (1,052,049)
Shortfall	\$ (15,946)	January 1, 2013	5	\$ (3,490)
Shortfall	\$ 1,109,134	January 1, 2014	6	\$ 208,777
Shortfall	\$ 1,483,508	January 1, 2015	7	\$ 246,712

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

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(a)	(b)	(c)	(d)
Age	Rate	Weight	Product (a) × (b) × (c)
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Weighted Average			61.69

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Schedule SB Attachment (Form 5500)—2015 Plan Year
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- (2) A reduced benefit is paid to the participant for life, with such benefit (50% or 100% of such benefit thereof) continued after death for the subsequent lifetime of the surviving spouse.
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 - (3) An increased benefit is paid to the participant prior to age 62, with such benefit being reduced at age 62 to reflect the Social Security income for the life of the participant, or for the life of the participant with reduction by 50% after death for the subsequent lifetime of the surviving spouse.
 - (4) A lump sum payment of the actuarial equivalence of the participant's retirement benefit. The lump sum may not exceed \$10,000 unless the participant was a nonunion hourly employee.

Contributions

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Schedule SB Attachment (Form 5500)—2015 Plan Year
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EIN: 57-0833773 PN: 001

Amendments

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Plan Changes Since the Prior Year

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

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AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

EIN 57-083773, PLAN No. 001

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

December 31, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Bonds:			
	AMERICAN CR ACCEP 14-1 C 144A	3.830% 11/12/2019 460,000 UNITS	\$ 459,955	\$ 461,711
	AMERICAN CR AUTO REC 2013-5 D	2.860% 12/9/2019 540,000 UNITS	544,493	543,197
	AMERICAN CR AUTO REC 2014-2 D	2.570% 7/8/2020 550,000 UNITS	549,141	544,385
	AMGEN INC	5.750% 3/15/2040 275,000 UNITS	328,075	297,498
	APPLIED MATERIALS INC	5.850% 6/15/1941 175,000 UNITS	201,175	188,819
	AT&T INC	3.000% 2/15/2022 210,000 UNITS	196,012	206,764
	AT&T INC	4.350% 6/15/2045 377,000 UNITS	358,148	322,512
	AVIS BUDGET RENTAL C 1A B 144A	2.620% 9/20/2019 220,000 UNITS	219,980	215,376
	BANK OF AMERICA CORP	5.650% 5/1/2018 330,000 UNITS	362,815	354,872
	BANK OF AMERICA CORP	5.625% 7/1/2020 270,000 UNITS	275,221	299,492
	BANK OF AMERICA CORP	5.875% 1/5/2021 260,000 UNITS	287,241	294,342
	BANK OF NEW YORK MELLON CORP/T	2.100% 1/15/2019 115,000 UNITS	115,411	115,535
	BAXTER INTERNATIONAL INC	1.850% 1/15/2017 180,000 UNITS	179,934	178,925
	BEAR STEARNS COS LLC/THE	7.250% 2/1/2018 115,000 UNITS	133,193	127,064
	BERKSHIRE HATHAWAY FINANCE COR	4.250% 1/15/2021 275,000 UNITS	278,020	299,649
	BERKSHIRE HATHAWAY INC	3.000% 2/11/2023 210,000 UNITS	208,580	214,395
	BHP BILLITON FINANCE USA LTD	3.250% 11/21/2021 360,000 UNITS	358,452	338,148
	BNP PARIBAS SA	2.400% 12/12/2018 360,000 UNITS	361,465	362,830
	BP CAPITAL MARKETS PLC	3.245% 5/6/2022 135,000 UNITS	138,200	134,445
	BP CAPITAL MARKETS PLC	2.750% 5/10/2023 210,000 UNITS	203,896	197,188
	BURLINGTON RESOURCES FINANCE C	7.200% 8/15/2031 175,000 UNITS	244,783	204,839
	CALIFORNIA ST	7.550% 4/1/2039 315,000 UNITS	432,860	457,905
	CELGENE CORP	3.950% 10/15/2020 345,000 UNITS	365,748	361,844
	CHEVRON CORP	3.191% 6/24/2023 180,000 UNITS	175,702	180,958
	CITIGROUP INC	8.125% 7/15/2039 90,000 UNITS	108,095	129,085
	CLI FUNDING LLC 2013 NOTE	2.830% 3/18/2028 152,250 UNITS	152,228	146,767
	CME GROUP INC	5.300% 9/15/2043 320,000 UNITS	344,130	366,381
	CNOOC FINANCE 2013 LTD	3.000% 5/9/2023 325,000 UNITS	290,154	304,190
	COMCAST CORP	4.250% 1/15/2033 330,000 UNITS	322,863	324,268
	COMM MTG TR 14-UBS2 D 144A	5.183% 3/10/2047 580,000 UNITS	553,945	533,541
	COMM MORTGAGE TRUST CR7 144A	4.360% 3/10/2046 380,000 UNITS	332,946	340,780
	COMMONWEALTH EDISON CO	3.700% 3/1/1945 255,000 UNITS	249,793	229,360
	CONOCOPHILLIPS HOLDING CO	6.950% 4/15/2029 110,000 UNITS	140,598	125,993
	CR BARD INC	4.400% 1/15/2021 135,000 UNITS	154,853	142,862
	CSAIL COMM MORT TRUST 2015-C3	3.508% 8/15/1948 320,000 UNITS	255,125	231,357
	ECOLAB INC	1.450% 12/8/2017 475,000 UNITS	471,267	472,592
	ENERGY TRANSFER PARTNERS LP	7.500% 7/1/2038 265,000 UNITS	303,476	244,762
	ENERGY TRANSFER PARTNERS LP	6.050% 6/1/2041 60,000 UNITS	66,605	46,818
	EXELON GENERATION CO LLC	6.250% 10/1/2039 305,000 UNITS	307,058	308,535
	FLUOR CORP	3.375% 9/15/2021 70,000 UNITS	69,383	71,520
	FMR LLC 144A	6.500% 12/14/2040 170,000 UNITS	190,252	211,725
	FORD MOTOR CREDIT CO LLC	5.875% 8/2/2021 200,000 UNITS	232,482	223,028
	FRANCE TELECOM SA	8.500% 3/1/2031 130,000 UNITS	179,161	183,486
	FRANCE TELECOM SA	4.125% 9/14/2021 235,000 UNITS	236,052	248,348
	FRANKLIN RESOURCES INC	2.800% 9/15/2022 300,000 UNITS	302,136	292,875
	FREEPORT-MCMORAN COPPER & GOLD	2.375% 3/15/2018 230,000 UNITS	232,266	179,400
	GE CAPITAL INTL FUNDING	0.964% 4/15/2016 1,138,000 UNITS	1,110,462	1,138,534
	GE CAPITAL INTL FUNDING	4.418% 11/15/1935 296,000 UNITS	266,148	306,677
	GENERAL ELECTRIC CAPITAL CORP	6.750% 3/15/2032 86,000 UNITS	106,957	112,368
	GLENORE FUNDING INC	1.700% 5/27/2016 500,000 UNITS	499,735	495,000
	GOLDMAN SACHS GROUP INC/THE	6.150% 4/1/2018 245,000 UNITS	268,569	266,018
	GOLDMAN SACHS GROUP INC/THE	5.750% 1/24/2022 400,000 UNITS	451,208	455,580
	GOOGLE INC	3.375% 2/25/2024 215,000 UNITS	216,217	226,305
	HASBRO INC	6.350% 3/15/2040 220,000 UNITS	230,938	239,666
	HEALTH CARE REIT INC	3.625% 3/15/2016 60,000 UNITS	59,783	60,261
	HOME DEPOT INC/THE	3.750% 2/15/2024 350,000 UNITS	356,734	372,040
	HSBC HOLDINGS PLC	5.875% 11/1/1934 190,000 UNITS	226,317	220,164
	JPMBB COMMERCIAL MORTGAG C19 C	4.833% 4/15/2047 380,000 UNITS	394,666	375,128
	JPMORGAN CHASE & CO	4.250% 10/15/2020 300,000 UNITS	307,817	318,252
	JPMORGAN CHASE & CO	3.250% 9/23/2022 240,000 UNITS	245,045	241,434
	JPMORGAN CHASE & CO	5.625% 8/16/2043 365,000 UNITS	374,868	397,193
	KEYCORP	5.100% 3/24/2021 330,000 UNITS	373,814	361,142
	KINDER MORGAN ENERGY PARTNERS	3.950% 9/1/2022 135,000 UNITS	132,717	116,135
	LOWE'S COS INC	5.125% 11/15/2041 335,000 UNITS	349,631	370,922
	LYONDELLBASELL INDUSTRIES NV	5.000% 4/15/2019 70,000 UNITS	77,333	74,466
	MASTERCARD INC	3.375% 4/1/2024 350,000 UNITS	350,903	357,191
	MEDTRONIC INC	4.000% 4/1/2043 200,000 UNITS	188,502	185,596
	MEMORIAL SLOAN-KETTERING	5.000% 7/1/1942 425,000 UNITS	490,327	455,158

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

EIN 57-083773, PLAN No. 001

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

December 31, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	MERCK & CO INC	2.750% 2/10/2025 410,000 UNITS	399,619	399,139
	MET LIFE INC	3.000% 1/10/2023 272,000 UNITS	268,801	270,626
	METLIFE INC	4.875% 11/13/2043 185,000 UNITS	185,574	194,085
	MIDAMERICAN ENERGY CO	4.800% 9/15/2043 145,000 UNITS	153,380	155,141
	MIDAMERICAN ENERGY CO	3.500% 10/15/2024 390,000 UNITS	406,047	398,564
	MORGAN STANLEY	5.500% 1/26/2020 360,000 UNITS	399,968	396,328
	MVW OWNER TRUST 13-1A B 144A	2.740% 4/20/2030 97,422 UNITS	97,408	96,379
	NBCUNIVERSAL MEDIA LLC	4.375% 4/1/2021 135,000 UNITS	134,966	146,641
	NEW JERSEY ST TRANSPRTN TRUST	6.561% 12/15/2040 251,000 UNITS	306,122	266,472
	NEW YORK LIFE INSURANCE C 144A	5.875% 5/15/2033 290,000 UNITS	328,355	339,204
	NORTHERN TRUST CORP	3.950% 10/30/2025 245,000 UNITS	245,167	256,535
	NORTHROP GRUMMAN CORP	3.250% 8/1/2023 120,000 UNITS	119,354	119,962
	NORTHROP GRUMMAN CORP	4.750% 6/1/2043 115,000 UNITS	114,890	118,363
	NOVARTIS CAPITAL CORP	2.400% 9/21/2022 475,000 UNITS	463,994	467,657
	NUCOR CORP	5.200% 8/1/2043 270,000 UNITS	272,384	245,030
	NYSE Euronext	2.000% 10/5/2017 230,000 UNITS	233,540	230,357
	OMNICOM GROUP INC	3.625% 5/1/2022 360,000 UNITS	356,963	363,398
	ORACLE CORP	6.500% 4/15/2038 295,000 UNITS	344,777	369,957
	ORACLE CORP	2.375% 1/15/2019 225,000 UNITS	229,311	228,474
	PRIVATE EXPORT FUNDING CORP	4.300% 12/15/2021 160,000 UNITS	158,910	175,605
	PROTECTIVE LIFE CORP	8.450% 10/15/2039 105,000 UNITS	135,580	138,491
	RAYTHEON CO	4.700% 12/15/2041 110,000 UNITS	108,327	119,407
	RIO TINTO FINANCE USA LTD	4.125% 5/20/2021 345,000 UNITS	357,883	345,490
	SANTANDER DRIVE AUTO RECEI 2 D	2.760% 2/18/2020 535,000 UNITS	542,649	532,542
	SANTANDER DRIVE AUTO RECEI 5 D	3.210% 1/15/2021 370,000 UNITS	369,899	370,717
	SANTANDER DRIVE AUTO RECEI 2 D	3.020% 4/15/2021 460,000 UNITS	459,984	452,580
	SANTANDER DRIVE AUTO RECEI 4 D	3.530% 8/16/2021 420,000 UNITS	419,847	416,174
	SC JOHNSON & SON INC 144A	4.800% 9/1/2040 300,000 UNITS	296,844	310,656
	SIERRA RECEIVABLES F 1A B 144A	2.420% 3/20/2030 151,368 UNITS	151,365	150,729
	SIERRA TIMESHARE 201 3A B 144A	2.700% 10/20/2030 107,634 UNITS	108,509	107,451
	SOUTH CAROLINA ELECTRIC & GAS	5.450% 2/1/2041 435,000 UNITS	518,089	479,086
	SOUTHWESTERN PUBLIC SERVICE CO	4.500% 8/15/2041 405,000 UNITS	411,596	418,956
	SPRINGLEAF MORTG 13-2A M2144A	4.480% 12/25/2065 240,000 UNITS	229,275	241,696
	SPRINGLEAF MTG 13-3A M3 144A	5.000% 9/25/2057 220,000 UNITS	217,249	223,043
	STATOIL ASA	3.950% 5/15/2043 390,000 UNITS	377,482	352,544
	STATOIL ASA	5.250% 4/15/2019 280,000 UNITS	333,799	307,034
	STRYKER CORP	3.375% 11/1/2025 420,000 UNITS	418,822	414,548
	TIME WARNER INC	6.250% 3/29/2041 265,000 UNITS	267,147	294,301
	TJX COS INC	2.500% 5/15/2023 145,000 UNITS	136,387	139,876
	TOYOTA MOTOR CREDIT CORP	3.400% 9/15/2021 80,000 UNITS	81,326	83,027
	TOYOTA MOTOR CREDIT CORP	3.300% 1/12/2022 435,000 UNITS	440,163	448,964
	UNITED TECHNOLOGIES CORP	4.500% 6/1/1942 225,000 UNITS	239,497	226,584
	UNITED TECHNOLOGIES CORP	3.100% 6/1/2022 360,000 UNITS	358,879	366,706
	US BANCORP	3.000% 3/15/2022 230,000 UNITS	228,418	233,772
	U S TREASURY NOTE / BOND	2.500% 2/15/1945 835,000 UNITS	766,710	749,187
	U S TREASURY NOTE / BOND	2.875% 8/15/1945 500,000 UNITS	491,953	485,703
	U S TREASURY NOTE / BOND	2.000% 8/15/2025 115,000 UNITS	114,335	112,179
	U S TREASURY NOTE / BOND	2.250% 11/15/2025 105,000 UNITS	105,016	104,820
	U S TREASURY NT CPN STRIP	0.000% 5/15/2035 335,000 UNITS	175,098	187,496
	U S TREASURY NT CPN STRIP	0.000% 11/15/2035 1,150,000 UNITS	477,549	632,269
	U S TREASURY NT CPN STRIP	0.000% 11/15/2036 1,000,000 UNITS	396,600	532,940
	U S TREASURY NT CPN STRIP	0.000% 2/15/2038 1,000,000 UNITS	486,470	510,570
	U S TREASURY NT CPN STRIP	0.000% 5/15/1934 925,000 UNITS	541,227	534,188
	U S TREASURY NT CPN STRIP	0.000% 2/15/2035 1,000,000 UNITS	539,350	564,510
	U S TREASURY NT CPN STRIP	0.000% 2/15/2036 1,000,000 UNITS	522,460	547,330
	U S TREASURY NT CPN STRIP	0.000% 2/15/2037 1,000,000 UNITS	504,120	528,200
	U S TREASURY NT CPN STRIP	0.000% 11/15/2037 850,000 UNITS	321,887	436,985
	U S TREASURY NT CPN STRIP	0.000% 11/15/2038 700,000 UNITS	253,925	347,130
	U S TREASURY NT CPN STRIP	0.000% 2/15/1939 1,300,000 UNITS	620,839	639,197
	U S TREASURY NT CPN STRIP	0.000% 2/15/2040 2,000,000 UNITS	903,580	952,840
	U S TREASURY NT CPN STRIP	0.000% 5/15/2041 830,000 UNITS	347,919	375,160
	U S TREASURY NT CPN STRIP	0.000% 8/15/2042 1,180,000 UNITS	490,172	508,250
	U S TREASURY NT CPN STRIP	0.000% 11/15/1941 300,000 UNITS	137,754	132,732
	U S TREASURY NT CPN STRIP	0.000% 2/15/2042 1,275,000 UNITS	399,075	561,165
	U S TREASURY NT CPN STRIP	0.000% 2/15/2043 1,000,000 UNITS	299,070	422,770
	U S TREASURY NT CPN STRIP	0.000% 11/15/1944 800,000 UNITS	332,616	320,912
	VALLEY NATIONAL BANCORP	5.125% 9/27/2023 60,000 UNITS	59,851	62,670
	VERIZON COMMUNICATIONS INC	6.350% 4/1/2019 185,000 UNITS	225,172	208,282
	VERIZON COMMUNICATIONS INC	4.400% 11/1/1934 390,000 UNITS	390,226	365,251
	VIRGINIA ELECTRIC AND POWER CO	6.350% 11/30/2037 285,000 UNITS	361,455	364,578
	WATSON PHARMACEUTICALS	1.875% 10/1/2017 445,000 UNITS	443,803	439,883
	WELLPOINT INC	2.375% 2/15/2017 280,000 UNITS	278,684	282,495
	WELLPOINT INC	3.300% 1/15/2023 245,000 UNITS	243,412	238,096
	WELLS FARGO & CO	3.500% 3/8/2022 235,000 UNITS	244,200	243,070
	WELLS FARGO & CO	3.450% 2/13/2023 280,000 UNITS	276,450	280,661
	WYETH LLC	6.450% 2/1/2024 205,000 UNITS	271,477	250,758
	Bonds Total:		44,002,860	44,740,164

AMENDED AND RESTATED FIBERWEB RETIREMENT PLAN

EIN 57-083773, PLAN No. 001

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

December 31, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Exchange Traded Funds:			
	ISHARES	MSCI EAFE ETF	2,592,053	2,364,361
	ISHARES	RUSSELL 2000 ETF	1,079,964	957,157
	ISHARES	US REAL ESTATE ETF	563,335	568,806
	STATE STREET BANK & TRUST	SPDR S&P 500 ETF TRUST	8,060,353	7,781,922
	STATE STREET BANK & TRUST	SPDR S&P MIDCAP 400 ETF TRUST	1,508,591	1,377,405
			<u>13,804,296</u>	<u>13,049,651</u>
	Mutual Funds:			
	BLACKSTONE	ALT MULTI-STRAT-I	747,895	724,892
	DODGE & COX	INTERNATIONAL STOCK	1,087,749	892,289
	PIMCO	COMMODITY REAL RETURN STRATEGY	626,884	469,428
	PIMCO	INTERNATIONAL STOCKPLUS (AR STRATEGY FUND)	1,886,186	1,638,165
	STONE RIDGE	ALL ASSET VARIANCE RISK PREMIUM FUND	917,058	912,047
		Mutual Funds Total:	<u>5,265,772</u>	<u>4,636,821</u>
	Money Market Funds:			
	FEDERATED	FEDERATED GOVT OBLIG FUND INST	1,113,073	1,113,073
*	WILMINGTON FUNDS	U.S. GOVERNMENT MONEY MARKET FUND	302,768	302,768
		Money Market Funds Total:	<u>1,415,841</u>	<u>1,415,841</u>
	Interest Bearing Cash:			
*	PERSHING	CASH & MONEY MARKET ACCOUNT	194,851	194,851
	Non-interest Bearing Cash:			
*	JOHN HANCOCK TRUST COMPANY	NON-INTEREST BEARING CASH	287,644	287,644
		Grand Total:	<u>\$ 64,971,264</u>	<u>\$ 64,324,972</u>

* Represents a party-in-interest.

The above data is based upon information which has been certified as complete and accurate by John Hancock Trust Company LLC, custodian, and Matrix Trust Company, trustee.

Schedule SB Attachment (Form 5500)—2015 Plan Year
Amended and Restated Fiberweb Retirement Plan
EIN: 57-0833773 PN: 001

Schedule SB, line 32—Schedule of Amortization Bases

Type of Base	Present Value of Installment	Date Established	Years Remaining	Amortization Installment
Shortfall	\$ 106,533	January 1, 2009	1	\$ 106,533
Shortfall	\$ 1,623,606	January 1, 2010	2	\$ 830,520
Shortfall	\$ 3,063,724	January 1, 2011	3	\$ 1,068,686
Shortfall	\$ (3,932,137)	January 1, 2012	4	\$ (1,052,049)
Shortfall	\$ (15,946)	January 1, 2013	5	\$ (3,490)
Shortfall	\$ 1,109,134	January 1, 2014	6	\$ 208,777
Shortfall	\$ 1,483,508	January 1, 2015	7	\$ 246,712