# 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 01/01/2015 and ending 12/31/2015

**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
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

**D** Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES

**1b** Three-digit plan number (PN) ▶ 016

**1c** Effective date of plan 12/29/1943

**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)
JOHNSON CONTROLS BATTERY GROUP, INC.

JOHNSON CONTROLS, INC.

5757 N GREEN BAY AVE
MILWAUKEE, WI 53209-4408

**2b** Employer Identification Number (EIN) 39-1684871

**2c** Plan Sponsor's telephone number 414-524-1200

**2d** Business code (see instructions) 336300

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

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

| | | | |
|---|---|---|---|
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/13/2016 | KAARE A LEIN |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/13/2016 | KAARE A LEIN |
| | **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

EMPLOYEE BENEFITS POLICY COMMITTEE
JOHNSON CONTROLS, INC.
5757 N. GREEN BAY AVENUE
MILWAUKEE, WI 53209-4408

**3b** Administrator's EIN: 39-0380010

**3c** Administrator's telephone number: 414-524-1200

**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** | 4524 |
| **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)** | 2247 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 2182 |
| **b** | Retired or separated participants receiving benefits | **6b** | 1502 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 533 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 4217 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 257 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 4474 |
| **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** | 62 |
| **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

**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)

**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_____

# SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

**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
JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
JOHNSON CONTROLS BATTERY GROUP, INC.

**D** Employer Identification Number (EIN)
39-1684871

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

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

## Part I Basic Information

**1** Enter the valuation date: Month 01 Day 01 Year 2015

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | **2a** | 381052851 |
| **b** Actuarial value | **2b** | 381052851 |

**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 | 1737 | 122787230 | 122787230 |
| **b** For terminated vested participants | 540 | 17158018 | 17158018 |
| **c** For active participants | 2247 | 117876707 | 129578803 |
| **d** Total | 4524 | 257821955 | 269524051 |

**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** | 6.30% |
| **6** Target normal cost | **6** | 8716488 |

**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**

Signature of actuary

Date

CHERYL L. DAVIS

Type or print name of actuary

14-04707

Most recent enrollment number

HEWITT ASSOCIATES LLC

Firm name

847-295-5000

Telephone number (including area code)

4 OVERLOOK POINT
LINCOLNSHIRE, IL 60069

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

## Part II Beginning of Year Carryover and Prefunding Balances

| | | (a) Carryover balance | (b) Prefunding balance |
|---|---|---|---|
| 7 | Balance at beginning of prior year after applicable adjustments (line 13 from prior year) | 19680828 | 70828800 |
| 8 | Portion elected for use to offset prior year's funding requirement (line 35 from prior year) | 7924620 | 0 |
| 9 | Amount remaining (line 7 minus line 8) | 11756208 | 70828800 |
| 10 | Interest on line 9 using prior year's actual return of 10.53% | 1237929 | 7458273 |
| 11 | Prior year's excess contributions to be added to prefunding balance: | | |
| | **a** Present value of excess contributions (line 38a from prior year) | | 28938403 |
| | **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 6.48% | | 1361693 |
| | **b(2)** Interest on line 38b from prior year Schedule SB, using prior year's actual return | | 834462 |
| | **c** Total available at beginning of current plan year to add to prefunding balance | | 31134558 |
| | **d** Portion of (c) to be added to prefunding balance | | 31134558 |
| 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) | 12994137 | 109421631 |

## Part III Funding Percentages

| | | | |
|---|---|---|---|
| 14 | Funding target attainment percentage | 14 | 95.96 % |
| 15 | Adjusted funding target attainment percentage | 15 | 141.37 % |
| 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 | 105.27 % |
| 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) | | 18(c) |

| | | | |
|---|---|---|---|
| 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? [X] Yes [ ] No

**b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] 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 | (4) 4th |
|---|---|---|---|
| 0 | 0 | 0 | 0 |

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

**21** Discount rate:

**a** Segment rates:

| 1st segment: | 2nd segment: | 3rd segment: | |
|---|---|---|---|
| 4.72 % | 6.11 % | 6.81 % | ☐ N/A, full yield curve used |

| | | |
|---|---|---|
| **b** Applicable month (enter code) | **21b** | 4 |
| **22** Weighted average retirement age | **22** | 63 |

**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** | |
| **29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) | **29** | |
| **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** | 8716488 |
| **b** Excess assets, if applicable, but not greater than line 31a | **31b** | |

**32** Amortization installments:

| | Outstanding Balance | Installment |
|---|---|---|
| **a** Net shortfall amortization installment | 0 | 0 |
| **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** | 8716488 |

| | Carryover balance | Prefunding balance | Total balance |
|---|---|---|---|
| **35** Balances elected for use to offset funding requirement | 8716488 | 0 | 8716488 |

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

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

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

| | |
|---|---|
| **A** Name of plan<br>JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES | **B** Three-digit plan number (PN) ▶ 016 |
| **C** Plan sponsor's name as shown on line 2a of Form 5500<br>JOHNSON CONTROLS BATTERY GROUP, INC. | **D** Employer Identification Number (EIN)<br>39-1684871 |

## Part I Service Provider Information (see instructions)

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

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

AON HEWITT

4 OVERLOOK POINT
LINCOLNSHIRE, IL 60069

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 | ACTUARY | 289722 | 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 ☐ |

**(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 ☐ |

**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)

| (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 ☐ |

**(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 ☐ |

**(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 |
|---|---|---|
| | | |

| **(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 |
|---|---|---|
| | | |

| **(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 |
|---|---|---|
| | | |

| **(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 |
|---|---|---|
| | | |

| **(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 |
|---|---|---|
| | | |

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

## Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

| | | |
|---|---|---|
| **a** | Name: | **b** EIN: |
| **c** | Position: | |
| **d** | Address: | **e** Telephone: |

Explanation:

| | | |
|---|---|---|
| **a** | Name: | **b** EIN: |
| **c** | Position: | |
| **d** | Address: | **e** Telephone: |

Explanation:

| | | |
|---|---|---|
| **a** | Name: | **b** EIN: |
| **c** | Position: | |
| **d** | Address: | **e** Telephone: |

Explanation:

| | | |
|---|---|---|
| **a** | Name: | **b** EIN: |
| **c** | Position: | |
| **d** | Address: | **e** Telephone: |

Explanation:

| | | |
|---|---|---|
| **a** | Name: | **b** EIN: |
| **c** | Position: | |
| **d** | Address: | **e** Telephone: |

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

# DFE/Participating Plan Information

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

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

OMB No. 1210-0110

**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
JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES

**B** Three-digit plan number (PN) ▶ 016

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
JOHNSON CONTROLS BATTERY GROUP, INC.

**D** Employer Identification Number (EIN)
39-1684871

## Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

**a** Name of MTIA, CCT, PSA, or 103-12 IE: JOHNSON CONTROLS MASTER PENSION TRU

**b** Name of sponsor of entity listed in (a): JOHNSON CONTROLS, INC.

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 39-0380010-024 | M | 348972954 |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Financial Information

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

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

OMB No. 1210-0110

**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
JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500
JOHNSON CONTROLS BATTERY GROUP, INC.

**D** Employer Identification Number (EIN)
39-1684871

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | | |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | 33600000 | 0 |
| **(2)** Participant contributions | 1b(2) | | |
| **(3)** Other | 1b(3) | | |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | |
| **(2)** U.S. Government securities | 1c(2) | | |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | | |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | | |
| **(9)** Value of interest in common/collective trusts | 1c(9) | | |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | | |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | 348951679 | 348972954 |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | | |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | | |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **1d** Employer-related investments: | | | |
| **(1)** Employer securities | 1d(1) | | |
| **(2)** Employer real property | 1d(2) | | |
| **e** Buildings and other property used in plan operation | 1e | | |
| **f** Total assets (add all amounts in lines 1a through 1e) | 1f | 382551679 | 348972954 |
| **Liabilities** | | | |
| **g** Benefit claims payable | 1g | | |
| **h** Operating payables | 1h | 45764 | 77092 |
| **i** Acquisition indebtedness | 1i | | |
| **j** Other liabilities | 1j | | |
| **k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 45764 | 77092 |
| **Net Assets** | | | |
| **l** Net assets (subtract line 1k from line 1f) | 1l | 382505915 | 348895862 |

## 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) | 0 | |
| **(B)** Participants | 2a(1)(B) | | |
| **(C)** Others (including rollovers) | 2a(1)(C) | | |
| **(2)** Noncash contributions | 2a(2) | | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 0 |
| **b Earnings on investments:** | | | |
| **(1)** Interest: | | | |
| **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | | |
| **(B)** U.S. Government securities | 2b(1)(B) | | |
| **(C)** Corporate debt instruments | 2b(1)(C) | | |
| **(D)** Loans (other than to participants) | 2b(1)(D) | | |
| **(E)** Participant loans | 2b(1)(E) | | |
| **(F)** Other | 2b(1)(F) | | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | |
| **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| **(B)** Common stock | 2b(2)(B) | | |
| **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | |
| **(3)** Rents | 2b(3) | | |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | |
| **(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) | | |

| | | (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) | | -2675142 |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | |
| c Other income | 2c | | |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | -2675142 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 30387497 | |
| (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) | | 30387497 |
| 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) | 289722 | |
| (2) Contract administrator fees | 2i(2) | | |
| (3) Investment advisory and management fees | 2i(3) | | |
| (4) Other | 2i(4) | 257868 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 547590 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 30935087 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | -33610229 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 176 |
| (2) From this plan | 2l(2) | | 0 |

## 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)** [X] Disclaimer **(4)** [ ] Adverse

**b** Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

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

**(1)** Name: COLEMAN & WILLIAMS, LTD. **(2)** EIN: 39-1658905

**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.) | 4a | | X | | |
| **b** Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | 4b | | X | | |

| | | 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.) | 4c | | X | | |
| d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | 4d | | X | | |
| e Was this plan covered by a fidelity bond? | 4e | X | | | 50000000 |
| f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 4f | | X | | |
| g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4g | | X | | |
| h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4h | | X | | |
| i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | 4i | X | | | |
| j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.) | 4j | | X | | |
| k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 4k | | X | | |
| l Has the plan failed to provide any benefit when due under the plan? | 4l | X | | | 1333 |
| m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 4m | | X | | |
| n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | 4n | | X | | |
| o Did the plan trust incur unrelated business taxable income? | 4o | | | | |
| p Were in-service distributions made during the plan year? | 4p | | | | |

**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
JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500
JOHNSON CONTROLS BATTERY GROUP, INC.

**D** Employer Identification Number (EIN)
39-1684871

## Part I Distributions

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

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

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

EIN(s): _____ _____

**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** 128

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

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

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

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

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

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

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

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

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

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

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

## Part III Amendments

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

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

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

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

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

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

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

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

**a** Name of contributing employer

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

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete 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: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

## Part VII IRS Compliance Questions

| | | |
|---|---|---|
| **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 |

# JOHNSON CONTROLS, INC.
# PENSION PLANS

**FINANCIAL STATEMENTS AND**
**SUPPLEMENTAL SCHEDULES**
**YEARS ENDED DECEMBER 31, 2015 AND 2014**

**JOHNSON CONTROLS, INC. PENSION PLANS**
**FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES**
**YEARS ENDED DECEMBER 31, 2015 AND 2014**

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*Note: Other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income and Security Act of 1974 have been omitted because they are not applicable.

COLEMAN & WILLIAMS, LTD.
*A Professional Services Firm*

# INDEPENDENT AUDITORS' REPORT

To the Participants and Administrator of the
Johnson Controls Pension Plans:

## Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Johnson Controls Pension Plans (the "Plans" as defined in Note 1), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the statements of accumulated plan benefits as of January 1, 2015 and 2014, and the related statements' of changes in net assets available for benefits and of changes in accumulated plan benefits for the respective years then ended, the related notes to the financial statements, and the supplemental schedules as listed in the table of contents.

## Management's Responsibility for the Financial Statements

Plan 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.

## Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit 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 Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended, 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 U.S. Bank, N.A., the trustee of the Plan, except for comparing the information with the related information included in the 2015 financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

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**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 schedules as listed in the accompanying table of contents, as of and for the year ended December 31, 2015 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended, and are presented for the purpose of additional analyses 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 the supplemental schedules referred to above.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

Coleman & Williams, Ltd.

Milwaukee, Wisconsin
October 13, 2016

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2015**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **ASSETS** | | | | | | | |
| Investment in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 1,898,681,204 | $ 348,972,954 | $ 84,085,494 | $ 2,689,391 | $ 5,609,726 | $ 80,719,576 | $ 2,202,569 |
| Employer contribution receivable | — | — | — | 175,000 | 25,000 | — | — |
| Total assets | 1,898,681,204 | 348,972,954 | 84,085,494 | 2,864,391 | 5,634,726 | 80,719,576 | 2,202,569 |
| **LIABILITIES** | | | | | | | |
| Accrued administrative expenses | 326,020 | 77,092 | 47,575 | 495 | 7,136 | 11,140 | 5,005 |
| Total liabilities | 326,020 | 77,092 | 47,575 | 495 | 7,136 | 11,140 | 5,005 |
| Net assets available for benefits | $ 1,898,355,184 | $ 348,895,862 | $ 84,037,919 | $ 2,863,896 | $ 5,627,590 | $ 80,708,436 | $ 2,197,564 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2015**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **ASSETS** | | | | | | | |
| Investment in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 27,493,339 | $ 10,826,500 | $ 16,554,098 | $ 6,331,425 | $ 21,612,103 | $ 13,274,848 | $ 26,427,700 |
| Employer contribution receivable | 1,275,000 | 50,000 | — | 275,000 | 100,000 | — | 125,000 |
| Total assets | 28,768,339 | 10,876,500 | 16,554,098 | 6,606,425 | 21,712,103 | 13,274,848 | 26,552,700 |
| **LIABILITIES** | | | | | | | |
| Accrued administrative expenses | 12,094 | 4,538 | 7,160 | 7,942 | 7,129 | 5,380 | 18,195 |
| Total liabilities | 12,094 | 4,538 | 7,160 | 7,942 | 7,129 | 5,380 | 18,195 |
| Net assets available for benefits | $ 28,756,245 | $ 10,871,962 | $ 16,546,938 | $ 6,598,483 | $ 21,704,974 | $ 13,269,468 | $ 26,534,505 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2015**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **ASSETS** | | |
| Investment in Johnson Controls, Inc. | | |
| Master Pension Trust | $ 11,206,543 | $ 2,556,687,470 |
| Employer contribution receivable | 325,000 | 2,350,000 |
| Total assets | 11,531,543 | 2,559,037,470 |
| **LIABILITIES** | | |
| Accrued administrative expenses | 2,928 | 539,829 |
| Total liabilities | 2,928 | 539,829 |
| Net assets available for benefits | $ 11,528,615 | $ 2,558,497,641 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2014**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **ASSETS** | | | | | | | |
| Investment in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 1,812,566,717 | $ 348,951,679 | $ 91,635,081 | $ 2,696,581 | $ 3,020,445 | $ 88,304,958 | $ 2,476,001 |
| Employer contribution receivable | 250,718,605 | 33,600,000 | 700,000 | 200,000 | 2,700,000 | 100,000 | 100,000 |
| Total assets | 2,063,285,322 | 382,551,679 | 92,335,081 | 2,896,581 | 5,720,445 | 88,404,958 | 2,576,001 |
| **LIABILITIES** | | | | | | | |
| Accrued administrative expenses | 332,123 | 45,764 | 46,518 | 2,966 | 6,888 | 9,130 | 2,690 |
| Total liabilities | 332,123 | 45,764 | 46,518 | 2,966 | 6,888 | 9,130 | 2,690 |
| Net assets available for benefits | $ 2,062,953,199 | $ 382,505,915 | $ 92,288,563 | $ 2,893,615 | $ 5,713,557 | $ 88,395,828 | $ 2,573,311 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2014**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **ASSETS** | | | | | | | |
| Investment in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 25,804,537 | $ 11,253,124 | $ 17,857,613 | $ 5,737,381 | $ 20,316,646 | $ 15,089,754 | $ 21,480,771 |
| Employer contribution receivable | 3,300,000 | — | — | 1,100,000 | 2,200,000 | — | 6,300,000 |
| Total assets | 29,104,537 | 11,253,124 | 17,857,613 | 6,837,381 | 22,516,646 | 15,089,754 | 27,780,771 |
| **LIABILITIES** | | | | | | | |
| Accrued administrative expenses | 9,664 | 3,530 | 4,528 | 5,143 | 4,506 | 2,647 | 12,816 |
| Total liabilities | 9,664 | 3,530 | 4,528 | 5,143 | 4,506 | 2,647 | 12,816 |
| Net assets available for benefits | $ 29,094,873 | $ 11,249,594 | $ 17,853,085 | $ 6,832,238 | $ 22,512,140 | $ 15,087,107 | $ 27,767,955 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2014**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **ASSETS** | | |
| Investment in Johnson Controls, Inc. | | |
| Master Pension Trust | $ 11,392,946 | $ 2,478,584,234 |
| Employer contribution receivable | 1,100,000 | 302,118,605 |
| Total assets | 12,492,946 | 2,780,702,839 |
| **LIABILITIES** | | |
| Accrued administrative expenses | 3,587 | 492,500 |
| Total liabilities | 3,587 | 492,500 |
| Net assets available for benefits | $ 12,489,359 | $ 2,780,210,339 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2015**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **ADDITIONS** | | | | | | | |
| Additions to plan assets attributed to: | | | | | | | |
| Investment income (loss) | | | | | | | |
| Plan interest in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ (13,479,615) | $ (2,675,142) | $ (5,907,502) | $ 45,330 | $ 2,698,832 | $ (6,009,030) | $ (230,419) |
| Employer contributions | — | — | — | 175,000 | 225,000 | — | — |
| Total additions (deductions) | (13,479,615) | (2,675,142) | (5,907,502) | 220,330 | 2,923,832 | (6,009,030) | (230,419) |
| **DEDUCTIONS** | | | | | | | |
| Deductions from plan assets attributed to: | | | | | | | |
| Benefits paid to participants | 148,542,279 | 30,387,497 | 7,121,867 | 140,165 | 177,557 | 6,866,049 | 316,268 |
| Administrative expenses | 2,576,121 | 547,590 | 386,404 | 43,594 | 82,770 | 120,668 | 44,520 |
| Total deductions | 151,118,400 | 30,935,087 | 7,508,271 | 183,759 | 260,327 | 6,986,717 | 360,788 |
| Transfer from (to) other plans | — | 176 | 5,165,129 | (66,290) | (2,749,472) | 5,308,355 | 215,460 |
| Net increase (decrease) | (164,598,015) | (33,610,053) | (8,250,644) | (29,719) | (85,967) | (7,687,392) | (375,747) |
| Net assets available for benefits, beginning of year | 2,062,953,199 | 382,505,915 | 92,288,563 | 2,893,615 | 5,713,557 | 88,395,828 | 2,573,311 |
| Net assets available for benefits, end of year | $ 1,898,355,184 | $ 348,895,862 | $ 84,037,919 | $ 2,863,896 | $ 5,627,590 | $ 80,708,436 | $ 2,197,564 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2015**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **ADDITIONS** | | | | | | | |
| Additions to plan assets attributed to: | | | | | | | |
| Investment income (loss) | | | | | | | |
| Plan interest in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 2,225,713 | $ (215,196) | $ (980,234) | $ 717,689 | $ 1,717,514 | $ (1,555,665) | $ 5,463,029 |
| Employer contributions | 1,275,000 | 50,000 | — | 275,000 | 100,000 | — | 125,000 |
| Total additions (deductions) | 3,500,713 | (165,196) | (980,234) | 992,689 | 1,817,514 | (1,555,665) | 5,588,029 |
| **DEDUCTIONS** | | | | | | | |
| Deductions from plan assets attributed to: | | | | | | | |
| Benefits paid to participants | 1,281,075 | 268,335 | 1,095,243 | 398,964 | 656,493 | 1,675,101 | 1,050,493 |
| Administrative expenses | 128,732 | 58,109 | 68,116 | 64,737 | 80,593 | 51,697 | 151,065 |
| Total deductions | 1,409,807 | 326,444 | 1,163,359 | 463,701 | 737,086 | 1,726,798 | 1,201,558 |
| Transfer from (to) other plans | (2,429,534) | 114,008 | 837,446 | (762,743) | (1,887,594) | 1,464,824 | (5,619,921) |
| Net decrease | (338,628) | (377,632) | (1,306,147) | (233,755) | (807,166) | (1,817,639) | (1,233,450) |
| Net assets available for benefits, beginning of year | 29,094,873 | 11,249,594 | 17,853,085 | 6,832,238 | 22,512,140 | 15,087,107 | 27,767,955 |
| Net assets available for benefits, end of year | $ 28,756,245 | $ 10,871,962 | $ 16,546,938 | $ 6,598,483 | $ 21,704,974 | $ 13,269,468 | $ 26,534,505 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2015**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **ADDITIONS** | | |
| Additions to plan assets attributed to: | | |
| Investment income (loss) | | |
| Plan interest in Johnson Controls, Inc. | | |
| Master Pension Trust | $ 32,447 | $ (18,152,249) |
| Employer contributions | 325,000 | 2,550,000 |
| Total additions (deductions) | 357,447 | (15,602,249) |
| **DEDUCTIONS** | | |
| Deductions from plan assets attributed to: | | |
| Benefits paid to participants | 1,155,907 | 201,133,293 |
| Administrative expenses | 49,536 | 4,454,252 |
| Total deductions | 1,205,443 | 205,587,545 |
| Transfer to other plans | (112,748) | (522,904) |
| Net decrease | (960,744) | (221,712,698) |
| Net assets available for benefits, beginning of year | 12,489,359 | 2,780,210,339 |
| Net assets available for benefits, end of year | $ 11,528,615 | $ 2,558,497,641 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2014**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **ADDITIONS** | | | | | | | |
| Additions to plan assets attributed to: | | | | | | | |
| Investment income (loss) | | | | | | | |
| Plan interest in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 181,245,486 | $ 37,403,915 | $ (4,550,038) | $ 224,438 | $ 416,665 | $ 9,438,901 | $ 290,917 |
| Employer contributions | 250,718,605 | 33,600,000 | 700,000 | 200,000 | 2,700,000 | 100,000 | 100,000 |
| Total additions (deductions) | 431,964,091 | 71,003,915 | (3,850,038) | 424,438 | 3,116,665 | 9,538,901 | 390,917 |
| **DEDUCTIONS** | | | | | | | |
| Deductions from plan assets attributed to: | | | | | | | |
| Benefits paid to participants | 286,188,778 | 86,061,896 | 43,352,068 | 866,285 | 721,427 | 27,110,194 | 685,323 |
| Administrative expenses | 3,002,799 | 646,848 | 530,750 | 40,066 | 105,923 | 154,714 | 52,849 |
| Total deductions | 289,191,577 | 86,708,744 | 43,882,818 | 906,351 | 827,350 | 27,264,908 | 738,172 |
| Transfer from (to) other plans | — | (177) | 16,026,263 | 85,422 | (90,128) | 414,716 | (15,448) |
| Net increase (decrease) | 142,772,514 | (15,705,006) | (31,706,593) | (396,491) | 2,199,187 | (17,311,291) | (362,703) |
| Net assets available for benefits, beginning of year | 1,920,180,685 | 398,210,921 | 123,995,156 | 3,290,106 | 3,514,370 | 105,707,119 | 2,936,014 |
| Net assets available for benefits, end of year | $ 2,062,953,199 | $ 382,505,915 | $ 92,288,563 | $ 2,893,615 | $ 5,713,557 | $ 88,395,828 | $ 2,573,311 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2014**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **ADDITIONS** | | | | | | | |
| Additions to plan assets attributed to: | | | | | | | |
| Investment income | | | | | | | |
| Plan interest in Johnson Controls, Inc. | | | | | | | |
| Master Pension Trust | $ 5,326,529 | $ 2,362,844 | $ 3,089,762 | $ 948,326 | $ 5,711,129 | $ 3,391,183 | $ 5,202,228 |
| Employer contributions | 3,300,000 | — | — | 1,100,000 | 2,200,000 | — | 6,300,000 |
| Total additions | 8,626,529 | 2,362,844 | 3,089,762 | 2,048,326 | 7,911,129 | 3,391,183 | 11,502,228 |
| **DEDUCTIONS** | | | | | | | |
| Deductions from plan assets attributed to: | | | | | | | |
| Benefits paid to participants | 5,049,746 | 2,162,525 | 4,176,532 | 1,323,121 | 2,373,582 | 2,694,350 | 3,299,852 |
| Administrative expenses | 148,513 | 70,557 | 79,149 | 75,029 | 91,002 | 61,256 | 177,692 |
| Total deductions | 5,198,259 | 2,233,082 | 4,255,681 | 1,398,150 | 2,464,584 | 2,755,606 | 3,477,544 |
| Transfer to other plans | (2,647,299) | (1,188,680) | (1,174,181) | (345,870) | (3,713,050) | (1,832,849) | (3,053,562) |
| Net increase (decrease) | 780,971 | (1,058,918) | (2,340,100) | 304,306 | 1,733,495 | (1,197,272) | 4,971,122 |
| Net assets available for benefits, beginning of year | 28,313,902 | 12,308,512 | 20,193,185 | 6,527,932 | 20,778,645 | 16,284,379 | 22,796,833 |
| Net assets available for benefits, end of year | $ 29,094,873 | $ 11,249,594 | $ 17,853,085 | $ 6,832,238 | $ 22,512,140 | $ 15,087,107 | $ 27,767,955 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2014**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **ADDITIONS** | | |
| Additions to plan assets attributed to: | | |
| Investment income | | |
| Plan interest in Johnson Controls, Inc. | | |
| Master Pension Trust | $ 2,548,011 | $ 253,050,296 |
| Employer contributions | 1,100,000 | 302,118,605 |
| Total additions | 3,648,011 | 555,168,901 |
| **DEDUCTIONS** | | |
| Deductions from plan assets attributed to: | | |
| Benefits paid to participants | 2,024,175 | 468,089,854 |
| Administrative expenses | 66,566 | 5,303,713 |
| Total deductions | 2,090,741 | 473,393,567 |
| Transfer from (to) other plans | (1,373,494) | 1,091,663 |
| Net increase | 183,776 | 82,866,997 |
| Net assets available for benefits, beginning of year | 12,305,583 | 2,697,343,342 |
| Net assets available for benefits, end of year | $ 12,489,359 | $ 2,780,210,339 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2015**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | | | | | | |
| Vested benefits | | | | | | | |
| Participants currently receiving payments | $ 462,025,336 | $ 114,479,753 | $ 48,948,154 | $ 1,209,576 | $ 167,883 | $ 44,178,369 | $ 602,504 |
| Other participants | 1,025,761,762 | 137,209,550 | 15,365,052 | 1,006,481 | 3,383,143 | 11,857,063 | 1,007,617 |
| | 1,487,787,098 | 251,689,303 | 64,313,206 | 2,216,057 | 3,551,026 | 56,035,432 | 1,610,121 |
| Nonvested benefits | 76,075,072 | 9,925,360 | 72,686 | 37,416 | 39,932 | 1,015,978 | 101,863 |
| **Total actuarial present value of accumulated plan benefits** | $ 1,563,862,170 | $ 261,614,663 | $ 64,385,892 | $ 2,253,473 | $ 3,590,958 | $ 57,051,410 | $ 1,711,984 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2015**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | | | | | | |
| Vested benefits | | | | | | | |
| Participants currently receiving payments | $ 4,927,530 | $ 2,180,932 | $ 4,637,714 | $ 351,013 | $ 5,178,686 | $ 4,075,794 | $ 4,305,830 |
| Other participants | 15,699,961 | 5,318,491 | 7,351,578 | 4,271,309 | 9,268,607 | 6,919,673 | 14,364,094 |
| | 20,627,491 | 7,499,423 | 11,989,292 | 4,622,322 | 14,447,293 | 10,995,467 | 18,669,924 |
| Nonvested benefits | — | 138,510 | 47,521 | 105,178 | 282,614 | 31,532 | 749,830 |
| **Total actuarial present value of accumulated plan benefits** | $ 20,627,491 | $ 7,637,933 | $ 12,036,813 | $ 4,727,500 | $ 14,729,907 | $ 11,026,999 | $ 19,419,754 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2015**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | |
| Vested benefits | | |
| Participants currently receiving payments | $ 3,298,387 | $ 700,567,461 |
| Other participants | 6,072,128 | 1,264,856,509 |
| | 9,370,515 | 1,965,423,970 |
| Nonvested benefits | 68,273 | 88,691,765 |
| **Total actuarial present value of accumulated plan benefits** | $ 9,438,788 | $ 2,054,115,735 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2014**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | | | | | | |
| Vested benefits | | | | | | | |
| Participants currently receiving payments | $ 537,444,042 | $ 146,744,135 | $ 73,655,646 | $ 1,381,441 | $ 540,581 | $ 56,879,067 | $ 899,674 |
| Other participants | 841,384,123 | 125,935,236 | 14,648,471 | 1,061,236 | 2,694,527 | 12,094,970 | 898,883 |
| | 1,378,828,165 | 272,679,371 | 88,304,117 | 2,442,677 | 3,235,108 | 68,974,037 | 1,798,557 |
| Nonvested benefits | 76,732,224 | 9,290,227 | 87,587 | 32,982 | 50,468 | 1,256,025 | 124,352 |
| **Total actuarial present value of accumulated plan benefits** | $ 1,455,560,389 | $ 281,969,598 | $ 88,391,704 | $ 2,475,659 | $ 3,285,576 | $ 70,230,062 | $ 1,922,909 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2014**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | | | | | | |
| Vested benefits | | | | | | | |
| Participants currently receiving payments | $ 7,215,624 | $ 2,859,832 | $ 6,876,247 | $ 814,286 | $ 6,162,545 | $ 4,851,235 | $ 4,917,669 |
| Other participants | 13,343,074 | 5,031,674 | 6,296,954 | 3,868,924 | 7,537,177 | 6,615,652 | 12,472,872 |
| | 20,558,698 | 7,891,506 | 13,173,201 | 4,683,210 | 13,699,722 | 11,466,887 | 17,390,541 |
| Nonvested benefits | 45,289 | 117,174 | 48,351 | 123,170 | 270,280 | 35,410 | 628,195 |
| **Total actuarial present value of accumulated plan benefits** | $ 20,603,987 | $ 8,008,680 | $ 13,221,552 | $ 4,806,380 | $ 13,970,002 | $ 11,502,297 | $ 18,018,736 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF ACCUMULATED PLAN BENEFITS**
**JANUARY 1, 2014**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **Actuarial present value of accumulated plan benefits:** | | |
| Vested benefits | | |
| Participants currently receiving payments | $ 3,970,514 | $ 855,212,538 |
| Other participants | 5,226,040 | 1,059,109,813 |
| | 9,196,554 | 1,914,322,351 |
| Nonvested benefits | 101,647 | 88,943,381 |
| **Total actuarial present value of accumulated plan benefits** | $ 9,298,201 | $ 2,003,265,732 |

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2015**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 1,455,560,389 | $ 281,969,598 | $ 88,391,704 | $ 2,475,659 | $ 3,285,576 | $ 70,230,062 | $ 1,922,909 |
| Increase (decrease) attributed to: | | | | | | | |
| Interest accumulation | 105,217,507 | 19,181,318 | 5,370,614 | 164,068 | 234,544 | 4,554,859 | 126,947 |
| Benefits paid | (286,188,778) | (86,061,896) | (43,352,068) | (866,285) | (721,427) | (27,110,194) | (685,323) |
| Assumption changes | 182,249,005 | 21,662,379 | 5,189,849 | 255,842 | 405,941 | 4,021,496 | 201,495 |
| Plan amendments | — | 126,515 | — | — | 55,193 | — | — |
| Other* | 107,024,047 | 24,736,749 | 8,785,793 | 224,189 | 331,131 | 5,355,187 | 145,956 |
| Net increase (decrease) | 108,301,781 | (20,354,935) | (24,005,812) | (222,186) | 305,382 | (13,178,652) | (210,925) |
| **Actuarial present value of accumulated plan benefits at January 1, 2015** | $ 1,563,862,170 | $ 261,614,663 | $ 64,385,892 | $ 2,253,473 | $ 3,590,958 | $ 57,051,410 | $ 1,711,984 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2015**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 20,603,987 | $ 8,008,680 | $ 13,221,552 | $ 4,806,380 | $ 13,970,002 | $ 11,502,297 | $ 18,018,736 |
| Increase (decrease) attributed to: | | | | | | | |
| Interest accumulation | 1,450,215 | 555,857 | 893,877 | 332,604 | 1,024,483 | 814,483 | 1,312,044 |
| Benefits paid | (5,049,746) | (2,162,525) | (4,176,532) | (1,323,121) | (2,373,582) | (2,694,350) | (3,299,852) |
| Assumption changes | 1,949,980 | 816,855 | 1,389,793 | 498,198 | 1,214,228 | 1,217,905 | 1,865,719 |
| Plan amendments | — | — | — | — | 474,973 | — | — |
| Other* | 1,673,055 | 419,066 | 708,123 | 413,439 | 419,803 | 186,664 | 1,523,107 |
| Net increase (decrease) | 23,504 | (370,747) | (1,184,739) | (78,880) | 759,905 | (475,298) | 1,401,018 |
| **Actuarial present value of accumulated plan benefits at January 1, 2015** | $ 20,627,491 | $ 7,637,933 | $ 12,036,813 | $ 4,727,500 | $ 14,729,907 | $ 11,026,999 | $ 19,419,754 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2015**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 9,298,201 | $ 2,003,265,732 |
| Increase (decrease) attributed to: | | |
| Interest accumulation | 664,447 | 141,897,867 |
| Benefits paid | (2,024,175) | (468,089,854) |
| Assumption changes | 1,038,565 | 223,977,250 |
| Plan amendments | — | 656,681 |
| Other* | 461,750 | 152,408,059 |
| Net increase | 140,587 | 50,850,003 |
| **Actuarial present value of accumulated plan benefits at January 1, 2015** | $ 9,438,788 | $ 2,054,115,735 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2014**

| | Johnson Controls Pension (001) | Battery Division Hourly (016) | Johnson Controls Production (017) | Techno Trim (046) | ASG Production (006) | York Plan 4 (018) | York Plan 6 (019) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2013** | $ 1,680,800,016 | $ 275,098,247 | $ 110,746,161 | $ 3,210,963 | $ 4,759,998 | $ 78,609,974 | $ 2,236,562 |
| Increase (decrease) attributed to: | | | | | | | |
| Interest accumulation | 114,911,948 | 20,095,706 | 6,790,552 | 204,586 | 193,025 | 5,721,619 | 143,947 |
| Benefits paid | (498,389,300) | (48,741,520) | (52,743,198) | (1,332,928) | (4,786,453) | (14,457,602) | (891,589) |
| Assumption changes | (39,701,360) | (2,044,835) | 414,499 | (69,867) | 5,400 | (736,299) | 3,630 |
| Plan amendments | 626,787 | 17,250,620 | 1,745,018 | 3,400 | 340,087 | 12,141 | 139,189 |
| Other* | 197,312,298 | 20,311,380 | 21,438,672 | 459,505 | 2,773,519 | 1,080,229 | 291,170 |
| Net increase (decrease) | (225,239,627) | 6,871,351 | (22,354,457) | (735,304) | (1,474,422) | (8,379,912) | (313,653) |
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 1,455,560,389 | $ 281,969,598 | $ 88,391,704 | $ 2,475,659 | $ 3,285,576 | $ 70,230,062 | $ 1,922,909 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2014**

| | York Plan 7 (020) | York Plan 12 (023) | York Plan 13 (024) | York Plan 14 (025) | York Plan 15 (026) | York Plan 18 (028) | York Plan 19 (029) |
|---|---|---|---|---|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2013** | $ 21,193,646 | $ 8,472,955 | $ 13,459,581 | $ 4,853,100 | $ 13,652,495 | $ 11,756,350 | $ 16,088,353 |
| Increase (decrease) attributed to: | | | | | | | |
| Interest accumulation | 1,414,120 | 582,601 | 941,267 | 318,308 | 1,012,947 | 812,202 | 1,144,296 |
| Benefits paid | (7,172,283) | (2,427,591) | (3,453,936) | (1,782,791) | (2,020,188) | (3,270,576) | (3,639,314) |
| Assumption changes | 32,596 | 13,741 | 21,894 | 7,888 | 54,964 | 17,462 | 664,958 |
| Plan amendments | 1,624,345 | 681,433 | 869,032 | 532,961 | 266,715 | 945,720 | 1,562,000 |
| Other* | 3,511,563 | 685,541 | 1,383,714 | 876,914 | 1,003,069 | 1,241,139 | 2,198,443 |
| Net increase (decrease) | (589,659) | (464,275) | (238,029) | (46,720) | 317,507 | (254,053) | 1,930,383 |
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 20,603,987 | $ 8,008,680 | $ 13,221,552 | $ 4,806,380 | $ 13,970,002 | $ 11,502,297 | $ 18,018,736 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

**JOHNSON CONTROLS, INC. PENSION PLANS**
**STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS**
**YEAR ENDED JANUARY 1, 2014**

| | York Plan 23 (031) | Participating Plans' Total |
|---|---|---|
| **Actuarial present value of accumulated plan benefits at January 1, 2013** | $ 8,865,056 | $ 2,253,803,457 |
| Increase (decrease) attributed to: | | |
| Interest accumulation | 620,951 | 154,908,075 |
| Benefits paid | (2,249,618) | (647,358,887) |
| Assumption changes | 14,938 | (41,300,391) |
| Plan amendments | 675,612 | 27,275,060 |
| Other* | 1,371,262 | 255,938,418 |
| Net increase (decrease) | 433,145 | (250,537,725) |
| **Actuarial present value of accumulated plan benefits at January 1, 2014** | $ 9,298,201 | $ 2,003,265,732 |

*The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefits accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements

## NOTE 1 - DESCRIPTION OF PLANS

The following description of Johnson Controls, Inc. Pension Plans (the "Plans") provides only general information. Participants should refer to the Summary Plan Description provided to all participants for a more complete description of the Plans' provisions.

GENERAL

The Plans are defined benefit pension plans that cover eligible employees of Johnson Controls, Inc. and designated affiliates (the "Company"). The Plans are subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Plans are administered by the Employee Benefit Policy Committee appointed by the Company. The Company has contracted with Aon Hewitt for plan administration.

Plans included in the financial statements are as follows (Plan numbers indicate Johnson Controls, Inc. Master Pension Trust ("Master Trust") account numbers, not Plan numbers filed with the Internal Revenue Service ("IRS")).

| Name of Plan | Eligible Employees (Subject to Other Plan Requirements) |
|---|---|
| Johnson Controls Pension Plan<br>(Johnson Controls Pension - Plan 001) | Salaried, nonunion production employees and certain hourly union employees (whose labor agreements call for their participation in this plan) of Johnson Controls, Inc. and some of its affiliated companies; Vintec employees who were members of the Vintec Pension Plan and employees of York International Corporation who were members of York International Pension Plan No. 1; Union production employees of the Company's Shelbyville, Kentucky plant who were members of the Johnson Controls Pension Plan/ASG Shelbyville Production Employees |
| Johnson Controls Pension Plan<br>Battery Division Hourly Employees<br>(Battery Division Hourly - Plan 016) | Power Solutions union hourly employees, whose labor agreements call for their participation in this plan (excludes former union hourly employees who were covered by the Johnson Controls Pension Plan Battery Division/ Owosso UAW) |
| Johnson Controls Production Pension Plan - Formerly known as Johnson Controls Pension Division Owosso UAW Employees<br>(Johnson Controls Production 017) | The following union employees are covered by this plan: Hourly employees of the Company's Power Solutions business Owosso, Michigan plant; Building Efficiency plant in Lexington, Kentucky; Hoover's Automotive Systems Group's Adrian, Michigan, Chester, Pennsylvania, and Vincennes, Indiana plants, Whitmore Lake, Michigan plant; Hoover's Engineered Plastics Division Erie, Pennsylvania plant; Production employees of the Company's Milwaukee, Wisconsin production facilities, except production employees of the Company's Power Solutions business, who are covered by another defined benefit pension plan; Production hourly employees of the Company's Building Efficiency business Goshen, Indiana plant; Production hourly employees of the Company's Building Efficiency business Watertown, Wisconsin plant; Union hourly production and maintenance employees of the Mt. Clemens, Michigan facility; Union hourly production and maintenance employees of the Plymouth, Michigan seating facility; Hourly employees of Hoover's Automotive Systems Group, Oberlin, Ohio plant; Hourly employees of Hoover's Automotive Systems Group, Johns Creek, Georgia plant; Union and nonunion hourly employees of the Madisonville, Kentucky and Medina, Ohio plants; Elyria and Miller Picking for employees represented by the United Steelworkers plants; Hourly employees of Hoover's Automotive Systems Group Caidz, Kentucky plant; Hourly employees of Hoover's Automotive Systems Group Greenfield, Ohio plant; and Union production employees of the Company's West Carrolton, Ohio plant<br><br>All of the above groups are closed facilities of the Company. The plans covering these former employees were all subsequently merged into this plan. |

| Name of Plan | Eligible Employees (Subject to Other Plan Requirements) |
|---|---|
| Techno Trim, Inc. Pension Plan for Salaried Employees (Techno Trim - Plan 046) | Salaried employees of TechnoTrim |
| Johnson Controls Automotive Systems Group Production Employees Pension Plan (ASG Production - Plan 018) | Union hourly employees of the Battle Creek, Michigan; Oklahoma City, Oklahoma; Earth City, Missouri; Shreveport, Louisiana and Kansas City, KS plants (Oklahoma City, Earth City and Shreveport plants are closed) |
| York International Corporation Pension Plan Number Four (UAW) (York Plan 4 - Plan 018) | Employees at the Company's York, PA location who are subject to the terms and conditions of the Collective Bargaining Agreement between the Company and the International Union, United Automobile, Aerospace, and Agricultural Implement Workers of America, UAW and Local Union No. 1872 (Grantley plant) |
| York International Corporation Pension Plan Number Six (Field Wage) (York Plan 6 - Plan 019) | Certain nonunion hourly field wage employees of the Engineered Systems Division |
| York International Corporation Pension Plan Number Seven (Norman Plant) (York Plan 7 - Plan 020) | Nonunion hourly employees of the Norman, Oklahoma plant |
| York International Corporation Pension Plan Number Twelve (York Plan 12 - Plan 023) | Nonunion employees of the Frigid Coil East division, (E. York, PA), Tempmaster and former salaried employees of the Portland, Oregon and Salisbury, Maryland facilities |
| York International Corporation Pension Plan Number Thirteen (York Plan 13 - Plan 024) | Salaried and non-bargaining hourly employees in the Frigid Coil West, Imeco and Frick (Waynesboro, PA) divisions |
| York International Corporation Pension Plan Number Fourteen (York Plan 14 - Plan 025) | Salaried and nonunion hourly employees at the Engineered Systems and the San Antonio, Texas plants |
| York International Corporation Pension Plan Number Fifteen (York Plan 15 - Plan 026) | Union hourly employees of the Frick Waynesboro, PA location |
| York International Corporation Pension Plan Number Eighteen (York Plan 18 - Plan 028) | Salaried employees at the Company's Wichita, KS location (formerly York Evcon) |
| York International Corporation Pension Plan Number Nineteen (York Plan 19 - Plan 029) | Union hourly employees at the Wichita, KS location (formerly Evcon Industries, Inc.) including employees covered by the Collective Bargaining Agreement with the International Association of Machinists and Aerospace Workers AFL-CIO District 70, Local 2799 |
| York International Corporation Miller-Picking Pension Plan (York Plan 23 - Plan 031) | Nonunion employees of the Miller-Picking Hattiesburg, MS and Johnstown, PA locations |

VESTING

Vesting is measured either by the hours of service or by elapsed time. The method used depends on the specific provision in each pension plan. Generally, after 5 years of vesting service, under either method, the employee's pension is 100% vested.

FUNDING POLICY

The Company's funding policy is to make contributions to the Plans in amounts that meet or exceed the minimum amounts required by ERISA. The Company's contributions for the years ended December 31, 2015 and 2014 met or exceeded the ERISA required minimum amounts.

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

ADMINISTRATIVE EXPENSES

Administrative expenses are paid by the Plans, as allowed by the Plans' provisions, with all remaining expenses paid by the Company.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### BASIS OF PRESENTATION

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

### USE OF ESTIMATES

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

### JOHNSON CONTROLS MASTER PENSION TRUST

The Company has entered into a master trust agreement with U.S. Bank, N.A. (the "Trustee"). Under the agreement, the Plans participate under a master trust arrangement whereby all the assets of the Plans are pooled and invested in one or more investment accounts.

The Master Trust holds investments in short-term securities, U.S. government securities, bonds, mutual and pooled equity funds, and common stocks as of December 31, 2015 and 2014.

The Company requires collateral at a minimum of 102% of the value of any securities lending transactions.

Each plan's interest in the investments of the Master Trust is evidenced by units of participation, as no plan has a right, title or ownership of any of the specific assets in the Master Trust. In accordance with the master trust agreement, net investment income or loss of the Master Trust is prorated to each participating plan in proportion to the number of units held by each plan. Plan participation in the Master Trust is adjusted as required to reflect benefit payments to the Plans' participants and for Company contributions.

The following represents the percentage interest in the Master Trust by plan:

| | December 31, | |
|---|---|---|
| | 2015 | 2014 |
| Johnson Controls Pension (001) | 74.0% | 72.9% |
| Battery Division Hourly (016) | 13.6% | 14.0% |
| Johnson Controls Production (017) | 3.3% | 3.7% |
| Techno Trim (046) | 0.1% | 0.1% |
| ASG Production (006) | 0.2% | 0.1% |
| JCIM US, LLC (035)* | 0.3% | 0.3% |
| York Plan 4 (018) | 3.1% | 3.6% |
| York Plan 6 (019) | 0.1% | 0.1% |
| York Plan 7 (020) | 1.1% | 1.0% |
| York Plan 12 (023) | 0.4% | 0.5% |
| York Plan 13 (024) | 0.7% | 0.7% |
| York Plan 14 (025) | 0.3% | 0.2% |
| York Plan 15 (026) | 0.9% | 0.8% |
| York Plan 18 (028) | 0.5% | 0.6% |
| York Plan 19 (029) | 1% | 0.9% |
| York Plan 23 (031) | 0.4% | 0.5% |
| Total | 100.0% | 100.0% |

*The JCIM US, LLC plan, which is included in the Master Trust, has a June 30 year end. As such, a separate report is prepared for each plan year.

The statements of financial position as of December 31, 2015 and 2014 and the statement of operations and changes in Participating Plans' equity of the Master Trust for the year ended December 31, 2015 are presented in Note 9.

NEW ACCOUNTING PRONOUNCEMENTS

In July 2015, the FASB issued ASU 2015-12 “Plan Accounting: Defined Benefit Pension Plans (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 2015-12”). Only Part II of ASU 2015-12 is applicable to the Plan. Part II of ASU 2015-12 eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. It also simplifies the level of disaggregation of investments that are measured using fair value. Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to also disaggregate investments by nature, characteristics, and risks. ASU 2015-12 is effective for fiscal years beginning after December 15, 2015. Plans may early adopt any of the three parts and Parts I and II are to be applied retrospectively. The Plan elected early adoption of Part II of ASU 2015-12.

DATE OF MANAGEMENT'S REVIEW

Management has evaluated subsequent events, shown in Note 11, through October 13, 2016, the date which the financial statements were available to be issued.

## NOTE 3 - INVESTMENTS

Assets of the Plans, with the exception of accrued administrative expenses as shown in the statements of net assets available for benefits, investment income as shown in the statements of changes in net assets available for benefits, and the Master Trust financial information appearing in Note 9, have been derived from information prepared and certified as complete and accurate by the

Trustee, in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

## NOTE 4 - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments that are attributable under the Plans' benefit provisions based on employees' years of service. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits. The actuarial present value of accumulated plan benefits is determined by an actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment. The actuarial assumptions used for the January 1, 2015 and 2014 valuations are based on the Standard Unit Credit Cost Method for all Plans. The current actuarial assumptions are based on the presumption that the Plans will continue. If the Plans were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The actuarial present value of accumulated plan benefits is determined by Aon Hewitt.

The significant actuarial assumptions used in the valuations at January 1, 2015 and 2014 were as follows:

| Description | Assumption | |
|---|---|---|
| Retirement Age | Varies based on the probability of retirement social security retirement age of 65 to 67, with 100% at age 70. | |
| Mortality Rates | 2015: 2015 Static Mortality Table for annuitants and non-annuitants.<br>2014: 2014 Static Mortality Table for annuitants and non-annuitants. | |
| Withdrawal Rates | A graduated scale from higher to lower as years of service increase. | |
| Disability Rates | A graduated scale from lower to higher as age advances. | |
| Interest Rates | 2015:<br>Based on segment rates with a four month lookback (as of September 2014), as follows:<br>1st Segment Rate - 4.72%<br>2nd Segment Rate - 6.11%<br>3rd Segment Rate - 6.81% | 2014:<br>Based on segment rates with a four month lookback (as of September 2013), as follows:<br>1st Segment Rate - 4.99%<br>2nd Segment Rate - 6.32%<br>3rd Segment Rate - 6.99% |

## NOTE 5 - TAX STATUS

The Company has received favorable determination letters from the IRS as to the qualified status of the Plans under the Internal Revenue Code ("IRC") and these plans are, therefore, exempt from federal income taxes. Some of the Plans have been amended since receiving the determination letters. However, the Plan administrator believes that all the Plans are currently designed and being operated in compliance with applicable requirements of the IRC.

U.S. GAAP requires the Plans' management to evaluate tax positions taken by the Plans and recognize a tax liability if the Company has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS or Department of Labor. The plan administrator has analyzed the tax positions taken by the Plans, 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 disclosure in the financial statements. The Plans are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

## NOTE 6 - PLAN TERMINATION

The Company anticipates and believes the Plans will continue without interruption but reserves the right to discontinue any plan at any time in accordance with the respective plan provisions and provisions set forth in ERISA. In the event of a plan termination or permanent discontinuance of contributions to a plan, the assets of the plan will be distributed in accordance with the requirements of 29 CFR 4044 of ERISA.

Certain benefits under the Plans are insured by the Pension Benefit Guaranty Corporation ("PBGC"), a U.S. government agency, in the event of Plan termination. The net assets of the Plans will be allocated as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Benefits attributable to employee contributions, taking into account those paid out before termination.
2. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plans. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
3. Other vested benefits insured by the PBGC up to the applicable limitations.
4. All other vested benefits (not insured by the PBGC).
5. All non-vested benefits.

Certain benefits under the Plans are insured by the PBGC if the Plans terminate. 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 Plans, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plans are guaranteed at the level in effect on the date of the Plans' termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2016, that ceiling is $5,011 per month. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). For younger annuitants, or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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

## NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Transactions involving the account administered by the Trustee and the funds of the investment managers for the Plans are considered party-in-interest transactions. These transactions are not, however, considered prohibited transactions under 29 CFR 408(b) of the ERISA regulations.

## NOTE 8 - RISKS AND UNCERTAINTIES

The Plans' investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the values of investments, it is at least reasonably possible that changes in risks in the near term would materially affect the amounts reported in the statements of net assets available for benefits and the statements of changes in net assets available for benefits.

The actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to interest rates, inflation rates and employee compensation and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term and due to the uncertainties inherent in setting assumptions, that the effect of such changes could be material to the value of accumulated plan benefits.

## NOTE 9 - JOHNSON CONTROLS MASTER PENSION TRUST

The statements of financial position as of December 31, 2015 and 2014 and the statement of operations and changes in participating Plans' equity for the year ended December 31, 2015 for the Master Trust are presented in the following tables:

**JOHNSON CONTROLS MASTER PENSION TRUST**
**STATEMENTS OF FINANCIAL POSITION**

| | December 31, | |
|---|---|---|
| | **2015** | **2014** |
| **Assets** | | |
| Fixed Income Fund: | | |
| Cash & cash equivalents | $ 97,617,160 | $ 80,382,583 |
| U.S. government and federal agency securities | 85,076,995 | 107,296,837 |
| Corporate issues | 507,678,409 | 553,646,619 |
| Municipal issues | 43,750,014 | 51,106,927 |
| Foreign issues | 122,903,979 | 139,426,976 |
| Other - Fixed Income | 192,510,955 | 185,528,634 |
| Total fixed income fund | 1,049,537,512 | 1,117,388,576 |
| Equity Investments: | | |
| Domestic stocks | 921,272,793 | 826,670,883 |
| Foreign stocks | 282,890,105 | 243,438,385 |
| Total equity investments | 1,204,162,898 | 1,070,109,268 |
| Investment in real estate | 330,638,682 | 299,153,908 |
| Hedge fund | — | 3,586,994 |
| Due from brokers for securities sold | 51,128,290 | 48,604,835 |
| Accrued dividends and interest receivable | 11,322,587 | 12,048,752 |
| | $ 2,646,789,969 | $ 2,550,892,333 |
| **Liabilities and Participating Plans' Equity** | | |
| Due to brokers for securities purchased | $ 82,704,837 | $ 64,181,245 |
| Participating Plans' equity | 2,556,687,477 | 2,478,584,058 |
| JCIM US, LLC Pension Plan's equity* | 7,397,655 | 8,127,030 |
| Total equity | 2,564,085,132 | 2,486,711,088 |
| | $ 2,646,789,969 | $ 2,550,892,333 |

*The JCIM US, LLC plan, which is included in the Master Trust, has a June 30 year end. As such, a separate report is prepared for each plan year.

**JOHNSON CONTROLS MASTER PENSION TRUST**
**STATEMENT OF OPERATIONS AND CHANGES IN PARTICIPATING PLANS' EQUITY**

| | Year Ended December 31, 2015 |
|---|---|
| Investment income (loss): | |
| Interest and dividends | $ 74,608,914 |
| Net loss on equity investments | (136,641,077) |
| Net loss on hedge fund | (1,160,983) |
| Net gain on real estate | 44,565,505 |
| | (18,627,641) |
| Contributions received from participating Plans | 302,318,605 |
| Total increases | 283,690,964 |
| Withdrawals by participating plans for benefit payments, asset transfers and plan expenses | 201,133,293 |
| Administrative expenses | 4,454,252 |
| Total decreases | 205,587,545 |
| Net increase in participating Plans' equity | 78,103,419 |
| Participating Plans' equity | |
| Beginning of year | 2,478,584,058 |
| End of year | $ 2,556,687,477 |

## NOTE 10 - FAIR VALUE MEASUREMENTS

Accounting Standards Codification (ASC) 820, "Fair Value Measurement," defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. ASC 820 also establishes a three-level fair value hierarchy that prioritizes information used in developing assumptions when pricing an asset or liability as follows:

Level 1: Observable inputs such as quoted prices in active markets;
Level 2: Inputs, other than quoted prices in active markets, that are observable either directly or indirectly; and
Level 3: Unobservable inputs where there is little or no market data, which requires the reporting entity to develop its own assumptions.

ASC 820 requires the use of observable market data, when available, in making fair value measurements. When inputs used to measure fair value fall within different levels of the hierarchy, the level within which the fair value measurement is categorized is based on the lowest level input that is significant to the fair value measurement.

The following table sets forth by level, within the fair value hierarchy, the Master Trust's assets at fair value as of December 31, 2015 and 2014:

| | Assets at Fair Value as of December 31, 2015 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Fixed Income Fund | $ 857,026,557 | $ 192,510,955 | $ — | $ 1,049,537,512 |
| Equity Investments | 1,204,162,898 | — | — | 1,204,162,898 |
| Investment in Real Estate | — | — | 330,638,682 | 330,638,682 |
| Total assets at fair value | $ 2,061,189,455 | $ 192,510,955 | $ 330,638,682 | $ 2,584,339,092 |

| | Assets at Fair Value as of December 31, 2014 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Fixed Income Fund | $ 931,859,942 | $ 185,528,634 | $ — | $ 1,117,388,576 |
| Equity Investments | 1,070,109,268 | — | — | 1,070,109,268 |
| Investment in Real Estate | — | — | 299,153,908 | 299,153,908 |
| Hedge Fund | — | — | 3,586,994 | 3,586,994 |
| Total assets at fair value | $ 2,001,969,210 | $ 185,528,634 | $ 302,740,902 | $ 2,490,238,746 |

Following is a description of the valuation methodologies used for assets measured at fair value:

*Fixed Income Fund:* The fair value for the fixed income securities is determined by direct or indirect quoted market prices. If the direct quoted market prices are utilized, the securities publish daily their net asset value (NAV) after the close of trading on regulated financial exchanges. The NAV represents the current market value of the fund's holdings after deducting the fund's liabilities. If the indirect quoted market prices are utilized, the value of assets held in separate accounts is not published, but the investment managers report daily the underlying holdings. The underlying holdings are direct quoted market prices on regulated financial exchanges.

*Equity Investments:* The fair value for the equity investments is determined by direct or indirect quoted market prices. If the indirect quoted market prices are utilized, the value of assets held in separate accounts is not published, but the investment managers report daily the underlying holdings. The underlying holdings are direct quoted market prices on regulated financial exchanges.

*Investments in Real Estate:* The fair value of investments in real estate is deemed Level 3 since these investments do not have a readily determinable fair value and requires the fund managers independently to arrive at fair value by calculating NAV per share. In order to calculate NAV per share, the fund managers value the real estate investments using any one, or a combination of, the following methods: independent third party appraisals, discounted cash flow analysis of net cash flows projected to be generated by the investment and recent sales of comparable investments. Assumptions used to revalue the properties are updated every quarter. Due to the fact that the fund managers calculate NAV per share, the Company utilizes a practical expedient for measuring the fair value of its Level 3 real-estate investments, as provided for under ASC 820, "Fair Value Measurement". In applying the practical expedient, the Company is not required to further adjust the NAV provided by the fund manager in order to determine the fair value of its investment as the NAV per share is calculated in a manner consistent with the measurement principles of Topic 946, "Financial Services - Investment Companies," and as of the Company's measurement date. The Company believes this is an appropriate methodology to obtain the fair value of these assets. For the component of the real estate portfolio under development, the investments are carried at cost until they are completed and valued by a third party appraiser.

*Hedge Fund:* The fair value of the hedge funds is accounted for by a custodian. The custodian obtains valuations from underlying managers based on market quotes for the most liquid assets and alternative methods for assets that do not have sufficient trading activity to derive prices. The Company and custodian review the methods used by the underlying managers to value the assets. The Company believes that the appropriate methodology is used to obtain valuations that

are as close as possible to the fair value of the assets. Significant increases (decreases) in any of these inputs in isolation would result in a significantly lower (higher) fair value measurement.

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 Plans believe the valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The fair values of other assets and liabilities approximate their carrying values.

The table below sets forth a summary of changes in the fair value of the Master Trust's Level 3 assets for the years ended December 31, 2015 and 2014:

| | Level 3 Assets Year Ended December 31, 2015 | |
|---|---|---|
| | Investment in Hedge Fund | Investment in Real Estate |
| Balance, January 1, 2015 | $ 3,586,994 | $ 299,153,908 |
| Purchases and redemptions | (2,426,011) | (13,080,731) |
| Unrealized gains (losses) | (289,627) | 21,623,460 |
| Realized gains (losses) | (871,356) | 22,942,045 |
| Balance, December 31, 2015 | $ — | $ 330,638,682 |

| | Level 3 Assets Year Ended December 31, 2014 | |
|---|---|---|
| | Investment in Hedge Fund | Investment in Real Estate |
| Balance, January 1, 2014 | $ 17,532,448 | $ 274,427,959 |
| Purchases and redemptions | (14,228,881) | (25,232,800) |
| Unrealized gains | 125,154 | 25,076,189 |
| Realized gains | 158,273 | 24,882,560 |
| Balance, December 31, 2014 | $ 3,586,994 | $ 299,153,908 |

**NOTE 11 - SUBSEQUENT EVENTS**

After December 31, 2015, but on or before September 15, 2016, the Company made discretionary contributions totaling $2,350,000 for the 2015 plan year in accordance with the Company's funding policy to the Plans listed below. The distributive share as a percentage of total plan assets is:

| | Contribution Amount | Percentage of Total Assets |
|---|---|---|
| Techno Trim | $ 175,000 | 6% |
| ASG Production | 25,000 | <1% |
| York Plan 7 | 1,275,000 | 4% |
| York Plan 12 | 50,000 | <1% |
| York Plan 14 | 275,000 | 4% |
| York Plan 15 | 100,000 | <1% |
| York Plan 19 | 125,000 | <1% |
| York Plan 23 | 325,000 | 3% |
| | $ 2,350,000 | |

# SUPPLEMENTAL SCHEDULES

**JOHNSON CONTROLS, INC. PENSION PLANS**
**SCHEDULE H, 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**JOHNSON CONTROLS MASTER PENSION TRUST**
**PLAN #024, EIN: 39-0380010**
**DECEMBER 31, 2015**

| (a) | (b) Identity of Issue, Borrower, Lessor or Similar Party | (c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| * | U.S. Bank | Baird Fixed Income | $ 315,752,914 | $ 404,851,570 |
| * | U.S. Bank | Columbus | 65,041,754 | 123,149,881 |
| * | U.S. Bank | Thompson, Siegel & Walmsley LLC | 63,694,431 | 111,784,772 |
| * | U.S. Bank | Dodge & Cox | 206,792,656 | 234,526,018 |
| * | U.S. Bank | Prudential | 281,963,903 | 419,185,042 |
| * | U.S. Bank | Prudential 90 | 84,534,135 | 85,772,234 |
| * | U.S. Bank | PIMCO | 83,805,768 | 83,703,407 |
| * | U.S. Bank | Cash Fund | 26,606,161 | 26,627,961 |
| * | U.S. Bank | JP Morgan Enchd Index | 189,016,008 | 250,487,943 |
| * | U.S. Bank | JP Morgan 500 Index | 169,825,547 | 243,276,801 |
| * | U.S. Bank | Rockwood IX | 39,107,289 | 47,681,708 |
| * | U.S. Bank | Rockwood Capital | 5,986,381 | 15,189,888 |
| * | U.S. Bank | Morgan Stanley | 70,175,840 | 139,017,579 |
| * | U.S. Bank | Invesco | 75,214,739 | 128,749,507 |
| * | U.S. Bank | Mfs | 220,554,154 | 250,080,821 |
| | Total investments | | $ 1,898,071,680 | $ 2,564,085,132 |

* Represents a party-in-interest

**JOHNSON CONTROLS, INC. PENSION PLANS**
**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS**
**JOHNSON CONTROLS MASTER PENSION TRUST**
**PLAN #024, EIN: 39-0380010**
**YEAR ENDED DECEMBER 31, 2015**

| (a) Identity of Party Involved | (b) Description of Asset | (c) Purchase Price | (d) Selling Price | (g) Cost of Asset | (h) Current Value of Asset on Transaction Date | (i) Net Gain (Loss) |
|---|---|---|---|---|---|---|
| **Series of Transactions** | | | | | | |
| U.S. Bank | JP Morgan Enhcd Index | 126,508,568 | — | 126,508,568 | 126,508,568 | — |
| U.S. Bank | JP Morgan Enhcd Index | — | 17,508,568 | 13,138,301 | 17,508,568 | 4,370,267 |
| U.S. Bank | JP Morgan 500 Index | 105,807,401 | — | 105,807,401 | 105,807,401 | — |
| U.S. Bank | JP Morgan 500 Index | — | 151,807,402 | 87,296,120 | 151,807,402 | 64,511,282 |
| U.S. Bank | Cash Fund | 497,326,872 | — | 497,326,872 | 497,326,872 | — |
| U.S. Bank | Cash Fund | — | 524,506,152 | 524,856,935 | 524,506,152 | (350,783) |

# Schedule SB Attachment (Form 5500)—2015 Plan Year
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

## Schedule SB, Part V—Summary of Plan Provisions

Effective Date

December 29, 1943.

Status of Plan

Ongoing.

| Group Name | Status of Plan |
|---|---|
| Florence | Closed to hires on or after 3/3/2013 |
| Fort Wayne | Closed to hires on or after 1/13/2014 |
| Geneva | Closed to hires on or after 1/1/2012 |
| Middletown | DAP Union 831—Closed to hires on or after 6/30/2014. Otherwise open. |
| Portland | Closed to hires on or after 2/16/2013 |
| St. Joseph | Closed to hires on or after 7/17/2012 |
| Tampa | Closed to hires on or after 5/6/2013 |
| Toledo | Open |
| Winston Salem | Closed to hires on or after 8/8/2013 |

Participation

Hourly-paid employees.

Normal Retirement

Eligibility

Age 65 and five years of vesting service.

Benefit

1% of average monthly compensation times benefit service. The normal retirement benefit is subject to minimums ranging from $28.00 times benefit service to $48.00 times benefit service depending on employee group. Minimum benefit eligibility is age 62 and 10 years of vesting service (or age 65 and five years of vesting service) for Geneva employees and age 55 and 10 years of vesting service (or age 65 and five years of vesting service) for all other employees.

Early Retirement

Eligibility

Age 55 and 10 years of vesting service.

Benefit

Accrued benefit reduced 5% per year from age 65 (age 62 if 10 years of vesting service).

Deferred Vested

Eligibility

Five years of vesting service.

Benefit

Accrued benefit reduced 5% per year from age 65.

| | |
|---|---|
| **Supplemental Allowance** | |
| Eligibility | Participants who retire at age 62 with 10 years of vesting service at Portland, Tampa, Toledo, St. Joseph, Winston-Salem, and Florence locations. |
| Benefit | $5 for Toledo employees hired after July 1, 2011, $10 for Toledo employees hired on or before July 1, 2011, $10 for St. Joseph, Florence, and Geneva employees, $11 for Tampa employees, $12 for Winston-Salem employees, and $13 for Portland employees for each year of service payable monthly until age 65. |
| **Total and Permanent Disability Retirement** | |
| Eligibility | Age 55 and 30 years of benefit service (UAW groups only). |
| Benefit | Accrued benefit payable immediately. |
| **Preretirement Surviving Spouse Benefit** | |
| Eligibility | Five years of service. |
| Benefit | |
| Early Retirement Eligible | 50% (55% for UAW groups if death after age 55 with 10 years of vesting service) of the benefit the participant was entitled to receive under the early retirement provisions had he terminated employment as of the date of death. This benefit is payable for the life of the spouse. |
| Not Early Retirement Eligible | 50% of the benefit to which the participant was entitled under the plan provisions had the participant terminated employment on the date of death, survived to his earliest retirement age, and begun to receive an immediate life annuity at his early retirement date. |
| **Other Benefits** | |
| Eligibility | Payable upon death of retiree receiving normal or early retirement benefits. |
| Benefit | $1,500 to $6,000 lump sum, depending on location. |
| **Form of Payment** | |
| Normal | Single life annuity payable monthly, but for married participants, unless elected otherwise, there is in effect an automatic 50% joint and survivor option on an actuarially equivalent basis. |
| Optional | 100%, 75%, or 50% joint and survivor annuity, single life annuity, or lump sum. |

| | |
|---|---|
| Optional Payment Form | |
| Conversion Interest Rate | |
| Non-Lump Sums | 6.00%. |
| Lump Sums | 417(e) interest rate (August lookback). |
| Conversion Mortality | |
| Non-Lump Sums | 1971 Group Annuity Mortality Table weighted 70% male 30% female. |
| Lump Sums | 417(e) mortality table. |
| Lump Sum Form of Payment | |
| Retirement Eligible Participant | The actuarial equivalent of the benefit payable as a life annuity, including early retirement subsidies. |
| Nonretirement Eligible Participant | The actuarial equivalent of the benefit payable as a life annuity, excluding early retirement subsidies. The lump sum is only available after the participant reaches commencement eligibility. |
| Definitions | |
| Vesting Service | All service after date of hire. |
| Benefit Service | Service while a participant. |
| Compensation | Earnings considered “wages” for federal income tax withholding purposes excluding LTD benefits, reimbursed expenses, and pension contributions. |
| Average Monthly Compensation | Compensation for the highest five plan years out of the last 10, divided by 60. |

## Plan Changes Since the January 1, 2014 Valuation

The January 1, 2015 funding valuation reflects the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $260,000 in 2014 to $265,000 in 2015.
- An update to the mortality for determining minimum lump sum payments under IRC section 417(e)(3) to the applicable rates for the current plan year.
- For participants at the Fort Wayne location:
  - Plan closed to employees hired on or after January 13, 2014.
- For participants at the Middletown location, DAP Union 831:
  - Plan closed to employees hired, rehired, or transferred in on or after June 30, 2014.

- For participants at the Toledo location:
  - The minimum benefit multiplier was increased from $45.50 to $46.50 as of May 1, 2015 for Tier 1 employees (employees hired on or before July 1, 2011).
  - The minimum benefit multiplier was increased from $35.50 to $36.50 as of May 1, 2015 for Tier 2 employees (employees hired after July 1, 2011).

## Plan Changes Since the January 1, 2013 Valuation

The January 1, 2014 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $255,000 in 2013 to $260,000 in 2014.
- An increase in the annual maximum benefit limit under IRC section 415 from $205,000 in 2013 to $210,000 in 2014.
- A lump sum optional payment form was added (for all but Middletown participants).
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $45.00 to $46.00 as of January 1, 2014.
- For participants at the St. Joseph location:
  - The minimum benefit multiplier was increased from $43.00 to $44.00 as of July 16, 2014.
- For participants at the Portland location:
  - Plan closed to employees hired on or after February 16, 2013.
- For participants at the Florence location:
  - Plan closed to employees hired on or after March 3, 2013.
- For participants at the Tampa location:
  - Plan closed to employees hired on or after May 6, 2013.
- For participants at the Winston-Salem location:
  - Plan closed to employees hired on or after August 8, 2013.

## Plan Changes Since the January 1, 2012 Valuation

The January 1, 2013 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $250,000 in 2012 to $255,000 in 2013.
- An increase in the annual maximum benefit limit under IRC section 415 from $200,000 in 2012 to $205,000 in 2013.
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $44.00 to $45.00 as of January 1, 2013.
- For participants at the St. Joseph location:
  - The minimum benefit multiplier was increased from $42.00 to $43.00 as of July 16, 2012.
  - Lump sum death benefit increased to $3,500 as of July 16, 2012.
  - Plan closed to employees hired on or after July 17, 2012.

## Plan Changes Since the January 1, 2011 Valuation

The January 1, 2012 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $245,000 in 2011 to $250,000 in 2012.
- An increase in the annual maximum benefit limit under IRC section 415 from $195,000 in 2011 to $200,000 in 2012.
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $43.00 to $44.00 as of January 1, 2012.
  - The supplemental benefit multiplier was created as $10.00 as of January 1, 2012.
  - Closed to employees hired on or after January 1, 2012.
- For participants at the Toledo location:
  - The minimum benefit multiplier was increased from $44.50 to $45.50 as of May 1, 2012 for Tier 1 employees (employees hired on or before July 1, 2011).
  - The minimum benefit multiplier was increased from $34.50 to $35.50 as of May 1, 2012 for Tier 2 employees (employees hired after July 1, 2011).
- For participants at the Tampa location, the minimum benefit multiplier was increased from $35.00 to $36.00 as of January 1, 2012.

## Plan Changes Since the January 1, 2010 Valuation

The January 1, 2011 funding valuation reflected the following plan changes:

- For participants at the St. Joseph location, the minimum benefit multiplier was increased from $41.00 to $42.00 as of August 1, 2011.
- For participants at the Tampa location:
  - The minimum benefit multiplier was increased from $34.00 to $35.00 as of January 1, 2011.
  - The supplemental benefit multiplier was increased from $10.00 to $11.00 as of January 1, 2011.
- For participants at the Toledo location, the minimum benefit multiplier was increased from $43.50 to $44.50 as of May 1, 2011.

For participants at the Winston-Salem location, the minimum benefit multiplier was increased from $47.00 to $48.00 as of August 1, 2011.

## 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.

**JOHNSON CONTROLS, INC. PENSION PLANS**
**SCHEDULE H, 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**JOHNSON CONTROLS MASTER PENSION TRUST**
**PLAN #024, EIN: 39-0380010**
**DECEMBER 31, 2015**

| (a) | (b) Identity of Issue, Borrower, Lessor or Similar Party | (c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| * | U.S. Bank | Baird Fixed Income | $ 315,752,914 | $ 404,851,570 |
| * | U.S. Bank | Columbus | 65,041,754 | 123,149,881 |
| * | U.S. Bank | Thompson, Siegel & Walmsley LLC | 63,694,431 | 111,784,772 |
| * | U.S. Bank | Dodge & Cox | 206,792,656 | 234,526,018 |
| * | U.S. Bank | Prudential | 281,963,903 | 419,185,042 |
| * | U.S. Bank | Prudential 90 | 84,534,135 | 85,772,234 |
| * | U.S. Bank | PIMCO | 83,805,768 | 83,703,407 |
| * | U.S. Bank | Cash Fund | 26,606,161 | 26,627,961 |
| * | U.S. Bank | JP Morgan Enchd Index | 189,016,008 | 250,487,943 |
| * | U.S. Bank | JP Morgan 500 Index | 169,825,547 | 243,276,801 |
| * | U.S. Bank | Rockwood IX | 39,107,289 | 47,681,708 |
| * | U.S. Bank | Rockwood Capital | 5,986,381 | 15,189,888 |
| * | U.S. Bank | Morgan Stanley | 70,175,840 | 139,017,579 |
| * | U.S. Bank | Invesco | 75,214,739 | 128,749,507 |
| * | U.S. Bank | Mfs | 220,554,154 | 250,080,821 |
| | Total investments | | $ 1,898,071,680 | $ 2,564,085,132 |

* Represents a party-in-interest

# Schedule SB Attachment (Form 5500)—2015 Plan Year
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

Number of Participants and Average Compensation

| Attained Age | Years of Credited Service | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | <1 | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40+ |
| <25 | 21<br>$24,324 | 29<br>$58,607 | | | | | | | | |
| 25-29 | 16 | 99<br>$63,788 | 21<br>$65,553 | | | | | | | |
| 30-34 | 9 | 91<br>$64,236 | 57<br>$69,536 | 9 | 1 | | | | | |
| 35-39 | 16 | 92<br>$65,239 | 58<br>$66,250 | 23<br>$64,131 | 39<br>$77,334 | | | | | |
| 40-44 | 11 | 85<br>$66,282 | 60<br>$68,244 | 32<br>$73,872 | 90<br>$76,801 | 6 | | | | |
| 45-49 | 7 | 79<br>$61,717 | 56<br>$67,399 | 44<br>$69,538 | 88<br>$73,629 | 10 | 33<br>$73,877 | | | |
| 50-54 | 9 | 72<br>$66,155 | 64<br>$65,778 | 37<br>$66,505 | 97<br>$73,674 | 16 | 70<br>$72,356 | 39<br>$69,358 | 10 | |
| 55-59 | 7 | 44<br>$62,873 | 32<br>$69,418 | 19 | 73<br>$70,026 | 26<br>$74,795 | 62<br>$70,250 | 77<br>$69,024 | 63<br>$67,710 | 3 |
| 60-64 | 2 | 16 | 20<br>$72,650 | 10 | 29<br>$70,180 | 11 | 22<br>$63,947 | 59<br>$68,734 | 32<br>$63,380 | 24<br>$65,556 |
| 65-69 | | | 3 | 1 | 4 | 1 | 4 | 2 | 2 | 3 |
| 70+ | | | | | | | | | | |

N-2,247

# Schedule SB Attachment (Form 5500)—2015 Plan Year
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

| | |
|---|---|
| Interest Rates for Minimum Funding Purposes | Based on segment rates with a four-month lookback (as of September 2014), 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 a four-month lookback (as of September 2014), without regard to interest rate stabilization |
| 1st Segment Rate | 1.15% |
| 2nd Segment Rate | 4.06% |
| 3rd Segment Rate | 5.15% |
| Salary Increases | |
| Minimum Funding Target Normal Cost | See Table 1 |
| Maximum Tax Expected Benefit Increase | See Table 1 |
| Optional Payment Form Election Percentage | |
| Retirement Eligible Employees | 22% life annuity<br>18% joint and 75% survivor annuity<br>60% lump sum |
| Nonretirement Eligible Employees | 16% life annuity<br>14% joint and 75% survivor annuity<br>70% lump sum |
| Lump Sum Conversion Interest Rate | Same as funding interest rates above |
| Lump Sum Conversion Mortality | Current IRC section 417 (e) table for lump sums |
| Retirement Age | |
| Active Participants | See Table 2 |
| Terminated Vested Participants | Age 60 |
| Mortality Rates | |
| Healthy and Disabled | 2015 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e) |
| Withdrawal Rates | See Table 3 |
| Disability Rates | See Table 4 |

| | |
|---|---|
| Decrement Timing | Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%) |
| Surviving Spouse Benefit | It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are three years older than their spouses. |
| Valuation Compensation | Earnings considered "wages" for federal income tax withholding purposes excluding LTD benefits reimbursed expenses, and pension contributions |
| Benefit and Compensation Limits | Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of $210,000 and the IRC section 401(a)(17) compensation limit of $265,000. |
| Valuation of Plan Assets | Fair market value |
| Trust Expenses Included in Target Normal Cost | Based on the prior year actual plan administrative expenses, $646,848 for 2015. |
| Actuarial Method | Standard unit credit cost method |
| Valuation Date | January 1, 2015 |

Table 1

**Salary Merit Increase Rates**

| Age | Rate |
|---|---|
| 15 | 4.75% |
| 16 | 4.75% |
| 17 | 4.75% |
| 18 | 4.75% |
| 19 | 4.75% |
| 20 | 4.75% |
| 21 | 4.75% |
| 22 | 4.75% |
| 23 | 4.75% |
| 24 | 4.75% |
| 25 | 4.75% |
| 26 | 4.75% |
| 27 | 4.75% |
| 28 | 4.75% |
| 29 | 4.75% |
| 30 | 4.75% |
| 31 | 4.75% |
| 32 | 4.75% |
| 33 | 4.75% |
| 34 | 4.75% |
| 35 | 4.00% |
| 36 | 4.00% |
| 37 | 4.00% |
| 38 | 4.00% |
| 39 | 4.00% |
| 40 | 4.00% |
| 41 | 4.00% |
| 42 | 4.00% |
| 43 | 4.00% |
| 44 | 4.00% |
| 45 | 3.25% |

Table 2

**Retirement Rates**

| Age | Rate |
|---|---|
| 55 | 3.00% |
| 56 | 3.00% |
| 57 | 3.00% |
| 58 | 3.00% |
| 59 | 3.00% |
| 60 | 3.00% |
| 61 | 20.00% |
| 62 | 40.00% |
| 63 | 15.00% |
| 64 | 15.00% |
| 65 | 40.00% |
| 66 | 50.00% |
| 67 | 40.00% |
| 68 | 30.00% |
| 69 | 20.00% |
| 70+ | 100.00% |

Table 3—Page 1 of 4

**Withdrawal Rates—Male**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 15 | 30.00% | 21.00% | 13.00% | 10.50% |
| 16 | 30.00% | 21.00% | 13.00% | 10.50% |
| 17 | 30.00% | 21.00% | 13.00% | 10.50% |
| 18 | 30.00% | 21.00% | 13.00% | 10.50% |
| 19 | 30.00% | 21.00% | 13.00% | 10.50% |
| 20 | 30.00% | 21.00% | 13.00% | 10.50% |
| 21 | 30.00% | 21.00% | 13.00% | 10.25% |
| 22 | 30.00% | 21.00% | 13.00% | 10.00% |
| 23 | 30.00% | 21.00% | 13.00% | 9.75% |
| 24 | 30.00% | 21.00% | 13.00% | 9.50% |
| 25 | 30.00% | 21.00% | 13.00% | 9.25% |
| 26 | 30.00% | 21.00% | 13.00% | 9.00% |
| 27 | 30.00% | 21.00% | 13.00% | 8.75% |
| 28 | 30.00% | 21.00% | 13.00% | 8.50% |
| 29 | 30.00% | 21.00% | 13.00% | 8.25% |
| 30 | 30.00% | 21.00% | 13.00% | 8.00% |
| 31 | 30.00% | 21.00% | 13.00% | 7.75% |
| 32 | 30.00% | 21.00% | 13.00% | 7.50% |
| 33 | 30.00% | 21.00% | 13.00% | 7.25% |
| 34 | 30.00% | 21.00% | 13.00% | 7.00% |
| 35 | 30.00% | 21.00% | 13.00% | 4.00% |
| 36 | 30.00% | 21.00% | 13.00% | 4.00% |
| 37 | 30.00% | 21.00% | 13.00% | 4.00% |
| 38 | 30.00% | 21.00% | 13.00% | 4.00% |
| 39 | 30.00% | 21.00% | 13.00% | 4.00% |
| 40 | 30.00% | 21.00% | 13.00% | 2.90% |
| 41 | 30.00% | 21.00% | 13.00% | 2.90% |
| 42 | 30.00% | 21.00% | 13.00% | 2.90% |
| 43 | 30.00% | 21.00% | 13.00% | 2.90% |
| 44 | 30.00% | 21.00% | 13.00% | 2.90% |

Table 3—Page 2 of 4

**Withdrawal Rates—Male**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 45 | 30.00% | 21.00% | 13.00% | 4.25% |
| 46 | 30.00% | 21.00% | 13.00% | 4.00% |
| 47 | 30.00% | 21.00% | 13.00% | 3.75% |
| 48 | 30.00% | 21.00% | 13.00% | 3.50% |
| 49 | 30.00% | 21.00% | 13.00% | 3.25% |
| 50 | 30.00% | 21.00% | 13.00% | 3.00% |
| 51 | 30.00% | 21.00% | 13.00% | 2.75% |
| 52 | 30.00% | 21.00% | 13.00% | 2.50% |
| 53 | 30.00% | 21.00% | 13.00% | 2.25% |
| 54 | 30.00% | 21.00% | 13.00% | 2.00% |
| 55 | 30.00% | 21.00% | 13.00% | 7.00% |
| 56 | 30.00% | 21.00% | 13.00% | 7.00% |
| 57 | 30.00% | 21.00% | 13.00% | 7.00% |
| 58 | 30.00% | 21.00% | 13.00% | 7.00% |
| 59+ | 30.00% | 21.00% | 13.00% | 7.00% |

Table 3—Page 3 of 4

**Withdrawal Rates—Female**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 15 | 27.00% | 20.00% | 15.00% | 14.20% |
| 16 | 27.00% | 20.00% | 15.00% | 14.20% |
| 17 | 27.00% | 20.00% | 15.00% | 14.20% |
| 18 | 27.00% | 20.00% | 15.00% | 14.20% |
| 19 | 27.00% | 20.00% | 15.00% | 14.20% |
| 20 | 27.00% | 20.00% | 15.00% | 14.20% |
| 21 | 27.00% | 20.00% | 15.00% | 13.87% |
| 22 | 27.00% | 20.00% | 15.00% | 13.53% |
| 23 | 27.00% | 20.00% | 15.00% | 13.20% |
| 24 | 27.00% | 20.00% | 15.00% | 12.86% |
| 25 | 27.00% | 20.00% | 15.00% | 12.53% |
| 26 | 27.00% | 20.00% | 15.00% | 12.19% |
| 27 | 27.00% | 20.00% | 15.00% | 11.86% |
| 28 | 27.00% | 20.00% | 15.00% | 11.53% |
| 29 | 27.00% | 20.00% | 15.00% | 11.19% |
| 30 | 27.00% | 20.00% | 15.00% | 10.86% |
| 31 | 27.00% | 20.00% | 15.00% | 10.52% |
| 32 | 27.00% | 20.00% | 15.00% | 10.19% |
| 33 | 27.00% | 20.00% | 15.00% | 9.86% |
| 34 | 27.00% | 20.00% | 15.00% | 9.52% |
| 35 | 27.00% | 20.00% | 15.00% | 9.19% |
| 36 | 27.00% | 20.00% | 15.00% | 8.85% |
| 37 | 27.00% | 20.00% | 15.00% | 8.52% |
| 38 | 27.00% | 20.00% | 15.00% | 8.18% |
| 39 | 27.00% | 20.00% | 15.00% | 7.85% |
| 40 | 27.00% | 20.00% | 15.00% | 7.52% |
| 41 | 27.00% | 20.00% | 15.00% | 7.18% |
| 42 | 27.00% | 20.00% | 15.00% | 6.85% |
| 43 | 27.00% | 20.00% | 15.00% | 6.51% |
| 44 | 27.00% | 20.00% | 15.00% | 6.18% |

Table 3—Page 4 of 4

**Withdrawal Rates—Female**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 45 | 27.00% | 20.00% | 15.00% | 5.84% |
| 46 | 27.00% | 20.00% | 15.00% | 5.51% |
| 47 | 27.00% | 20.00% | 15.00% | 5.18% |
| 48 | 27.00% | 20.00% | 15.00% | 4.84% |
| 49 | 27.00% | 20.00% | 15.00% | 4.51% |
| 50 | 27.00% | 20.00% | 15.00% | 4.17% |
| 51 | 27.00% | 20.00% | 15.00% | 3.84% |
| 52 | 27.00% | 20.00% | 15.00% | 3.51% |
| 53 | 27.00% | 20.00% | 15.00% | 3.17% |
| 54 | 27.00% | 20.00% | 15.00% | 2.84% |
| 55 | 27.00% | 20.00% | 15.00% | 2.50% |
| 56 | 27.00% | 20.00% | 15.00% | 2.17% |
| 57 | 27.00% | 20.00% | 15.00% | 1.83% |
| 58 | 27.00% | 20.00% | 15.00% | 1.50% |
| 59+ | 27.00% | 20.00% | 15.00% | 1.50% |

Table 4

**Disability Rates**

| Age | Male | Female | Age | Male | Female |
|---|---|---|---|---|---|
| 15 | 0.03% | 0.03% | 45 | 0.16% | 0.24% |
| 16 | 0.03% | 0.03% | 46 | 0.18% | 0.27% |
| 17 | 0.03% | 0.03% | 47 | 0.21% | 0.30% |
| 18 | 0.03% | 0.03% | 48 | 0.25% | 0.33% |
| 19 | 0.03% | 0.03% | 49 | 0.28% | 0.36% |
| 20 | 0.03% | 0.03% | 50 | 0.33% | 0.40% |
| 21 | 0.03% | 0.03% | 51 | 0.39% | 0.44% |
| 22 | 0.03% | 0.03% | 52 | 0.46% | 0.49% |
| 23 | 0.03% | 0.03% | 53 | 0.53% | 0.54% |
| 24 | 0.03% | 0.03% | 54 | 0.61% | 0.59% |
| 25 | 0.03% | 0.03% | 55 | 0.69% | 0.64% |
| 26 | 0.03% | 0.03% | 56 | 0.77% | 0.69% |
| 27 | 0.03% | 0.03% | 57 | 0.86% | 0.74% |
| 28 | 0.03% | 0.04% | 58 | 0.95% | 0.80% |
| 29 | 0.03% | 0.04% | 59 | 1.05% | 0.85% |
| 30 | 0.03% | 0.04% | 60 | 1.15% | 0.90% |
| 31 | 0.03% | 0.05% | 61 | 1.26% | 0.96% |
| 32 | 0.03% | 0.05% | 62 | 1.38% | 1.01% |
| 33 | 0.03% | 0.06% | 63 | 1.51% | 1.05% |
| 34 | 0.03% | 0.06% | 64 | 1.64% | 1.09% |
| 35 | 0.04% | 0.07% | 65+ | 0.00% | 0.00% |
| 36 | 0.04% | 0.08% | | | |
| 37 | 0.05% | 0.09% | | | |
| 38 | 0.06% | 0.10% | | | |
| 39 | 0.07% | 0.12% | | | |
| 40 | 0.08% | 0.13% | | | |
| 41 | 0.09% | 0.15% | | | |
| 42 | 0.10% | 0.17% | | | |
| 43 | 0.12% | 0.19% | | | |
| 44 | 0.14% | 0.22% | | | |

# Schedule SB Attachment (Form 5500)—2015 Plan Year
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

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

| (a) Age | (b) Rate | (c) Weight | (d) Product (a) × (b) × (c) |
|---|---|---|---|
| 55.5 | 3.00% | 1.0000 | 1.67 |
| 56.5 | 3.00% | 0.9700 | 1.64 |
| 57.5 | 3.00% | 0.9409 | 1.62 |
| 58.5 | 3.00% | 0.9127 | 1.60 |
| 59.5 | 3.00% | 0.8853 | 1.58 |
| 60.5 | 3.00% | 0.8587 | 1.56 |
| 61.5 | 20.00% | 0.8330 | 10.25 |
| 62.5 | 40.00% | 0.6664 | 16.66 |
| 63.5 | 15.00% | 0.3998 | 3.81 |
| 64.5 | 15.00% | 0.3399 | 3.29 |
| 65.5 | 40.00% | 0.2889 | 7.57 |
| 66.5 | 50.00% | 0.1733 | 5.76 |
| 67.5 | 40.00% | 0.0867 | 2.34 |
| 68.5 | 30.00% | 0.0520 | 1.07 |
| 69.5 | 20.00% | 0.0364 | 0.51 |
| 70 | 100.00% | 0.0291 | 2.04 |
| | | Weighted Average | 62.97 |

**JOHNSON CONTROLS, INC. PENSION PLANS**
**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS**
**JOHNSON CONTROLS MASTER PENSION TRUST**
**PLAN #024, EIN: 39-0380010**
**YEAR ENDED DECEMBER 31, 2015**

| (a) Identity of Party Involved | (b) Description of Asset | (c) Purchase Price | (d) Selling Price | (g) Cost of Asset | (h) Current Value of Asset on Transaction Date | (i) Net Gain (Loss) |
|---|---|---|---|---|---|---|
| **Series of Transactions** | | | | | | |
| U.S. Bank | JP Morgan Enhcd Index | 126,508,568 | — | 126,508,568 | 126,508,568 | — |
| U.S. Bank | JP Morgan Enhcd Index | — | 17,508,568 | 13,138,301 | 17,508,568 | 4,370,267 |
| U.S. Bank | JP Morgan 500 Index | 105,807,401 | — | 105,807,401 | 105,807,401 | — |
| U.S. Bank | JP Morgan 500 Index | — | 151,807,402 | 87,296,120 | 151,807,402 | 64,511,282 |
| U.S. Bank | Cash Fund | 497,326,872 | — | 497,326,872 | 497,326,872 | — |
| U.S. Bank | Cash Fund | — | 524,506,152 | 524,856,935 | 524,506,152 | (350,783) |

| SCHEDULE SB (Form 5500) | Single-Employer Defined Benefit Plan Actuarial Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury Internal Revenue Service<br>Department of Labor Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).<br>▶ File as an attachment to Form 5500 or 5500-SF. | 2015<br>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 | B Three-digit plan number (PN) ▶ | |
|---|---|---|
| JOHNSON CTRLS PLAN BATTERY DIV. HRLY EMPLOYEES | | 016 |
| **C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF | **D** Employer Identification Number (EIN) | |
| JOHNSON CONTROLS BATTERY GROUP, INC. | 39-1684871 | |

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

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

## Part I Basic Information

**1** Enter the valuation date: Month 01 Day 01 Year 2015

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | 2a | 381,052,851 |
| **b** Actuarial value | 2b | 381,052,851 |

**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 | 1,737 | 122,787,230 | 122,787,230 |
| **b** For terminated vested participants | 540 | 17,158,018 | 17,158,018 |
| **c** For active participants | 2,247 | 117,876,707 | 129,578,803 |
| **d** Total | 4,524 | 257,821,955 | 269,524,051 |

**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 | 6.30% |
| **6** Target normal cost | 6 | 8,716,488 |

**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 | Cheryl L. Davis E.D. | 09/26/2016 |
|---|---|---|
| | Signature of actuary | Date |
| CHERYL L. DAVIS | | 1404707 |
| Type or print name of actuary | | Most recent enrollment number |
| HEWITT ASSOCIATES LLC | | 847-295-5000 |
| Firm name | | Telephone number (including area code) |
| 4 OVERLOOK POINT<br>LINCOLNSHIRE IL 60069<br>Address of the firm | | |

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

## Part II Beginning of Year Carryover and Prefunding Balances

| | | (a) Carryover balance | (b) Prefunding balance |
|---|---|---|---|
| 7 | Balance at beginning of prior year after applicable adjustments (line 13 from prior year) | 19,680,828 | 70,828,800 |
| 8 | Portion elected for use to offset prior year's funding requirement (line 35 from prior year) | 7,924,620 | 0 |
| 9 | Amount remaining (line 7 minus line 8) | 11,756,208 | 70,828,800 |
| 10 | Interest on line 9 using prior year's actual return of 10.53% | 1,237,929 | 7,458,273 |
| 11 | Prior year's excess contributions to be added to prefunding balance: | | |
| | **a** Present value of excess contributions (line 38a from prior year) | | 28,938,403 |
| | **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 6.48% | | 1,361,693 |
| | **b(2)** Interest on line 38b from prior year Schedule SB, using prior year's actual return | | 834,462 |
| | **c** Total available at beginning of current plan year to add to prefunding balance | | 31,134,558 |
| | **d** Portion of (c) to be added to prefunding balance | | 31,134,558 |
| 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) | 12,994,137 | 109,421,631 |

## Part III Funding Percentages

| | | | |
|---|---|---|---|
| 14 | Funding target attainment percentage | 14 | 95.96% |
| 15 | Adjusted funding target attainment percentage | 15 | 141.37% |
| 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 | 105.27% |
| 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 |
|---|---|---|---|---|---|
| | | | | | |
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| | | | | | |
| | | | 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? [X] Yes [ ] No

**b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] 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 | (4) 4th |
|---|---|---|---|
| 0 | 0 | 0 | 0 |

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

**21** Discount rate:

**a** Segment rates:

| 1st segment: | 2nd segment: | 3rd segment: | ☐ N/A, full yield curve used |
|---|---|---|---|
| 4.72% | 6.11% | 6.81% | |

| | | |
|---|---|---|
| **b** Applicable month (enter code) | 21b | 4 |
| **22** Weighted average retirement age | 22 | 63 |

**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 | 8,716,488 |
| **b** Excess assets, if applicable, but not greater than line 31a | 31b | 0 |

| **32** Amortization installments: | Outstanding Balance | Installment |
|---|---|---|
| **a** Net shortfall amortization installment | 0 | 0 |
| **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 | 8,716,488 |

| | Carryover balance | Prefunding balance | Total balance |
|---|---|---|---|
| **35** Balances elected for use to offset funding requirement | 8,716,488 | 0 | 8,716,488 |

| | | |
|---|---|---|
| **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
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

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

| (a) Age | (b) Rate | (c) Weight | (d) Product (a) × (b) × (c) |
|---|---|---|---|
| 55.5 | 3.00% | 1.0000 | 1.67 |
| 56.5 | 3.00% | 0.9700 | 1.64 |
| 57.5 | 3.00% | 0.9409 | 1.62 |
| 58.5 | 3.00% | 0.9127 | 1.60 |
| 59.5 | 3.00% | 0.8853 | 1.58 |
| 60.5 | 3.00% | 0.8587 | 1.56 |
| 61.5 | 20.00% | 0.8330 | 10.25 |
| 62.5 | 40.00% | 0.6664 | 16.66 |
| 63.5 | 15.00% | 0.3998 | 3.81 |
| 64.5 | 15.00% | 0.3399 | 3.29 |
| 65.5 | 40.00% | 0.2889 | 7.57 |
| 66.5 | 50.00% | 0.1733 | 5.76 |
| 67.5 | 40.00% | 0.0867 | 2.34 |
| 68.5 | 30.00% | 0.0520 | 1.07 |
| 69.5 | 20.00% | 0.0364 | 0.51 |
| 70 | 100.00% | 0.0291 | 2.04 |
| | | Weighted Average | 62.97 |

# Schedule SB Attachment (Form 5500)—2015 Plan Year
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

| | |
|---|---|
| Interest Rates for Minimum Funding Purposes | Based on segment rates with a four-month lookback (as of September 2014), 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 a four-month lookback (as of September 2014), without regard to interest rate stabilization |
| 1st Segment Rate | 1.15% |
| 2nd Segment Rate | 4.06% |
| 3rd Segment Rate | 5.15% |
| Salary Increases | |
| Minimum Funding Target Normal Cost | See Table 1 |
| Maximum Tax Expected Benefit Increase | See Table 1 |
| Optional Payment Form Election Percentage | |
| Retirement Eligible Employees | 22% life annuity<br>18% joint and 75% survivor annuity<br>60% lump sum |
| Nonretirement Eligible Employees | 16% life annuity<br>14% joint and 75% survivor annuity<br>70% lump sum |
| Lump Sum Conversion Interest Rate | Same as funding interest rates above |
| Lump Sum Conversion Mortality | Current IRC section 417 (e) table for lump sums |
| Retirement Age | |
| Active Participants | See Table 2 |
| Terminated Vested Participants | Age 60 |
| Mortality Rates | |
| Healthy and Disabled | 2015 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e) |
| Withdrawal Rates | See Table 3 |
| Disability Rates | See Table 4 |

| | |
|---|---|
| Decrement Timing | Middle of year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%) |
| Surviving Spouse Benefit | It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are three years older than their spouses. |
| Valuation Compensation | Earnings considered "wages" for federal income tax withholding purposes excluding LTD benefits reimbursed expenses, and pension contributions |
| Benefit and Compensation Limits | Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of $210,000 and the IRC section 401(a)(17) compensation limit of $265,000. |
| Valuation of Plan Assets | Fair market value |
| Trust Expenses Included in Target Normal Cost | Based on the prior year actual plan administrative expenses, $646,848 for 2015. |
| Actuarial Method | Standard unit credit cost method |
| Valuation Date | January 1, 2015 |

Table 1

**Salary Merit Increase Rates**

| Age | Rate |
|---|---|
| 15 | 4.75% |
| 16 | 4.75% |
| 17 | 4.75% |
| 18 | 4.75% |
| 19 | 4.75% |
| 20 | 4.75% |
| 21 | 4.75% |
| 22 | 4.75% |
| 23 | 4.75% |
| 24 | 4.75% |
| 25 | 4.75% |
| 26 | 4.75% |
| 27 | 4.75% |
| 28 | 4.75% |
| 29 | 4.75% |
| 30 | 4.75% |
| 31 | 4.75% |
| 32 | 4.75% |
| 33 | 4.75% |
| 34 | 4.75% |
| 35 | 4.00% |
| 36 | 4.00% |
| 37 | 4.00% |
| 38 | 4.00% |
| 39 | 4.00% |
| 40 | 4.00% |
| 41 | 4.00% |
| 42 | 4.00% |
| 43 | 4.00% |
| 44 | 4.00% |
| 45 | 3.25% |

Table 2

**Retirement Rates**

| Age | Rate |
|---|---|
| 55 | 3.00% |
| 56 | 3.00% |
| 57 | 3.00% |
| 58 | 3.00% |
| 59 | 3.00% |
| 60 | 3.00% |
| 61 | 20.00% |
| 62 | 40.00% |
| 63 | 15.00% |
| 64 | 15.00% |
| 65 | 40.00% |
| 66 | 50.00% |
| 67 | 40.00% |
| 68 | 30.00% |
| 69 | 20.00% |
| 70+ | 100.00% |

Table 3—Page 1 of 4

**Withdrawal Rates—Male**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 15 | 30.00% | 21.00% | 13.00% | 10.50% |
| 16 | 30.00% | 21.00% | 13.00% | 10.50% |
| 17 | 30.00% | 21.00% | 13.00% | 10.50% |
| 18 | 30.00% | 21.00% | 13.00% | 10.50% |
| 19 | 30.00% | 21.00% | 13.00% | 10.50% |
| 20 | 30.00% | 21.00% | 13.00% | 10.50% |
| 21 | 30.00% | 21.00% | 13.00% | 10.25% |
| 22 | 30.00% | 21.00% | 13.00% | 10.00% |
| 23 | 30.00% | 21.00% | 13.00% | 9.75% |
| 24 | 30.00% | 21.00% | 13.00% | 9.50% |
| 25 | 30.00% | 21.00% | 13.00% | 9.25% |
| 26 | 30.00% | 21.00% | 13.00% | 9.00% |
| 27 | 30.00% | 21.00% | 13.00% | 8.75% |
| 28 | 30.00% | 21.00% | 13.00% | 8.50% |
| 29 | 30.00% | 21.00% | 13.00% | 8.25% |
| 30 | 30.00% | 21.00% | 13.00% | 8.00% |
| 31 | 30.00% | 21.00% | 13.00% | 7.75% |
| 32 | 30.00% | 21.00% | 13.00% | 7.50% |
| 33 | 30.00% | 21.00% | 13.00% | 7.25% |
| 34 | 30.00% | 21.00% | 13.00% | 7.00% |
| 35 | 30.00% | 21.00% | 13.00% | 4.00% |
| 36 | 30.00% | 21.00% | 13.00% | 4.00% |
| 37 | 30.00% | 21.00% | 13.00% | 4.00% |
| 38 | 30.00% | 21.00% | 13.00% | 4.00% |
| 39 | 30.00% | 21.00% | 13.00% | 4.00% |
| 40 | 30.00% | 21.00% | 13.00% | 2.90% |
| 41 | 30.00% | 21.00% | 13.00% | 2.90% |
| 42 | 30.00% | 21.00% | 13.00% | 2.90% |
| 43 | 30.00% | 21.00% | 13.00% | 2.90% |
| 44 | 30.00% | 21.00% | 13.00% | 2.90% |

Table 3—Page 2 of 4

**Withdrawal Rates—Male**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 45 | 30.00% | 21.00% | 13.00% | 4.25% |
| 46 | 30.00% | 21.00% | 13.00% | 4.00% |
| 47 | 30.00% | 21.00% | 13.00% | 3.75% |
| 48 | 30.00% | 21.00% | 13.00% | 3.50% |
| 49 | 30.00% | 21.00% | 13.00% | 3.25% |
| 50 | 30.00% | 21.00% | 13.00% | 3.00% |
| 51 | 30.00% | 21.00% | 13.00% | 2.75% |
| 52 | 30.00% | 21.00% | 13.00% | 2.50% |
| 53 | 30.00% | 21.00% | 13.00% | 2.25% |
| 54 | 30.00% | 21.00% | 13.00% | 2.00% |
| 55 | 30.00% | 21.00% | 13.00% | 7.00% |
| 56 | 30.00% | 21.00% | 13.00% | 7.00% |
| 57 | 30.00% | 21.00% | 13.00% | 7.00% |
| 58 | 30.00% | 21.00% | 13.00% | 7.00% |
| 59+ | 30.00% | 21.00% | 13.00% | 7.00% |

Table 3—Page 3 of 4

**Withdrawal Rates—Female**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 15 | 27.00% | 20.00% | 15.00% | 14.20% |
| 16 | 27.00% | 20.00% | 15.00% | 14.20% |
| 17 | 27.00% | 20.00% | 15.00% | 14.20% |
| 18 | 27.00% | 20.00% | 15.00% | 14.20% |
| 19 | 27.00% | 20.00% | 15.00% | 14.20% |
| 20 | 27.00% | 20.00% | 15.00% | 14.20% |
| 21 | 27.00% | 20.00% | 15.00% | 13.87% |
| 22 | 27.00% | 20.00% | 15.00% | 13.53% |
| 23 | 27.00% | 20.00% | 15.00% | 13.20% |
| 24 | 27.00% | 20.00% | 15.00% | 12.86% |
| 25 | 27.00% | 20.00% | 15.00% | 12.53% |
| 26 | 27.00% | 20.00% | 15.00% | 12.19% |
| 27 | 27.00% | 20.00% | 15.00% | 11.86% |
| 28 | 27.00% | 20.00% | 15.00% | 11.53% |
| 29 | 27.00% | 20.00% | 15.00% | 11.19% |
| 30 | 27.00% | 20.00% | 15.00% | 10.86% |
| 31 | 27.00% | 20.00% | 15.00% | 10.52% |
| 32 | 27.00% | 20.00% | 15.00% | 10.19% |
| 33 | 27.00% | 20.00% | 15.00% | 9.86% |
| 34 | 27.00% | 20.00% | 15.00% | 9.52% |
| 35 | 27.00% | 20.00% | 15.00% | 9.19% |
| 36 | 27.00% | 20.00% | 15.00% | 8.85% |
| 37 | 27.00% | 20.00% | 15.00% | 8.52% |
| 38 | 27.00% | 20.00% | 15.00% | 8.18% |
| 39 | 27.00% | 20.00% | 15.00% | 7.85% |
| 40 | 27.00% | 20.00% | 15.00% | 7.52% |
| 41 | 27.00% | 20.00% | 15.00% | 7.18% |
| 42 | 27.00% | 20.00% | 15.00% | 6.85% |
| 43 | 27.00% | 20.00% | 15.00% | 6.51% |
| 44 | 27.00% | 20.00% | 15.00% | 6.18% |

Table 3—Page 4 of 4

**Withdrawal Rates—Female**

| | Years of Service | | | |
|---|---|---|---|---|
| **Age** | **0** | **1** | **2** | **3+** |
| 45 | 27.00% | 20.00% | 15.00% | 5.84% |
| 46 | 27.00% | 20.00% | 15.00% | 5.51% |
| 47 | 27.00% | 20.00% | 15.00% | 5.18% |
| 48 | 27.00% | 20.00% | 15.00% | 4.84% |
| 49 | 27.00% | 20.00% | 15.00% | 4.51% |
| 50 | 27.00% | 20.00% | 15.00% | 4.17% |
| 51 | 27.00% | 20.00% | 15.00% | 3.84% |
| 52 | 27.00% | 20.00% | 15.00% | 3.51% |
| 53 | 27.00% | 20.00% | 15.00% | 3.17% |
| 54 | 27.00% | 20.00% | 15.00% | 2.84% |
| 55 | 27.00% | 20.00% | 15.00% | 2.50% |
| 56 | 27.00% | 20.00% | 15.00% | 2.17% |
| 57 | 27.00% | 20.00% | 15.00% | 1.83% |
| 58 | 27.00% | 20.00% | 15.00% | 1.50% |
| 59+ | 27.00% | 20.00% | 15.00% | 1.50% |

Table 4

**Disability Rates**

| Age | Male | Female | Age | Male | Female |
|---|---|---|---|---|---|
| 15 | 0.03% | 0.03% | 45 | 0.16% | 0.24% |
| 16 | 0.03% | 0.03% | 46 | 0.18% | 0.27% |
| 17 | 0.03% | 0.03% | 47 | 0.21% | 0.30% |
| 18 | 0.03% | 0.03% | 48 | 0.25% | 0.33% |
| 19 | 0.03% | 0.03% | 49 | 0.28% | 0.36% |
| 20 | 0.03% | 0.03% | 50 | 0.33% | 0.40% |
| 21 | 0.03% | 0.03% | 51 | 0.39% | 0.44% |
| 22 | 0.03% | 0.03% | 52 | 0.46% | 0.49% |
| 23 | 0.03% | 0.03% | 53 | 0.53% | 0.54% |
| 24 | 0.03% | 0.03% | 54 | 0.61% | 0.59% |
| 25 | 0.03% | 0.03% | 55 | 0.69% | 0.64% |
| 26 | 0.03% | 0.03% | 56 | 0.77% | 0.69% |
| 27 | 0.03% | 0.03% | 57 | 0.86% | 0.74% |
| 28 | 0.03% | 0.04% | 58 | 0.95% | 0.80% |
| 29 | 0.03% | 0.04% | 59 | 1.05% | 0.85% |
| 30 | 0.03% | 0.04% | 60 | 1.15% | 0.90% |
| 31 | 0.03% | 0.05% | 61 | 1.26% | 0.96% |
| 32 | 0.03% | 0.05% | 62 | 1.38% | 1.01% |
| 33 | 0.03% | 0.06% | 63 | 1.51% | 1.05% |
| 34 | 0.03% | 0.06% | 64 | 1.64% | 1.09% |
| 35 | 0.04% | 0.07% | 65+ | 0.00% | 0.00% |
| 36 | 0.04% | 0.08% | | | |
| 37 | 0.05% | 0.09% | | | |
| 38 | 0.06% | 0.10% | | | |
| 39 | 0.07% | 0.12% | | | |
| 40 | 0.08% | 0.13% | | | |
| 41 | 0.09% | 0.15% | | | |
| 42 | 0.10% | 0.17% | | | |
| 43 | 0.12% | 0.19% | | | |
| 44 | 0.14% | 0.22% | | | |

## Schedule SB, Part V—Summary of Plan Provisions

Effective Date: December 29, 1943.

Status of Plan: Ongoing.

| Group Name | Status of Plan |
|---|---|
| Florence | Closed to hires on or after 3/3/2013 |
| Fort Wayne | Closed to hires on or after 1/13/2014 |
| Geneva | Closed to hires on or after 1/1/2012 |
| Middletown | DAP Union 831—Closed to hires on or after 6/30/2014. Otherwise open. |
| Portland | Closed to hires on or after 2/16/2013 |
| St. Joseph | Closed to hires on or after 7/17/2012 |
| Tampa | Closed to hires on or after 5/6/2013 |
| Toledo | Open |
| Winston Salem | Closed to hires on or after 8/8/2013 |

Participation: Hourly-paid employees.

Normal Retirement

- Eligibility: Age 65 and five years of vesting service.
- Benefit: 1% of average monthly compensation times benefit service. The normal retirement benefit is subject to minimums ranging from $28.00 times benefit service to $48.00 times benefit service depending on employee group. Minimum benefit eligibility is age 62 and 10 years of vesting service (or age 65 and five years of vesting service) for Geneva employees and age 55 and 10 years of vesting service (or age 65 and five years of vesting service) for all other employees.

Early Retirement

- Eligibility: Age 55 and 10 years of vesting service.
- Benefit: Accrued benefit reduced 5% per year from age 65 (age 62 if 10 years of vesting service).

Deferred Vested

- Eligibility: Five years of vesting service.
- Benefit: Accrued benefit reduced 5% per year from age 65.

| | |
|---|---|
| Supplemental Allowance | |
| Eligibility | Participants who retire at age 62 with 10 years of vesting service at Portland, Tampa, Toledo, St. Joseph, Winston-Salem, and Florence locations. |
| Benefit | $5 for Toledo employees hired after July 1, 2011, $10 for Toledo employees hired on or before July 1, 2011, $10 for St. Joseph, Florence, and Geneva employees, $11 for Tampa employees, $12 for Winston-Salem employees, and $13 for Portland employees for each year of service payable monthly until age 65. |
| Total and Permanent Disability Retirement | |
| Eligibility | Age 55 and 30 years of benefit service (UAW groups only). |
| Benefit | Accrued benefit payable immediately. |
| Preretirement Surviving Spouse Benefit | |
| Eligibility | Five years of service. |
| Benefit | |
| Early Retirement Eligible | 50% (55% for UAW groups if death after age 55 with 10 years of vesting service) of the benefit the participant was entitled to receive under the early retirement provisions had he terminated employment as of the date of death. This benefit is payable for the life of the spouse. |
| Not Early Retirement Eligible | 50% of the benefit to which the participant was entitled under the plan provisions had the participant terminated employment on the date of death, survived to his earliest retirement age, and begun to receive an immediate life annuity at his early retirement date. |
| Other Benefits | |
| Eligibility | Payable upon death of retiree receiving normal or early retirement benefits. |
| Benefit | $1,500 to $6,000 lump sum, depending on location. |
| Form of Payment | |
| Normal | Single life annuity payable monthly, but for married participants, unless elected otherwise, there is in effect an automatic 50% joint and survivor option on an actuarially equivalent basis. |
| Optional | 100%, 75%, or 50% joint and survivor annuity, single life annuity, or lump sum. |

| | |
|---|---|
| Optional Payment Form | |
| Conversion Interest Rate | |
| Non-Lump Sums | 6.00%. |
| Lump Sums | 417(e) interest rate (August lookback). |
| Conversion Mortality | |
| Non-Lump Sums | 1971 Group Annuity Mortality Table weighted 70% male 30% female. |
| Lump Sums | 417(e) mortality table. |
| Lump Sum Form of Payment | |
| Retirement Eligible Participant | The actuarial equivalent of the benefit payable as a life annuity, including early retirement subsidies. |
| Nonretirement Eligible Participant | The actuarial equivalent of the benefit payable as a life annuity, excluding early retirement subsidies. The lump sum is only available after the participant reaches commencement eligibility. |
| Definitions | |
| Vesting Service | All service after date of hire. |
| Benefit Service | Service while a participant. |
| Compensation | Earnings considered “wages” for federal income tax withholding purposes excluding LTD benefits, reimbursed expenses, and pension contributions. |
| Average Monthly Compensation | Compensation for the highest five plan years out of the last 10, divided by 60. |

## Plan Changes Since the January 1, 2014 Valuation

The January 1, 2015 funding valuation reflects the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $260,000 in 2014 to $265,000 in 2015.
- An update to the mortality for determining minimum lump sum payments under IRC section 417(e)(3) to the applicable rates for the current plan year.
- For participants at the Fort Wayne location:
  - Plan closed to employees hired on or after January 13, 2014.
- For participants at the Middletown location, DAP Union 831:
  - Plan closed to employees hired, rehired, or transferred in on or after June 30, 2014.

- For participants at the Toledo location:
  - The minimum benefit multiplier was increased from $45.50 to $46.50 as of May 1, 2015 for Tier 1 employees (employees hired on or before July 1, 2011).
  - The minimum benefit multiplier was increased from $35.50 to $36.50 as of May 1, 2015 for Tier 2 employees (employees hired after July 1, 2011).

## Plan Changes Since the January 1, 2013 Valuation

The January 1, 2014 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $255,000 in 2013 to $260,000 in 2014.
- An increase in the annual maximum benefit limit under IRC section 415 from $205,000 in 2013 to $210,000 in 2014.
- A lump sum optional payment form was added (for all but Middletown participants).
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $45.00 to $46.00 as of January 1, 2014.
- For participants at the St. Joseph location:
  - The minimum benefit multiplier was increased from $43.00 to $44.00 as of July 16, 2014.
- For participants at the Portland location:
  - Plan closed to employees hired on or after February 16, 2013.
- For participants at the Florence location:
  - Plan closed to employees hired on or after March 3, 2013.
- For participants at the Tampa location:
  - Plan closed to employees hired on or after May 6, 2013.
- For participants at the Winston-Salem location:
  - Plan closed to employees hired on or after August 8, 2013.

## Plan Changes Since the January 1, 2012 Valuation

The January 1, 2013 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $250,000 in 2012 to $255,000 in 2013.
- An increase in the annual maximum benefit limit under IRC section 415 from $200,000 in 2012 to $205,000 in 2013.
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $44.00 to $45.00 as of January 1, 2013.
- For participants at the St. Joseph location:
  - The minimum benefit multiplier was increased from $42.00 to $43.00 as of July 16, 2012.
  - Lump sum death benefit increased to $3,500 as of July 16, 2012.
  - Plan closed to employees hired on or after July 17, 2012.

## Plan Changes Since the January 1, 2011 Valuation

The January 1, 2012 funding valuation reflected the following plan changes:

- An increase in the annual pay limit under IRC section 401(a)(17) from $245,000 in 2011 to $250,000 in 2012.
- An increase in the annual maximum benefit limit under IRC section 415 from $195,000 in 2011 to $200,000 in 2012.
- For participants at the Geneva location:
  - The minimum benefit multiplier was increased from $43.00 to $44.00 as of January 1, 2012.
  - The supplemental benefit multiplier was created as $10.00 as of January 1, 2012.
  - Closed to employees hired on or after January 1, 2012.
- For participants at the Toledo location:
  - The minimum benefit multiplier was increased from $44.50 to $45.50 as of May 1, 2012 for Tier 1 employees (employees hired on or before July 1, 2011).
  - The minimum benefit multiplier was increased from $34.50 to $35.50 as of May 1, 2012 for Tier 2 employees (employees hired after July 1, 2011).
- For participants at the Tampa location, the minimum benefit multiplier was increased from $35.00 to $36.00 as of January 1, 2012.

## Plan Changes Since the January 1, 2010 Valuation

The January 1, 2011 funding valuation reflected the following plan changes:

- For participants at the St. Joseph location, the minimum benefit multiplier was increased from $41.00 to $42.00 as of August 1, 2011.
- For participants at the Tampa location:
  - The minimum benefit multiplier was increased from $34.00 to $35.00 as of January 1, 2011.
  - The supplemental benefit multiplier was increased from $10.00 to $11.00 as of January 1, 2011.
- For participants at the Toledo location, the minimum benefit multiplier was increased from $43.50 to $44.50 as of May 1, 2011.

For participants at the Winston-Salem location, the minimum benefit multiplier was increased from $47.00 to $48.00 as of August 1, 2011.

## 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
# Johnson Controls Pension Plan Battery Division Hourly Employees
# EIN: 39-1684871 PN: 016

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

Number of Participants and Average Compensation

| Attained Age | Years of Credited Service | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | <1 | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40+ |
| <25 | 21<br>$24,324 | 29<br>$58,607 | | | | | | | | |
| 25-29 | 16 | 99<br>$63,788 | 21<br>$65,553 | | | | | | | |
| 30-34 | 9 | 91<br>$64,236 | 57<br>$69,536 | 9 | 1 | | | | | |
| 35-39 | 16 | 92<br>$65,239 | 58<br>$66,250 | 23<br>$64,131 | 39<br>$77,334 | | | | | |
| 40-44 | 11 | 85<br>$66,282 | 60<br>$68,244 | 32<br>$73,872 | 90<br>$76,801 | 6 | | | | |
| 45-49 | 7 | 79<br>$61,717 | 56<br>$67,399 | 44<br>$69,538 | 88<br>$73,629 | 10 | 33<br>$73,877 | | | |
| 50-54 | 9 | 72<br>$66,155 | 64<br>$65,778 | 37<br>$66,505 | 97<br>$73,674 | 16 | 70<br>$72,356 | 39<br>$69,358 | 10 | |
| 55-59 | 7 | 44<br>$62,873 | 32<br>$69,418 | 19 | 73<br>$70,026 | 26<br>$74,795 | 62<br>$70,250 | 77<br>$69,024 | 63<br>$67,710 | 3 |
| 60-64 | 2 | 16 | 20<br>$72,650 | 10 | 29<br>$70,180 | 11 | 22<br>$63,947 | 59<br>$68,734 | 32<br>$63,380 | 24<br>$65,556 |
| 65-69 | | | 3 | 1 | 4 | 1 | 4 | 2 | 2 | 3 |
| 70+ | | | | | | | | | | |

N-2,247