

<div>Form 5500-SF</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Short Form Annual Return/Report of Small Employee Benefit Plan</div> <div>This form is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA), and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500-SF.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>														
<div>Part IAnnual Report Identification Information</div> <div>For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015</div> <div><div>A</div><div>This return/report is for:</div><div><div>☒ a single-employer plan</div><div>☐ a multiple-employer plan (not multiemployer) (Filers checking this box must attach a list of participating employer information in accordance with the form instructions)</div><div>☐ a one-participant plan</div><div>☐ a foreign plan</div></div></div> <div><div>B</div><div>This return/report is</div><div><div>☐ the first return/report</div><div>☐ the final return/report</div><div>☐ an amended return/report</div><div>☐ a short plan year return/report (less than 12 months)</div></div></div> <div><div>C</div><div>Check box if filing under:</div><div><div>☒ Form 5558</div><div>☐ automatic extension</div><div>☐ DFVC program</div><div>☐ special extension (enter description)</div></div></div>																
<div>Part II Basic Plan Information—enter all requested information</div> <div><div><div><div>1a</div><div>Name of plan</div><div>LEDVANCE LLC PUERTO RICO CORPORATION PENSION PLAN FOR SALARIED EES</div></div><div><div>1b</div><div>Three-digit plan number (PN) ▶</div><div>021</div></div><div><div>1c</div><div>Effective date of plan</div><div>01/29/1993</div></div></div><div><div><div>2a</div><div>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) OSRAM SYLVANIA PUERTO RICO CORPORATION INC. PO BOX 509 LUQUILLO, PR 00773-0509</div></div><div><div>2b</div><div>Employer Identification Number (EIN)</div><div>66-0490498</div></div><div><div>2c</div><div>Sponsor's telephone number</div><div>732-321-3100</div></div><div><div>2d</div><div>Business code (see instructions)</div><div>551112</div></div></div><div><div><div>3a</div><div>Plan administrator's name and address ☐ Same as Plan Sponsor. BENEFITS ADMIN COMMITTEE AND INVEST COMMITTEE OF OSRAM SYLVANIA INC. 200 BALLARDVALE STREET ATTN HR SERVICES CENTER WILMINGTON, MA 01887</div></div><div><div>3b</div><div>Administrator's EIN</div><div>04-3349012</div></div><div><div>3c</div><div>Administrator's telephone number</div><div>844-862-2813</div></div></div><div><div><div>4</div><div>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.</div></div><div><div>a</div><div>Sponsor's name</div></div><div><div><div>4b</div><div>EIN</div></div><div><div>4c</div><div>PN</div></div></div><div><div><div>5a</div><div>Total number of participants at the beginning of the plan year</div><div>70</div></div><div><div>b</div><div>Total number of participants at the end of the plan year</div><div>70</div></div><div><div>c</div><div>Number of participants with account balances as of the end of the plan year (defined benefit plans do not complete this item)</div><div></div></div><div><div>d(1)</div><div>Total number of active participants at the beginning of the plan year</div><div>21</div></div><div><div>d(2)</div><div>Total number of active participants at the end of the plan year</div><div>9</div></div><div><div>e</div><div>Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested</div><div>0</div></div></div></div><div><div>Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.</div><div>Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, 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.</div><table><tr><td rowspan="2">SIGN HERE</td><td>Filed with authorized/valid electronic signature.</td><td>10/14/2016</td><td>NICOLE VIENT</td></tr><tr><td>Signature of plan administrator</td><td>Date</td><td>Enter name of individual signing as plan administrator</td></tr><tr><td rowspan="2">SIGN HERE</td><td>Filed with authorized/valid electronic signature.</td><td>10/14/2016</td><td>ANDREW MARTIN</td></tr><tr><td>Signature of employer/plan sponsor</td><td>Date</td><td>Enter name of individual signing as employer or plan sponsor</td></tr></table><div><div>Preparer's name (including firm name, if applicable) and address (include room or suite number)</div><div>Preparer's telephone number</div></div></div></div> <div data-bbox="43 2018 967 2041" data-label="Page-Footer"><p>For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500-SF.</p></div> <div data-bbox="1359 2018 1570 2062" data-label="Page-Footer"><p>Form 5500-SF (2015) v. 150123</p></div>			SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2016	NICOLE VIENT	Signature of plan administrator	Date	Enter name of individual signing as plan administrator	SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2016	ANDREW MARTIN	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2016		NICOLE VIENT												
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator													
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2016	ANDREW MARTIN													
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor													

- 6a** Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) ☒ Yes ☐ No
- b** Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) ☒ Yes ☐ No
- If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.**
- c** 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 III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets.....	7a	5352095	5860166
b Total plan liabilities	7b	10815	12677
c Net plan assets (subtract line 7b from line 7a)	7c	5341280	5847489
8 Income, Expenses, and Transfers for this Plan Year		(a) Amount	(b) Total
a Contributions received or receivable from:			
(1) Employers	8a(1)	946560	
(2) Participants	8a(2)		
(3) Others (including rollovers)	8a(3)		
b Other income (loss)	8b	-175853	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		770707
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	200867	
e Certain deemed and/or corrective distributions (see instructions)....	8e	0	
f Administrative service providers (salaries, fees, commissions).....	8f	63631	
g Other expenses	8g		
h Total expenses (add lines 8d, 8e, 8f, and 8g).....	8h		264498
i Net income (loss) (subtract line 8h from line 8c)	8i		506209
j Transfers to (from) the plan (see instructions)	8j		

Part IV Plan Characteristics

9a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 3C 3F 3H

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

Part V Compliance Questions

10 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? (See instructions and DOL's Voluntary Fiduciary Correction Program)	10a		X		
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	10b		X		
c Was the plan covered by a fidelity bond?.....	10c	X			500000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	10d		X		
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service, or other organization that provides some or all of the benefits under the plan? (See instructions.).....	10e		X		
f Has the plan failed to provide any benefit when due under the plan?	10f		X		
g Did the plan have any participant loans? (If "Yes," enter amount as of year end.)	10g		X		
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	10h		X		
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.....	10i				
j Did the plan trust incur unrelated business taxable income?	10j		X		

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and line 11a below)..... ☒ Yes ☐ No

11a Enter the unpaid minimum required contribution for all years from Schedule SB (Form 5500) line 40..... **11a** 0

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA?... ☐ Yes ☒ No

(If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.)

a 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 letter ruling granting the waiver. Month Day Year

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year	12b	
c Enter the amount contributed by the employer to the plan for this plan year	12c	
d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount)	12d	
e Will the minimum funding amount reported on line 12d be met by the funding deadline?	☐ Yes ☐ No ☐ N/A	

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year **13a**

b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? ☐ Yes ☒ No

c 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.)

13c(1) Name of plan(s):	13c(2) EIN(s)	13c(3) PN(s)

Part VIII Trust Information

14a Name of trust OSRAM SYLVANIA PENSION PLAN FOR PUERTO RICO SALARIED EMPLOYEES	14b Trust's EIN 660613582
14c Name of trustee or custodian BANCO POPULAR	14d Trustee's or custodian's telephone number 787-765-9800

Part IX IRS Compliance Questions

15a Is the plan a 401(k) plan? ☐ Yes ☐ No

15b 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

15c 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

16a 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

16b 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

17a Has the plan been timely amended for all required tax law changes? ☐ Yes ☐ No ☐ N/A

17b 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).

17c 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 ____.

17d 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 ____/____/____.

18 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

19 Were in-service distributions made during the plan year? ☐ Yes ☐ No

If "Yes," enter amount

20 Were required minimum distributions made to 5% owners who have attained age 70 ½ (regardless of whether or not retired), as required under section 401(a)(9)? ☐ Yes ☐ No ☐ N/A

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

▶ Round off amounts to nearest dollar.
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan LEDVANCE LLC PUERTO RICO CORPORATION PENSION PLAN FOR SALARIED EES	B Three-digit plan number (PN) ▶ 021
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF OSRAM SYLVANIA PUERTO RICO CORPORATION INC.	D Employer Identification Number (EIN) 66-0490498

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500
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Part I	Basic Information
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1 Enter the valuation date: Month 01 Day 01 Year 2015			
2 Assets:			
a Market value	2a	5352095	
b Actuarial value	2b	5352095	
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	25	1731587	1731587
b For terminated vested participants	32	1124559	1124559
c For active participants	13	1530959	1547406
d Total	70	4387105	4403552
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	6.28%	
6 Target normal cost	6	117987	

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	09/01/2016	Date
KEITH T. SARTAIN	14-05002	Most recent enrollment number
HEWITT ASSOCIATES LLC	202-223-0673	Telephone number (including area code)
1120 20TH STREET NW, SUITE 600 WASHINGTON, DC 20036		
Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	1026020
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	153532
9 Amount remaining (line 7 minus line 8)	0	872488
10 Interest on line 9 using prior year's actual return of <u>10.83</u> %	0	94490
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.49</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	966978

Part III Funding Percentages		
14 Funding target attainment percentage	14	99.58 %
15 Adjusted funding target attainment percentage	15	121.54 %
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	100.43 %
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
05/18/2016	400000	0			
06/21/2016	546560	0			
			Totals ►	18(b)	946560
				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	867510
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd

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

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 0
22 Weighted average retirement age				22 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	117987	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	18435	3066	
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	121053	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	121053	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	867510	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	746457	
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
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees

EIN: 66-0490498 PN: 021

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)	(b)	(c)	(d)
Age	Rate	Weight	Product (a) × (b) × (c)
55.5	2.00%	1.0000	1.11
56.5	2.00%	0.9800	1.11
57.5	2.00%	0.9604	1.10
58.5	2.00%	0.9412	1.10
59.5	2.00%	0.9224	1.10
60.5	5.00%	0.9039	2.73
61.5	5.00%	0.8587	2.64
62.5	30.00%	0.8158	15.30
63.5	25.00%	0.5711	9.07
64.5	25.00%	0.4283	6.91
65	100.00%	0.3212	20.88
Weighted Average			63.05

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees
EIN: 66-0490498 PN: 021

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

Attained Age	Number of Participants									
	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34		1	1							
35-39										
40-44			1							
45-49				1	1	1				
50-54			1				1			
55-59								1		
60-64							1	2	1	
65-69										
70+										

N-13

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees
EIN: 66-0490498 PN: 021

Schedule SB, line 32—Schedule of Amortization Bases

Type of Base	Present Value of Installments	Valuation Date Established	Remaining Years in Amortization Period	Amortization Amount
Shortfall	\$18,435	January 1, 2015	7	\$3,066

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees
EIN: 66-0490498 PN: 021

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

Interest Rates for Minimum Funding Purposes	Based on segment rates with no lookback (as of January 2015), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA.
1st Segment Rate	4.72%
2nd Segment Rate	6.11%
3rd Segment Rate	6.81%
Interest Rates for Maximum Tax Purposes	Based on segment rates with no lookback (as of January 2015), without regard to interest rate stabilization.
1st Segment Rate	1.22%
2nd Segment Rate	4.11%
3rd Segment Rate	5.20%
Salary Increases	
Minimum Funding Target Normal Cost	3.00%
Maximum Tax Expected Benefit Increase	3.00%
Social Security Wage Base Increases	Future wage indices are based on a national wage increase of 2.50% per year.
Optional Payment Form Election Percentage	100% Life Annuity.
Retirement Age	
Active Participants	See Table 1.
Terminated Vested Participants	Age 65.
Mortality Rates	
Healthy and Disabled	Generational mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(d).
Withdrawal Rates	See Table 2.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees
EIN: 66-0490498 PN: 021

Disability Rates	None.
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	2014 Pensionable earnings rolled forward one year with the salary increase assumption.
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	\$81,269. Based on prior year's administrative expenses.
Actuarial Method	Standard unit credit cost method.
Valuation Date	January 1, 2015.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees
EIN: 66-0490498 PN: 021

Table 1

Retirement Rates

<u>Age</u>	<u>Rate</u>
55	2.00%
56	2.00%
57	2.00%
58	2.00%
59	2.00%
60	5.00%
61	5.00%
62	30.00%
63	25.00%
64	25.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Withdrawal Rates—Male

Age	Years of Service					
	0	1	2	3	4	5+
20	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
21	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
22	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
23	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
24	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
25	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
26	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
27	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
28	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
29	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
30	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
31	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
32	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
33	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
34	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
35	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
36	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
37	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
38	13.00%	12.00%	11.00%	10.00%	9.00%	8.70%
39	13.00%	12.00%	11.00%	10.00%	9.00%	8.10%
40	13.00%	12.00%	11.00%	10.00%	9.00%	7.70%
41	13.00%	12.00%	11.00%	10.00%	9.00%	7.30%
42	13.00%	12.00%	11.00%	10.00%	9.00%	7.00%
43	13.00%	12.00%	11.00%	10.00%	9.00%	6.70%
44	13.00%	12.00%	11.00%	10.00%	9.00%	6.40%
45	13.00%	12.00%	11.00%	10.00%	9.00%	6.10%
46	13.00%	12.00%	11.00%	10.00%	9.00%	5.80%
47	13.00%	12.00%	11.00%	10.00%	9.00%	5.50%
48	13.00%	12.00%	11.00%	10.00%	9.00%	5.20%
49	13.00%	12.00%	11.00%	10.00%	9.00%	4.90%

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OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Withdrawal Rates—Male

Age	Years of Service					
	0	1	2	3	4	5+
50	13.00%	12.00%	11.00%	10.00%	9.00%	4.60%
51	13.00%	12.00%	11.00%	10.00%	9.00%	4.20%
52	13.00%	12.00%	11.00%	10.00%	9.00%	3.80%
53	13.00%	12.00%	11.00%	10.00%	9.00%	3.30%
54	13.00%	12.00%	11.00%	10.00%	9.00%	2.90%
55	13.00%	12.00%	11.00%	10.00%	9.00%	2.40%
56	13.00%	12.00%	11.00%	10.00%	9.00%	1.90%
57	13.00%	12.00%	11.00%	10.00%	9.00%	1.40%
58	13.00%	12.00%	11.00%	10.00%	9.00%	1.00%
59+	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

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OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Withdrawal Rates—Female

Age	Years of Service					
	0	1	2	3	4	5+
20	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
21	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
22	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
23	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
24	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
25	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
26	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
27	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
28	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
29	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
30	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
31	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
32	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
33	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
34	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
35	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
36	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
37	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
38	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
39	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
40	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
41	13.00%	12.00%	11.00%	10.00%	9.00%	8.70%
42	13.00%	12.00%	11.00%	10.00%	9.00%	8.40%
43	13.00%	12.00%	11.00%	10.00%	9.00%	8.10%
44	13.00%	12.00%	11.00%	10.00%	9.00%	7.80%
45	13.00%	12.00%	11.00%	10.00%	9.00%	7.50%
46	13.00%	12.00%	11.00%	10.00%	9.00%	7.20%
47	13.00%	12.00%	11.00%	10.00%	9.00%	6.90%
48	13.00%	12.00%	11.00%	10.00%	9.00%	6.60%
49	13.00%	12.00%	11.00%	10.00%	9.00%	6.30%

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Withdrawal Rates—Female

Age	Years of Service					
	0	1	2	3	4	5+
50	13.00%	12.00%	11.00%	10.00%	9.00%	6.00%
51	13.00%	12.00%	11.00%	10.00%	9.00%	5.60%
52	13.00%	12.00%	11.00%	10.00%	9.00%	5.10%
53	13.00%	12.00%	11.00%	10.00%	9.00%	4.70%
54	13.00%	12.00%	11.00%	10.00%	9.00%	4.20%
55	13.00%	12.00%	11.00%	10.00%	9.00%	3.60%
56	13.00%	12.00%	11.00%	10.00%	9.00%	3.10%
57	13.00%	12.00%	11.00%	10.00%	9.00%	2.60%
58	13.00%	12.00%	11.00%	10.00%	9.00%	2.00%
59+	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Schedule SB, Part V—Summary of Plan Provisions

Effective Date	Originally effective January 29, 1993. Amended and restated January 1, 2010.
Eligibility	Hire date if a participant on December 31, 1999, or retroactive to hire date (or plan year following date of hire) upon completion of 1,000 hours of service in the 12 month period following the date of hire (or any successive plan year) if hired after December 31, 1999.
Normal Retirement Eligibility	Age 65 and fifth anniversary of participation.
Benefit	The annual pension is 0.9% of average annual compensation (AAC) up to covered compensation plus 1.2% of AAC in excess of covered compensation times credited service.
Early Retirement Eligibility	Age 55 with 15 years of credited service.
Benefit	The annual pension is the accrued benefit payable at age 65, but reduced 3% per year if payments commence before age 65.
Disability Eligibility	Fifteen years of credited service.
Benefit	The accrued benefit is payable at normal retirement date, with an actuarially reduced amount available immediately.
Termination Eligibility	Five years of vesting service.
Benefit	The annual pension is accrued benefit payable at age 65.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Death Benefits

Before Retirement

If the member dies after he has a vested right, the spouse receives a pension for life equal to $\frac{1}{2}$ of the joint and 50% survivor benefit that would have been payable at normal retirement if the member had terminated employment on the date of his death. The spouse's pension is payable at the member's normal retirement date.

After Retirement

The normal form of payment is a life annuity. If the member has a spouse, this normal form is automatically converted to a joint and 50% survivor option unless such conversion is waived.

Employee Contributions

None required or permitted. All prior employee contributions will be refunded.

Definitions

Average Annual Compensation

Highest average annual compensation in any 60 consecutive months.

Covered Compensation

The average of the maximum Social Security taxable wage bases for an employee attaining age 65 in the year in which the participant terminates or retires.

Actuarial Equivalence

Applicable factors specified under the plan's tables (Early Commencement Factors, Factors for Small Pensions, Disability Joint and Survivor Option Factors, Certain and Life Option Factors, and Joint and Survivor Option Factors). For lump sum calculations, the 1994 Group Annuity Reserving Table as specified by IRS Notice 2001-62 and the annual interest rate on 30-year Treasury securities for the month of August preceding the plan year in which the distribution occurs will be used to determine the present value.

Forms of Payment

Single life annuity and optional joint and survivor annuity (33 $\frac{1}{3}$ %, 50%, 75%, or 100%).

Payment of Small Amounts

Non-elective lump sum payment if the present value does not exceed \$5,000.

Plan Year

Calendar year.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Credited Service

One year credited for 2,080 hours (or minimum standard hours worked according to employer policy). Partial years credited based on the ratio of hours of service to 2,080 (or minimum standard hours).

Vesting Service

One year credited for 1,000 hours of service. Partial years credited based on the ratio of hours of service to 2,080 (or minimum standard hours).

Changes in Plan Provisions for the January 1, 2015 Valuation

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

- As of January 1, 2015, the qualified plan 401(a)(17) pay limit was increased to \$265,000.

Changes in Plan Provisions for the January 1, 2014 Valuation

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

- As of January 1, 2014, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$210,000 and \$260,000 respectively.

Changes in Plan Provisions for the January 1, 2013 Valuation

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

- As of January 1, 2013, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$205,000 and \$255,000 respectively.

Changes in Plan Provisions for the January 1, 2012 Valuation

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

- As of January 1, 2012, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$200,000 and \$250,000 respectively.

Changes in Plan Provisions for the January 1, 2011 Valuation

The January 1, 2011 funding valuation does not reflect any plan changes.

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

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

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2015

Date	Amount	Days to Discount to 1/1/2015 at 6.28%	Interest Adjusted Contribution
May 18, 2016	\$ 400,000	503	\$ 367,796
June 21, 2016	<u>546,560</u>	537	<u>499,714</u>
Total Contribution	\$ 946,560		\$ 867,510

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	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 <hr/> 2015 <hr/> This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

► **Round off amounts to nearest dollar.**
 ► **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan OSRAM SYLVANIA PUERTO RICO CORPORATION PENSION PLAN FOR SALARIED EES	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">B Three-digit plan number (PN) ►</td> <td style="width: 40%; text-align: center;">021</td> </tr> </table>	B Three-digit plan number (PN) ►	021
B Three-digit plan number (PN) ►	021		
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF OSRAM SYLVANIA PUERTO RICO CORPORATION INC.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>D Employer Identification Number (EIN) 66-0490498</td> </tr> </table>	D Employer Identification Number (EIN) 66-0490498	
D Employer Identification Number (EIN) 66-0490498			
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B			
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500			

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a	5,352,095	
b Actuarial value	2b	5,352,095	
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.....	25	1,731,587	1,731,587
b For terminated vested participants.....	32	1,124,559	1,124,559
c For active participants.....	13	1,530,959	1,547,406
d Total.....	70	4,387,105	4,403,552
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	6.28%	
6 Target normal cost.....	6	117,987	

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	Keith T. Sartain Signature of actuary	September 1, 2016 Date 1405002
KEITH T. SARTAIN Type or print name of actuary		Most recent enrollment number 202-223-0673
HEWITT ASSOCIATES LLC Firm name		Telephone number (including area code)
1120 20TH STREET NW, SUITE 600 WASHINGTON DC 20036 Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	1,026,020
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	153,532
9 Amount remaining (line 7 minus line 8)	0	872,488
10 Interest on line 9 using prior year's actual return of <u>10.83</u> %	0	94,490
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.49</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	966,978

Part III Funding Percentages

14 Funding target attainment percentage	14	99.58 %
15 Adjusted funding target attainment percentage	15	121.54 %
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	100.43 %
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
05/18/2016	400,000	0			
06/21/2016	546,560	0			
Totals ►			18(b)	946,560	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	867,510

20 Quarterly contributions and liquidity shortfalls:

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 0
22 Weighted average retirement age			22 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	117,987
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		18,435	3,066
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	121,053
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)		36	121,053
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37	867,510
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	746,457
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
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees

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Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2015

Date	Amount	Days to Discount to 1/1/2015 at 6.28%	Interest Adjusted Contribution
May 18, 2016	\$ 400,000	503	\$ 367,796
June 21, 2016	<u>546,560</u>	537	<u>499,714</u>
Total Contribution	\$ 946,560		\$ 867,510

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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

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

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55.5	2.00%	1.0000	1.11
56.5	2.00%	0.9800	1.11
57.5	2.00%	0.9604	1.10
58.5	2.00%	0.9412	1.10
59.5	2.00%	0.9224	1.10
60.5	5.00%	0.9039	2.73
61.5	5.00%	0.8587	2.64
62.5	30.00%	0.8158	15.30
63.5	25.00%	0.5711	9.07
64.5	25.00%	0.4283	6.91
65	100.00%	0.3212	20.88
Weighted Average			63.05

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
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Schedule SB, Part V—Statement of Actuarial Assumptions/Methods

Interest Rates for Minimum Funding Purposes	Based on segment rates with no lookback (as of January 2015), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA.
1st Segment Rate	4.72%
2nd Segment Rate	6.11%
3rd Segment Rate	6.81%
Interest Rates for Maximum Tax Purposes	Based on segment rates with no lookback (as of January 2015), without regard to interest rate stabilization.
1st Segment Rate	1.22%
2nd Segment Rate	4.11%
3rd Segment Rate	5.20%
Salary Increases	
Minimum Funding Target Normal Cost	3.00%
Maximum Tax Expected Benefit Increase	3.00%
Social Security Wage Base Increases	Future wage indices are based on a national wage increase of 2.50% per year.
Optional Payment Form Election Percentage	100% Life Annuity.
Retirement Age	
Active Participants	See Table 1.
Terminated Vested Participants	Age 65.
Mortality Rates	
Healthy and Disabled	Generational mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(d).
Withdrawal Rates	See Table 2.

Schedule SB Attachment (Form 5500)—2015 Plan Year
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Disability Rates	None.
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	2014 Pensionable earnings rolled forward one year with the salary increase assumption.
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	\$81,269. Based on prior year's administrative expenses.
Actuarial Method	Standard unit credit cost method.
Valuation Date	January 1, 2015.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees

EIN: 66-0490498 PN: 021

Table 1

Retirement Rates

<u>Age</u>	<u>Rate</u>
55	2.00%
56	2.00%
57	2.00%
58	2.00%
59	2.00%
60	5.00%
61	5.00%
62	30.00%
63	25.00%
64	25.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Table 2—Page 1 of 4

Withdrawal Rates—Male

Age	Years of Service					
	0	1	2	3	4	5+
20	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
21	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
22	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
23	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
24	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
25	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
26	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
27	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
28	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
29	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
30	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
31	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
32	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
33	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
34	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
35	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
36	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
37	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
38	13.00%	12.00%	11.00%	10.00%	9.00%	8.70%
39	13.00%	12.00%	11.00%	10.00%	9.00%	8.10%
40	13.00%	12.00%	11.00%	10.00%	9.00%	7.70%
41	13.00%	12.00%	11.00%	10.00%	9.00%	7.30%
42	13.00%	12.00%	11.00%	10.00%	9.00%	7.00%
43	13.00%	12.00%	11.00%	10.00%	9.00%	6.70%
44	13.00%	12.00%	11.00%	10.00%	9.00%	6.40%
45	13.00%	12.00%	11.00%	10.00%	9.00%	6.10%
46	13.00%	12.00%	11.00%	10.00%	9.00%	5.80%
47	13.00%	12.00%	11.00%	10.00%	9.00%	5.50%
48	13.00%	12.00%	11.00%	10.00%	9.00%	5.20%
49	13.00%	12.00%	11.00%	10.00%	9.00%	4.90%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Table 2—Page 2 of 4

Withdrawal Rates—Male

Age	Years of Service					
	0	1	2	3	4	5+
50	13.00%	12.00%	11.00%	10.00%	9.00%	4.60%
51	13.00%	12.00%	11.00%	10.00%	9.00%	4.20%
52	13.00%	12.00%	11.00%	10.00%	9.00%	3.80%
53	13.00%	12.00%	11.00%	10.00%	9.00%	3.30%
54	13.00%	12.00%	11.00%	10.00%	9.00%	2.90%
55	13.00%	12.00%	11.00%	10.00%	9.00%	2.40%
56	13.00%	12.00%	11.00%	10.00%	9.00%	1.90%
57	13.00%	12.00%	11.00%	10.00%	9.00%	1.40%
58	13.00%	12.00%	11.00%	10.00%	9.00%	1.00%
59+	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Withdrawal Rates—Female

Age	Years of Service					
	0	1	2	3	4	5+
20	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
21	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
22	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
23	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
24	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
25	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
26	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
27	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
28	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
29	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
30	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
31	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
32	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
33	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
34	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
35	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
36	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
37	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
38	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
39	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
40	13.00%	12.00%	11.00%	10.00%	9.00%	9.00%
41	13.00%	12.00%	11.00%	10.00%	9.00%	8.70%
42	13.00%	12.00%	11.00%	10.00%	9.00%	8.40%
43	13.00%	12.00%	11.00%	10.00%	9.00%	8.10%
44	13.00%	12.00%	11.00%	10.00%	9.00%	7.80%
45	13.00%	12.00%	11.00%	10.00%	9.00%	7.50%
46	13.00%	12.00%	11.00%	10.00%	9.00%	7.20%
47	13.00%	12.00%	11.00%	10.00%	9.00%	6.90%
48	13.00%	12.00%	11.00%	10.00%	9.00%	6.60%
49	13.00%	12.00%	11.00%	10.00%	9.00%	6.30%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Table 2—Page 4 of 4

Withdrawal Rates—Female

Age	Years of Service					
	0	1	2	3	4	5+
50	13.00%	12.00%	11.00%	10.00%	9.00%	6.00%
51	13.00%	12.00%	11.00%	10.00%	9.00%	5.60%
52	13.00%	12.00%	11.00%	10.00%	9.00%	5.10%
53	13.00%	12.00%	11.00%	10.00%	9.00%	4.70%
54	13.00%	12.00%	11.00%	10.00%	9.00%	4.20%
55	13.00%	12.00%	11.00%	10.00%	9.00%	3.60%
56	13.00%	12.00%	11.00%	10.00%	9.00%	3.10%
57	13.00%	12.00%	11.00%	10.00%	9.00%	2.60%
58	13.00%	12.00%	11.00%	10.00%	9.00%	2.00%
59+	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees

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Schedule SB, Part V—Summary of Plan Provisions

Effective Date	Originally effective January 29, 1993. Amended and restated January 1, 2010.
Eligibility	Hire date if a participant on December 31, 1999, or retroactive to hire date (or plan year following date of hire) upon completion of 1,000 hours of service in the 12 month period following the date of hire (or any successive plan year) if hired after December 31, 1999.
Normal Retirement Eligibility	Age 65 and fifth anniversary of participation.
Benefit	The annual pension is 0.9% of average annual compensation (AAC) up to covered compensation plus 1.2% of AAC in excess of covered compensation times credited service.
Early Retirement Eligibility	Age 55 with 15 years of credited service.
Benefit	The annual pension is the accrued benefit payable at age 65, but reduced 3% per year if payments commence before age 65.
Disability Eligibility	Fifteen years of credited service.
Benefit	The accrued benefit is payable at normal retirement date, with an actuarially reduced amount available immediately.
Termination Eligibility	Five years of vesting service.
Benefit	The annual pension is accrued benefit payable at age 65.

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried
Employees

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Death Benefits

Before Retirement

If the member dies after he has a vested right, the spouse receives a pension for life equal to $\frac{1}{2}$ of the joint and 50% survivor benefit that would have been payable at normal retirement if the member had terminated employment on the date of his death. The spouse's pension is payable at the member's normal retirement date.

After Retirement

The normal form of payment is a life annuity. If the member has a spouse, this normal form is automatically converted to a joint and 50% survivor option unless such conversion is waived.

Employee Contributions

None required or permitted. All prior employee contributions will be refunded.

Definitions

Average Annual Compensation

Highest average annual compensation in any 60 consecutive months.

Covered Compensation

The average of the maximum Social Security taxable wage bases for an employee attaining age 65 in the year in which the participant terminates or retires.

Actuarial Equivalence

Applicable factors specified under the plan's tables (Early Commencement Factors, Factors for Small Pensions, Disability Joint and Survivor Option Factors, Certain and Life Option Factors, and Joint and Survivor Option Factors). For lump sum calculations, the 1994 Group Annuity Reserving Table as specified by IRS Notice 2001-62 and the annual interest rate on 30-year Treasury securities for the month of August preceding the plan year in which the distribution occurs will be used to determine the present value.

Forms of Payment

Single life annuity and optional joint and survivor annuity (33 $\frac{1}{3}$ %, 50%, 75%, or 100%).

Payment of Small Amounts

Non-elective lump sum payment if the present value does not exceed \$5,000.

Plan Year

Calendar year.

Schedule SB Attachment (Form 5500)—2015 Plan Year OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

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Credited Service

One year credited for 2,080 hours (or minimum standard hours worked according to employer policy). Partial years credited based on the ratio of hours of service to 2,080 (or minimum standard hours).

Vesting Service

One year credited for 1,000 hours of service. Partial years credited based on the ratio of hours of service to 2,080 (or minimum standard hours).

Changes in Plan Provisions for the January 1, 2015 Valuation

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

- As of January 1, 2015, the qualified plan 401(a)(17) pay limit was increased to \$265,000.

Changes in Plan Provisions for the January 1, 2014 Valuation

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

- As of January 1, 2014, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$210,000 and \$260,000 respectively.

Changes in Plan Provisions for the January 1, 2013 Valuation

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

- As of January 1, 2013, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$205,000 and \$255,000 respectively.

Changes in Plan Provisions for the January 1, 2012 Valuation

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

- As of January 1, 2012, the qualified plan 415 pension limit and 401(a)(17) pay limit were increased to \$200,000 and \$250,000 respectively.

Changes in Plan Provisions for the January 1, 2011 Valuation

The January 1, 2011 funding valuation does not reflect any plan changes.

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

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

Schedule SB Attachment (Form 5500)—2015 Plan Year
OSRAM Sylvania Puerto Rico Corporation Pension Plan for Salaried Employees

EIN: 66-0490498 PN: 021

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

Attained Age	Number of Participants									
	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34		1	1							
35-39										
40-44			1							
45-49				1	1	1				
50-54			1				1			
55-59								1		
60-64							1	2	1	
65-69										
70+										

N-13

Schedule SB Attachment (Form 5500)—2015 Plan Year
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Schedule SB, line 32—Schedule of Amortization Bases

Type of Base	Present Value of Installments	Valuation Date Established	Remaining Years in Amortization Period	Amortization Amount
Shortfall	\$18,435	January 1, 2015	7	\$3,066