

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 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2019</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☒
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>ROBERT BOSCH LLC-NEW RICHMOND PRODUCTION HOURLY RETIREMENT PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td><u>015</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/2004</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>015</u>	1c Effective date of plan <u>07/01/2004</u>	
1b Three-digit plan number (PN) ▶	<u>015</u>				
1c Effective date of plan <u>07/01/2004</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>ROBERT BOSCH LLC</u> <u>38000 HILLS TECH DRIVE</u> <u>FARMINGTON HILLS, MI 48331</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">2b Employer Identification Number (EIN) <u>36-2903176</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>248-553-9000</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>423100</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>36-2903176</u>	2c Plan Sponsor's telephone number <u>248-553-9000</u>	2d Business code (see instructions) <u>423100</u>	
2b Employer Identification Number (EIN) <u>36-2903176</u>					
2c Plan Sponsor's telephone number <u>248-553-9000</u>					
2d Business code (see instructions) <u>423100</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	09/24/2020	DAVID KAPRIELIAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

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3a Plan administrator's name and address ☐ Same as Plan Sponsor BOSCH BENEFIT PLANS COMMITTEE 38000 HILLS TECH DRIVE FARMINGTON HILLS, MI 48331	3b Administrator's EIN 36-2903176 3c Administrator's telephone number 248-553-9000
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 112
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 40 6a(2) 0 6b 61 6c 45 6d 106 6e 6 6f 112 6g 6h 0
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: 1B 1I 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
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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) ☐ 0 **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 2019 Form M-1 annual report. If the plan was not required to file the 2019 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>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.	<small>OMB No. 1210-0110</small> 2019 This Form is Open to Public Inspection
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

► **Round off amounts to nearest dollar.**

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

A Name of plan <u>ROBERT BOSCH LLC-NEW RICHMOND PRODUCTION HOURLY RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>ROBERT BOSCH LLC</u>	D Employer Identification Number (EIN) <u>36-2903176</u>	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I	Basic Information		
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2019</u>		
2	Assets:		
	a Market value	2a	<u>2541802</u>
	b Actuarial value	2b	<u>2656588</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment.....	<u>64</u>	<u>1371475</u>
	b For terminated vested participants.....	<u>48</u>	<u>858764</u>
	c For active participants	<u>0</u>	<u>0</u>
	d Total.....	<u>112</u>	<u>2230239</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b	
5	Effective interest rate	5	<u>5.50</u> %
6	Target normal cost.....	6	<u>66563</u>

Statement by Enrolled Actuary

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

SIGN HERE	<div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="text-align: center;">Signature of actuary</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"><u>KAREN A. HIRSCHHORN</u></div> <div style="text-align: center;">Type or print name of actuary</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"><u>AON CONSULTING, INC.</u></div> <div style="text-align: center;">Firm name</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"><u>4 OVERLOOK POINT LINCOLNSHIRE, IL 60069-4302</u></div> <div style="text-align: center;">Address of the firm</div>	<div style="border-bottom: 1px solid black; margin-bottom: 10px; text-align: center;"><u>08/07/2020</u></div> <div style="text-align: center;">Date</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px; text-align: center;"><u>20-04099</u></div> <div style="text-align: center;">Most recent enrollment number</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px; text-align: center;"><u>847-295-5000</u></div> <div style="text-align: center;">Telephone number (including area code)</div>
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

**Schedule SB (Form 5500) 2019
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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	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>-5.07</u> %	0	0
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>5.69</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	0

Part III Funding Percentages

14 Funding target attainment percentage	14	119.11 %
15 Adjusted funding target attainment percentage	15	119.11 %
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	122.63 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
3.74 %2nd segment:
5.35 %3rd segment:
6.11 %☐ N/A, full yield curve used**b** Applicable month (enter code)**21b**

4

22 Weighted average retirement age**22****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** 66563**b** Excess assets, if applicable, but not greater than line 31a **31b** 66563**32** Amortization installments:**a** Net shortfall amortization installment Outstanding Balance 0 Installment 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** 0**35** Balances elected for use to offset funding requirement Carryover balance 0 Prefunding balance 0 Total balance 0**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

<p style="text-align: center;">SCHEDULE D (Form 5500)</p> <p style="text-align: center; font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="text-align: center; font-size: small;">Department of Labor Employee Benefits Security Administration</p>	<p style="text-align: center;">DFE/Participating Plan Information</p> <p style="text-align: center; font-size: small;">This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p style="text-align: center; font-weight: bold;">▶ File as an attachment to Form 5500.</p>	<p style="text-align: center; font-size: small;">OMB No. 1210-0110</p> <hr/> <p style="text-align: center; font-size: large; font-weight: bold;">2019</p> <hr/> <p style="text-align: center; font-size: small; font-weight: bold;">This Form is Open to Public Inspection.</p>
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

<p>A Name of plan <u>ROBERT BOSCH LLC-NEW RICHMOND PRODUCTION HOURLY RETIREMENT PLAN</u></p>	<p>B Three-digit plan number (PN) ▶ <u>015</u></p>	
<p>C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ROBERT BOSCH LLC</u></p>	<p>D Employer Identification Number (EIN) <u>36-2903176</u></p>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: ROBERT BOSCH LLC MSTR TRUST RET TR

b Name of sponsor of entity listed in (a): ROBERT BOSCH LLC

c EIN-PN <u>36-2903176-100</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2877732</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan ROBERT BOSCH LLC-NEW RICHMOND PRODUCTION HOURLY RETIREMENT PLAN		B Three-digit plan number (PN) ► 015
C Plan sponsor's name as shown on line 2a of Form 5500 ROBERT BOSCH LLC		D Employer Identification Number (EIN) 36-2903176

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)		
(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)	2541803	2877732
(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	2541803 2877732
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	32977 52623
i	Acquisition indebtedness	1i	
j	Other liabilities	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	32977 52623
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	2508826 2825109

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.

		(a) Amount	(b) Total
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers)	2a(1)(C)	
(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)	0
(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)	0
(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)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		521976
(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		521976

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	118326	
(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)		118326
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)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	87367	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		87367
j Total expenses. Add all expense amounts in column (b) and enter total	2j		205693

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		316283
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unmodified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: PRICEWATERHOUSECOOPERS, LLP

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

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

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
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.).....		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		15000000
4e	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?.....		X	
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?.....		X	
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.)		X	
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4220881. (See instructions.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan ROBERT BOSCH LLC-NEW RICHMOND PRODUCTION HOURLY RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 015
C Plan sponsor's name as shown on line 2a of Form 5500 ROBERT BOSCH LLC		D Employer Identification Number (EIN) 36-2903176
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): 36-3046063		
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 0
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month Day Year If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2019 v. 190130		

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

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**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): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

- a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

- b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Bosch Pension Plan

Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan

Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company)

Pension Plan for Discontinued Operations of Robert Bosch

Robert Bosch LLC-New Richmond Production Hourly Retirement Plan

Financial Statements
December 31, 2019 and 2018

Robert Bosch, LLC and Affiliates Defined Benefit Plans

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Report of Independent Auditors

To the Administrator of Bosch Pension Plan, Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan, Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company), Pension Plan for Discontinued Operations of Robert Bosch, and Robert Bosch LLC-New Richmond Production Hourly Retirement Plan

Report on the Individual Plan Financial Statements

We were engaged to audit the accompanying individual plan financial statements of Bosch Pension Plan, Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan, Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company), Pension Plan for Discontinued Operations of Robert Bosch, and Robert Bosch LLC-New Richmond Production Hourly Retirement Plan (hereafter collectively referred to as the "Plans"), which comprise the individual plan statements of net assets available for benefits as of December 31, 2019 and 2018, and the related individual plan statements of changes in net assets available for benefits for the years then ended, and the related notes to the individual plan financial statements (collectively referred to as the "financial statements" of the Plans).

Management's Responsibility for the Individual Plan Financial Statements

Management is responsible for the preparation and fair presentation of the individual plan 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 individual plan financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

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

Basis for Disclaimers of Opinions

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrators instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by The Northern Trust Company, the trustee of the individual plans, except for comparing such information with the related information included in each of the individual plan's financial statements. We have been informed by the plan administrators that the trustees hold the individual plan investment assets and execute investment transactions. The plan administrators have obtained certifications from the trustees as of December 31, 2019 and 2018 and for



the years then ended, that the information provided to the plan administrators by the trustees is complete and accurate.

Disclaimers of Opinions

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

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

The form and content of the information included in the individual plan financial statements, other than that derived from the information certified by the trustees, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, 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.

PricewaterhouseCoopers LLP

September 24, 2020

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Statements of Net Assets Available for Benefits

	December 31, 2019			
	Bosch Pension Plan	Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan	Bosch Braking Systems Pension Plan for Hourly Employees*	Robert Bosch LLC-New Richmond Production Hourly Retirement Plan
Assets - Interest in the Robert Bosch LLC Master Retirement Trust, at fair value (Note 5)	\$ 1,544,123,690	\$ 101,409,774	\$ 191,291,956	\$ 2,877,732
Liabilities - Accrued expenses	1,271,912	115,144	167,078	52,623
Net Assets Available for Benefits	\$ 1,542,851,778	\$ 101,294,630	\$ 191,124,878	\$ 2,825,109

* Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company)

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Statements of Net Assets Available for Benefits

	December 31, 2018			
	Bosch Pension Plan	Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan	Bosch Braking Systems Pension Plan for Hourly Employees*	Robert Bosch LLC-New Richmond Production Hourly Retirement Plan
Assets - Interest in the Robert Bosch LLC Master Retirement Trust, at fair value (Note 5)	\$ 1,379,830,095	\$ 88,020,277	\$ 169,647,485	\$ 67,351,869
Liabilities - Accrued expenses	937,986	87,227	140,205	98,632
Net Assets Available for Benefits	\$ 1,378,892,109	\$ 87,933,050	\$ 169,507,280	\$ 67,253,237
				\$ 2,508,826

* Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company)

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31, 2019				
	Bosch Pension Plan	Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan	Bosch Braking Systems Pension Plan for Hourly Employees*	Pension Plan for Discontinued Operations of Robert Bosch	Robert Bosch LLC-New Richmond Production Hourly Retirement Plan
Additions - Plan's share of net investment income of Robert Bosch LLC Master Retirement Trust (Note 5)	\$ 284,796,049	\$ 18,167,331	\$ 34,655,859	\$ 13,708,824	\$ 521,976
Deductions					
Benefits paid directly to participants or beneficiaries	114,868,322	4,373,399	12,223,170	5,131,563	118,326
Administrative expenses	5,968,058	432,352	815,091	641,826	87,367
Total deductions	120,836,380	4,805,751	13,038,261	5,773,389	205,693
Net Increase	163,959,669	13,361,580	21,617,598	7,935,435	316,283
Net Assets Available for Benefits					
Beginning of year	1,378,892,109	87,933,050	169,507,280	67,253,237	2,508,826
End of year	\$ 1,542,851,778	\$ 101,294,630	\$ 191,124,878	\$ 75,188,672	\$ 2,825,109

* Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company)

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31, 2018				
	Bosch Pension Plan	Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan	Bosch Braking Systems Pension Plan for Hourly Employees*	Pension Plan for Discontinued Operations of Robert Bosch	Robert Bosch LLC-New Richmond Production Hourly Retirement Plan
Additions - Net - Plan's share of net investment loss of Robert Bosch LLC Master Retirement Trust (Note 5)	\$ (69,745,661) \$	(4,379,936) \$	(8,441,946) \$	(3,359,901) \$	(129,827) \$
Deductions					
Benefits paid directly to participants or beneficiaries	59,012,594	4,331,057	12,349,430	5,250,938	112,877
Administrative expenses	5,841,914	420,692	768,280	673,792	74,249
Total deductions	64,854,508	4,751,749	13,117,710	5,924,730	187,126
Transfers In (Note 8)	-	-	-	4,406,740	-
Net Decrease	(134,600,169)	(9,131,685)	(21,559,656)	(4,877,891)	(316,953)
Net Assets Available for Benefits					
Beginning of year	1,513,492,278	97,064,735	191,066,936	72,131,128	2,825,779
End of year	\$ 1,378,892,109 \$	\$ 87,933,050 \$	\$ 169,507,280 \$	\$ 67,253,237 \$	\$ 2,508,826

* Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company)

December 31, 2019 and 2018

Note 1 - Plan Description

The following descriptions of the Bosch Pension Plan (the "BPP"), Robert Bosch Fuel Systems LLC Hourly-Rated Employees' Pension Plan (the "BFS Plan"), Bosch Braking Systems Pension Plan for Hourly Employees (Provisions Applicable to Employees Represented under the UAW Master Agreement and Provisions Applicable to Hourly Employees of Certain Former Plants of The Budd Company) (the "BSP" Plan), Pension Plan for Discontinued Operations of Robert Bosch (the "DO Plan"), and Robert Bosch LLC-New Richmond Production Hourly Retirement Plan (the "New Richmond Plan"), (collectively, the "Plans") provide only general information. Participants should refer to the respective plan documents for a more complete description of each of the Plans' provisions. The assets of the Plans are invested in the Robert Bosch LLC Master Retirement Trust ("Master Trust").

General

The Plans are noncontributory, defined benefit plans covering eligible employees as described below. The Plans are subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Robert Bosch LLC, Robert Bosch Fuel Systems LLC, Bosch Braking Systems, Robert Bosch Fluid Power and Bosch Packaging Technology, Inc. (collectively, the "Company" or "Companies") are related through common ownership.

The BPP covers employees of Robert Bosch LLC and its participating subsidiaries and affiliates that have adopted the BPP. Employees are eligible to participate upon their date of hire, provided they are not included in a collective bargaining unit or any other group of employees to which the BPP has not been extended.

The BFS Plan covers hourly employees of Robert Bosch Fuel Systems LLC, who are represented by the International Union, United Automobile, Aerospace & Agricultural Implement Workers of America (UAW), UAW Local 167, subject to the NAO Business Unit collective bargaining agreement, who have attained age 21 and have completed one year of service, as defined by the plan document. The BFS Plan also includes certain employees acquired under the terms of the DTC/General Motors Sales Agreement. Effective August 9, 2011, participation in the BFS Plan was frozen to newly hired employees.

The BSP Plan covers hourly employees at the St. Joseph, Michigan facility of Bosch Braking Systems who are represented by UAW Local No. 383 hired on or before August 31, 2012, as well as certain employees of former and closed plants of The Budd Company who were represented by UAW Local 2155, UAW Local 1886 and UAW Local 1910. Employees are eligible to participate in the BSP Plan upon completion of one year of service, as defined in the plan document. Effective September 1, 2012, participation in the Plan was frozen to newly hired, rehired or transferred employees into the union.

The DO Plan was originally established for former hourly employees of Robert Bosch Fluid Power who are members of Lodge No. 437, International Association of Machinists and Aerospace Workers, A.F.L.-C.I.O. (the "Union"). Effective July 2, 2002, the covered plant was closed and all accrued benefits of active, covered participants were frozen and became fully vested. The DO Plan also provides for pension benefits for former employees of various Robert Bosch LLC discontinued operations. Participants of the DO Plan are fully vested in their accrued benefits and all pension accruals are frozen. The following plans sponsored by Robert Bosch LLC (each frozen to new participants and having frozen benefit accruals) have been merged into the DO Plan since 2007:

- Forest City Tool Hourly Employees' Pension Plan
- Vermont American Corporation Pension Plan for Vermont Tap and Die Company and Northeast Tool Division
- Mobile Hydraulics Division U.A.W. Retirement Income Plan
- Bosch Automotive Motor Systems Retirement Plan
- Greenville, North Carolina Division of Vermont American Corporation Restated Pension Plan

December 31, 2019 and 2018

Note 1 - Plan Description (Continued)

- Gilmour Manufacturing Company Hourly Employees' Pension Plan
- Telex Communications, Inc. Employees' Pension Plan ("Telex Plan")
- Hagglunds Drives, Inc. Salaried Pension Plan ("Hagglunds Plan")
- Gilmour Hose Company Hourly Employees' Pension Plan ("Gilmour Hose Plan")
- Bosch Security Systems, Inc. Pension Plan for Hourly Employees ("Security Systems Plan")

The New Richmond Plan covers employees of Bosch Packaging Technology, Inc. who are represented by Local 1217 of the Union, District Lodge No. 77. Employees who have completed one year of service, as defined in the plan document, or were participating in the Doboy - New Richmond Production Retirement Plan as of June 30, 2004, are eligible to participate in the New Richmond Plan. Effective November 1, 2012, participation in the New Richmond Plan was frozen to newly eligible employees.

Contributions

Contributions are made by the Company in actuarially determined amounts. The Company's policy is to make contributions necessary to satisfy ERISA funding standards. Annual contributions meet the minimum funding requirements of ERISA. There were no contributions required for 2019 or 2018.

Payment of Benefits

The Plans provide for payment of normal, early retirement, and death benefits to participants and beneficiaries, as calculated under the provisions of the respective plan documents. The BPP, BFS Plan, DO Plan, and New Richmond Plan provide for disability retirement provisions, as defined in the respective plan documents. The BSP Plan allowed for certain disability retirement benefits until March 31, 2018.

Under the BPP, a participant's total benefit is based on benefits earned under two different formulas. Through December 31, 2004, the BPP benefits were calculated based on a formula that included a participant's final average pay and years of credited service. Those benefits were frozen at December 31, 2004 and, effective January 1, 2005, participants under the BPP began earning a benefit based on a cash balance formula that provides for annual pension credits. Pension credits include pay credits, based on pensionable earnings and age at December 31, and interest credits applied to accumulated pension credits each December 31 using an interest crediting rate that is defined in the BPP document. Effective July 1, 2011, participation in the BPP was frozen to newly hired employees. No participant receives pay credits after June 30, 2011, but continues to receive interest credits. Participants eligible for transition pay credits continued to receive transition pay credits through December 31, 2016.

In general, benefits for the BFS Plan, BSP Plan, DO Plan, and New Richmond Plan are calculated based on years of credited service and the applicable benefit class code, monthly benefit rate, factor, or multiplier defined in each respective plan document and in effect at an employee's termination or retirement. Certain benefits under the DO Plan also incorporate final average pay or pensionable earnings into the benefit formula. Under the DO Plan, the original benefit provisions of each previous plan have been incorporated into and are defined in the DO Plan document. Benefits under the former Telex Plan were calculated based on a cash balance formula. Pay credits under the Telex cash balance formula have been frozen since June 30, 2003; annual interest credits on cash balance accounts are still provided. Under the BFS Plan and BSP Plan, certain participants are also eligible for supplemental early retirement benefits as defined in those plan documents.

December 31, 2019 and 2018

Note 1 - Plan Description (Continued)

Under the BFS Plan, effective May 7, 2020, each participant's benefit class code was frozen. This code is used to determine the benefit rate that ultimately impacts the calculation of benefits. Under the BFS Plan, the BSP Plan, and the New Richmond Plan, effective July 1, 2020, January 1, 2018 and October 31, 2016, respectively, the accrued benefits of all participants were frozen. Participants continue to receive vesting service.

Certain participants may be eligible for optional forms of payment, if elected by the participant, spousal consent is obtained, and as described in the respective plan documents. In general, a participant with 5 years of credited service (3 years of service for the BPP), as defined in the respective plan documents, is fully vested. Participants who are actively employed at a location that is closed become fully vested at that date. The Plans generally provide benefits to participants and beneficiaries in the form of a monthly annuity.

Effective November 1, 2019, the BPP was amended to allow certain vested participants of the BPP, that terminated employment prior to April 1, 2019 to become eligible, as defined in the BPP amendment, to obtain their benefits in the form of one-time lump sum payments. Payments related to this initiative approximated \$51,871,000. The impact of this amendment is not reflected in the actuarial present value of accumulated plan benefits as of December 31, 2018, as reported in Note 3.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right to terminate any of the individual Plans, subject to the provisions set forth in the respective plan documents and ERISA. Should any of the individual Plans terminate at some future time, that plan's net assets will generally not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on the priority of those benefits, the financial condition of the Company, and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation ("PBGC") at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

Party-in-interest Transactions

The Master Trust invests in a corporate bond issued by, and common collective trusts managed by, The Northern Trust Company or its affiliates (Northern Trust). Northern Trust is the trustee of the Plans. These transactions qualify as exempt party-in-interest transactions as defined under ERISA guidelines.

Note 2 - Summary of Significant Accounting Policies

Investment Valuation and Income Recognition

The Master Trust was established for the investment of the Plans' assets. The fair value of each of the Plans' respective interests in the Master Trust is based on the beginning of the year value of each of the respective Plans' interests in the Master Trust, plus actual contributions and allocated investment income less actual distributions for benefit payments and administrative expenses and allocated administrative expenses. The Master Trust's investments are stated at fair value.

Notes to Financial Statements

December 31, 2019 and 2018

Note 2 - Summary of Significant Accounting Policies (Continued)

The common collective trusts are valued at the net asset value per share (NAV), or its equivalent, of the trusts, which is based on the fair value of the trusts' underlying assets. The NAV, as provided by the Trustee, is used as a practical expedient to estimate fair value. There are no unfunded commitments on these investments, and each of the trusts has unlimited redemption frequency. The U.S. government securities and corporate debt instruments are valued using quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices, discounted cash flow models and other pricing models. These models are primarily industry-standard models that consider various assumptions, including time value and yield curve as well as other relevant economic measures. The certificates of deposit are valued at fair value based on their amortized cost. All other investments are valued based on quoted market prices reported in active markets, including the publicly traded partnership. In determining the reasonableness of the methodology, the Plans' Investment Committee evaluates a variety of factors including review of existing contracts, economic conditions, industry and market developments, and overall credit ratings. See Note 6 for additional information.

Investment transactions of the Master Trust are recorded on the trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The net investment income from the Plans' interests in the Master Trust, which consists primarily of the realized gains or losses on the fair value of the Master Trust investments and the unrealized appreciation (depreciation) on those investments, is included in the statements of changes in net assets available for benefits.

Benefit Payments

Benefits are recorded when paid.

Administrative Expenses

Substantially all administrative expenses allowable under ERISA are paid by the Plans; all other expenses are paid by the Company. Administrative expenses paid by the Plans include both identified fees specific to the respective Plans, as well as periodic fees allocated from the Master Trust.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments and lump sum payments that are attributable, under each of the respective Plans' provisions, to the eligible service employees have rendered. These include benefits expected to be paid to:

- (a) Retired or terminated employees or their beneficiaries
- (b) Beneficiaries of employees who have died
- (c) Present employees or their beneficiaries

Actuarial Assumptions

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 probability of payment between the valuation date and the expected date of payment.

Significant actuarial assumptions used in the valuations of the Plans at December 31, 2018 and 2017 are summarized as follows:

Actuarial cost method	Standard unit credit
Interest rate	5.00 percent per annum
Mortality basis	Pri-2012 Table with Scale MP-2019 at December 31, 2018 and RP-2006 Table with Scale MP-2018 at December 31, 2017

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 2 - Summary of Significant Accounting Policies (Continued)

Additional significant actuarial assumptions used in the valuation of BPP at December 31, 2018 and 2017 are summarized as follows:

Retirement age:	
Terminated vested	Age 61
Active	25% by age 64, 100% by age 70
Cash balance interest crediting rate	4.06% and 3.99% as of December 31, 2018 and 2017, respectively

Additional significant actuarial assumptions used in the valuation of the BFS Plan at December 31, 2018 and 2017 are summarized as follows:

Retirement age:	
Terminated vested	Age 61
Active	25% by age 62 for participants with less than 30 years of service and 25% by age 55 for participants with over 30 years of service, 100% by age 70

Additional significant assumptions used in the valuation of the BSP Plan at December 31, 2018 and 2017 are summarized as follows:

Retirement age:	
Terminated vested	Age 60
Active	25% by age 62 for participants with less than 30 years of service and 50% by age 45 for participants with over 30 years of service, 100% by age 70

Additional significant assumptions used in the valuation of the DO Plan at December 31, 2018 and 2017 are summarized as follows:

Retirement age:	
Terminated vested	Age 63
Active	Telex Plan - 25% by age 65 and 100% by age 70; Hagglunds Plan - 100% at age 65 for participants with less than 30 years of service and 100% at age 62 for participants with over 30 years of service
Cash balance interest crediting rate (Telex)	3.47% and 3.02% as of December 31, 2018 and 2017, respectively
Employee contribution interest crediting rate	3.47% as of December 31, 2018 and 2.88% and 2.62% on the VPA and PPA accounts, respectively, as of December 31, 2017

Additional significant assumptions used in the valuation of the New Richmond Plan at December 31, 2018 and 2017 are summarized as follows:

Retirement age:	
Terminated vested	Age 65
Active	30% at age 62, 100% by age 65

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

Use of Estimates

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

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 2 - Summary of Significant Accounting Policies (Continued)

Risks and Uncertainties

Contributions to the Plans, and the actuarial present value of accumulated plan benefits, are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee 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 financial statements. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the financial statements.

New Accounting Pronouncement

During 2019, the Plans adopted Accounting Standards Update (ASU) No. 2017-06, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), and Health and Welfare Benefit Plans (Topic 965) - Employee Benefit Plan Master Trust Reporting*. As a result of the adoption of ASU No. 2017-06 additional disclosures related to the Plans' interest in the underlying investments of the Master Trust have been made. This standard was adopted retrospectively and had no impact on the Plans' net assets available for benefits or changes in net assets available for benefits.

Subsequent Events

The financial statements and related disclosures include evaluation of events up through and including September 24, 2020, which is the date the financial statements were available to be issued.

On March 11, 2020, the World Health Organization identified the spread of a novel strain of coronavirus (COVID-19), which was first identified in late 2019, as a pandemic. Global financial markets have experienced and may continue to experience significant volatility resulting from the spread of COVID-19. The extent of the impact of COVID-19 on the Plans' net assets available for benefits, contributions, and benefit obligations will depend on future developments, including the duration and continued spread of the outbreak.

Note 3 - Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by consulting actuaries. The calculation of the actuarial present value of accumulated plan benefits attributable to participants in the Plans, which was made as of December 31, 2018, the date of the most recent actuarial valuations, is as follows:

	BPP	BFS Plan	BSP Plan	DO Plan	New Richmond Plan
Actuarial present value of accumulated plan benefits:					
Vested benefits:					
Participants currently receiving benefit payments	\$ 663,696,700	\$ 52,274,960	\$ 135,840,865	\$ 46,963,414	\$ 1,369,166
Other vested participants	603,028,261	24,175,534	20,415,166	12,924,082	907,744
Total vested benefits	1,266,724,961	76,450,494	156,256,031	59,887,496	2,276,910
Nonvested benefits	255,806	2,676,438	2,375,521	13,075	13,424
Total actuarial present value of accumulated plan benefits	<u>\$ 1,266,980,767</u>	<u>\$ 79,126,932</u>	<u>\$ 158,631,552</u>	<u>\$ 59,900,571</u>	<u>\$ 2,290,334</u>

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 3 - Accumulated Plan Benefits (Continued)

The following summarizes the significant components of the change in the actuarial present value of accumulated plan benefits from December 31, 2017 to December 31, 2018:

	BPP	BFS Plan	BSP Plan	DO Plan	New Richmond Plan
Actuarial present value of accumulated plan benefits - Beginning of year	\$ 1,271,646,921	\$ 80,975,974	\$ 162,640,080	\$ 63,589,351	\$ 2,309,628
Increase (decrease) during the year attributable to:					
Interest accumulation	62,125,026	3,941,843	7,827,034	3,049,795	112,694
Benefits accumulated (if any) and actuarial experience gain/loss	(178,908)	(880,323)	1,761,280	(530,170)	(15,521)
Benefits paid	(59,012,594)	(4,331,057)	(12,349,430)	(5,250,938)	(112,877)
Changes in actuarial assumptions (primarily the mortality basis)	(7,599,678)	(579,505)	(1,247,412)	(957,467)	(3,590)
Net decrease	(4,666,154)	(1,849,042)	(4,008,528)	(3,688,780)	(19,294)
Actuarial present value of accumulated plan benefits - End of year	<u>\$ 1,266,980,767</u>	<u>\$ 79,126,932</u>	<u>\$ 158,631,552</u>	<u>\$ 59,900,571</u>	<u>\$ 2,290,334</u>

Note 4 - Certified Information

The Northern Trust Company (the "Trustee") holds the Master Trust's investments and executes all investment transactions. The completeness and accuracy of investment information included in Note 5, the interest in the Robert Bosch LLC Master Retirement Trust balances as of December 31, 2019 and 2018 included in the individual plan statements of net assets available for benefits and Plan's share of net investment income of Robert Bosch LLC Master Retirement Trust for the years then ended included in the individual plan statements of changes in net assets available for benefits are based solely on information certified for each Plan and for the Master Trust by the Trustee.

Note 5 - Interest in Master Trust

The Plans' investments are in the Master Trust. Each participating plan has an undivided interest in the Master Trust.

Investment income and administrative expenses relating to the Master Trust are allocated monthly to the individual Plans based upon each plan's pro rata share in the net assets of the Master Trust.

At December 31, 2019 and 2018, the Plans' respective approximate interests in the Master Trust were as follows:

	2019	2018
BPP	80.63 %	80.81 %
BFS Plan	5.30	5.16
BSP Plan	9.99	9.94
DO Plan	3.93	3.94
New Richmond Plan	0.15	0.15
Total	<u>100.00 %</u>	<u>100.00 %</u>

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 5 - Interest in Master Trust (Continued)

The net assets of the Master Trust and each of the Plans' interests in Master Trust balances at December 31, 2019 and 2018 are as follows:

	December 31, 2019					
	Plan's Interest in Master Trust Balances					New Richmond Plan
	Master Trust Balances	BPP	BFS Plan	BSP Plan	DO Plan	
Investments, at fair value:						
Common collective trusts	\$ 1,052,517,052	\$ 848,661,619	\$ 55,735,551	\$ 105,135,424	\$ 41,402,833	\$ 1,581,625
Common stock	439,509,050	354,383,267	23,274,006	43,902,360	17,288,967	660,450
Preferred stock	3,221,529	2,597,571	170,594	321,798	126,725	4,841
Corporate debt instruments - Other	257,833,791	207,895,563	13,653,459	25,754,914	10,142,408	387,447
Corporate debt instruments - Preferred	22,356,127	18,026,107	1,183,858	2,233,144	879,423	33,595
U.S. government securities	117,441,252	94,694,784	6,219,043	11,731,159	4,619,787	176,479
Real estate investment trusts	9,572,020	7,718,075	506,882	956,144	376,535	14,384
Interest bearing cash and certificates of deposit	6,939,191	5,595,182	367,461	693,153	272,967	10,428
Publicly traded partnership	1,245,067	1,003,918	65,932	124,369	48,977	1,871
Total Master Trust investments	1,910,635,079	1,540,576,086	101,176,786	190,852,465	75,158,622	2,871,120
Other assets:						
Accrued interest and dividend income	4,655,391	3,753,717	246,524	465,025	183,129	6,996
Pending trades - Sales	346,572	279,447	18,353	34,619	13,632	521
Total Master Trust assets	1,915,637,042	1,544,609,250	101,441,663	191,352,109	75,355,383	2,878,637
Other liabilities - Pending trades - Purchases	(602,195)	(485,560)	(31,889)	(60,153)	(23,688)	(905)
Total Master Trust net assets	<u>\$ 1,915,034,847</u>	<u>\$ 1,544,123,690</u>	<u>\$ 101,409,774</u>	<u>\$ 191,291,956</u>	<u>\$ 75,331,695</u>	<u>\$ 2,877,732</u>

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 5 - Interest in Master Trust (Continued)

	December 31, 2018					
	Plan's Interest in Master Trust Balances					New Richmond Plan
	Master Trust Balances	BPP	BFS Plan	BSP Plan	DO Plan	
Investments, at fair value:						
Common collective trusts	\$ 961,820,051	\$ 777,295,794	\$ 49,584,214	\$ 95,567,039	\$ 37,941,138	\$ 1,431,866
Common stock	383,984,527	310,317,462	19,795,356	38,152,942	15,147,127	571,640
Preferred stock	1,644,070	1,328,657	84,756	163,355	64,854	2,448
Corporate debt instruments - Other	204,159,905	164,992,022	10,524,951	20,285,455	8,053,543	303,934
Corporate debt instruments - Preferred	13,629,067	11,014,344	702,612	1,354,193	537,628	20,290
U.S. government securities	117,107,092	94,640,208	6,037,162	11,635,834	4,619,550	174,338
Real estate investment trusts	7,507,621	6,067,291	387,037	745,962	296,155	11,176
Interest bearing cash and certificates of deposit	11,996,559	9,695,031	618,452	1,191,986	473,231	17,859
Other	1,725,009	1,394,067	88,929	171,398	68,047	2,568
Total Master Trust investments	1,703,573,901	1,376,744,876	87,823,469	169,268,164	67,201,273	2,536,119
Other assets:						
Accrued interest and dividend income	4,615,953	3,730,386	237,964	458,644	182,087	6,872
Pending trades - Sales	291,770	235,795	15,041	28,990	11,510	434
Total Master Trust assets	1,708,481,624	1,380,711,057	88,076,474	169,755,798	67,394,870	2,543,425
Other liabilities:						
Pending trades - Purchases	(1,090,096)	(880,962)	(56,197)	(108,313)	(43,001)	(1,623)
Accrued expenses	(945,771)	(764,326)	(48,757)	(93,972)	(37,308)	(1,408)
Total Master Trust liabilities	(2,035,867)	(1,645,288)	(104,954)	(202,285)	(80,309)	(3,031)
Total Master Trust net assets	<u>\$ 1,706,445,757</u>	<u>\$ 1,379,065,769</u>	<u>\$ 87,971,520</u>	<u>\$ 169,553,513</u>	<u>\$ 67,314,561</u>	<u>\$ 2,540,394</u>

The investment income (loss) for the Master Trust for the years ended December 31, 2019 and 2018 is as follows:

	2019	2018
Net appreciation (depreciation) in fair value of investments	\$ 326,585,503	\$ (108,371,000)
Interest and dividend income	25,264,536	22,313,727
Total investment income (loss)	<u>\$ 351,850,039</u>	<u>\$ (86,057,273)</u>

Note 6 - Fair Value Measurements

Accounting standards require certain assets and liabilities be reported at fair value in the financial statements and provide a framework for establishing that fair value. The framework for determining fair value is based on a hierarchy that prioritizes the valuation techniques and inputs used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1

Fair values determined by Level 1 inputs use unadjusted quoted prices in active markets for identical assets or liabilities that the Master Trust has the ability to access.

Level 2

Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in markets that are not active, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3

Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related asset.

In instances whereby inputs used to measure fair value fall into different levels of the fair value hierarchy, fair value measurements in their entirety are categorized based on the lowest level input that is significant to the valuation. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following tables present information about the Master Trust's investments measured at fair value on a recurring basis at December 31, 2019 and 2018:

Master Trust Net Assets at December 31, 2019			
	Master Trust Balances	Level 1	Level 2
Investments at fair value:			
Common stock	\$ 439,509,050	\$ 439,509,050	\$ -
Preferred stock	3,221,529	3,221,529	-
Corporate debt instruments - Other	257,833,791	-	257,833,791
Corporate debt instruments - Preferred	22,356,127	-	22,356,127
U.S. government securities	117,441,252	-	117,441,252
Real estate investment trusts	9,572,020	9,572,020	-
Interest bearing cash and certificates of deposit	6,939,191	6,037,688	901,503
Publicly traded partnership	1,245,067	1,245,067	-
Total	858,118,027	\$ 459,585,354	\$ 398,532,673
Investments measured at NAV:			
Common collective trust (no redemption notice period)	35,421,708		
Common collective trust (15-day redemption notice period)	55,512,446		
Common collective trusts (60-day redemption notice period)	961,582,898		
Total investments at fair value	\$ 1,910,635,079		

Robert Bosch, LLC and Affiliates Defined Benefit Plans

Notes to Financial Statements

December 31, 2019 and 2018

Note 6 - Fair Value Measurements (Continued)

Master Trust Net Assets at December 31, 2018			
	Master Trust Balances	Level 1	Level 2
Investments at fair value:			
Common stock	\$ 383,984,527	\$ 383,984,527	\$ -
Preferred stock	1,644,070	1,644,070	-
Corporate debt instruments - Other	204,159,905	-	204,159,905
Corporate debt instruments - Preferred	13,629,067	-	13,629,067
U.S. government securities	117,107,092	-	117,107,092
Real estate investment trusts	7,507,621	7,507,621	-
Interest bearing cash and certificates of deposit	11,996,559	5,892,433	6,104,126
Other	1,725,009	398,191	1,326,818
Total	741,753,850	\$ 399,426,842	\$ 342,327,008
Investments measured at NAV:			
Common collective trust (no redemption notice period)	29,293,180		
Common collective trust (15-day redemption notice period)	47,174,580		
Common collective trusts (60-day redemption notice period)	885,352,291		
Total investments at fair value	\$ 1,703,573,901		

Note 7 - Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Companies in letters dated March 11, 2014 for BPP, March 20, 2014 for the BFS Plan, May 10, 2018 for the BSP Plan and the DO Plan, and April 2, 2018 for the New Richmond Plan, that the Plans and related trust are designed in accordance with applicable sections of the Internal Revenue Code (the "Code"). Although the Plans have been amended since receiving the respective determination letters, the plan administrator and the Plans' ERISA counsel believe that the Plans are designed and are currently being operated in compliance with the applicable requirements of the Code and therefore believe that the Plans are qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plans and recognize a tax asset or liability if one of the respective Plans has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plans, and has concluded that as of December 31, 2019 and 2018, there are no uncertain positions taken or expected to be taken that would require recognition of an asset or 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. The plan administrator believes the Plans are no longer subject to income tax examinations for years beginning prior to January 1, 2016.

Note 8 - Plan Mergers

During 2018, the Gilmour Hose Plan and the Security Systems Plan were merged with the DO Plan. Accordingly, assets of \$2,479,492 and accumulated plan benefits of \$2,066,552 of the Gilmour Hose Plan, and assets of \$1,927,248 and accumulated plan benefits of \$1,822,687 of the Security Systems Plan were transferred into the DO Plan in 2018.

December 31, 2019 and 2018

Note 8 - Plan Mergers (Continued)

The 2018 Form 5500 of the DO Plan was prepared as if the merger into the DO Plan of the Gilmour House Plan and the Security Systems Plan took place on December 31, 2017. Accordingly, the accompanying 2018 Statement of Changes in Net Assets Available for Benefits for the DO Plan reflects transfers in of \$4,406,740 that were reported on the DO Plan 2017 Form 5500.

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

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 2018), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor
1st Segment Rate	3.74%
2nd Segment Rate	5.35%
3rd Segment Rate	6.11%
Interest Rates for Maximum Tax Purposes	Based on segment rates with a four-month lookback (as of September 2018), without regard to interest rate stabilization
1st Segment Rate	2.28%
2nd Segment Rate	3.81%
3rd Segment Rate	4.46%
Optional Payment Form Election Percentage	40% Life Annuity 60% Joint and 50% Survivor Annuity
Optional Payment Form Conversion Interest Rate	6.00%
Optional Payment Form Conversion Mortality	Current 417(e) table
Retirement Age	
Transferred Participants	See Table 1
Terminated Vested Participants	Age 65
Mortality Rates	
Healthy and Disabled	2019 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e)
Withdrawal Rates	See Table 2
Disability Rates	See Table 3
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 70% of males and 70% of females have an eligible spouse, and that males are two years older than their spouses.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of \$225,000.

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

Valuation of Plan Assets

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

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

Expected Return on Assets

2017 Plan Year

5.00%

2018 Plan Year

5.00%

Trust Expenses Included in Target Normal Cost

Actual trust expenses, limited to 5% of Fair Value of Assets. The prior year's actual administrative expenses, adjusted for the anticipated significant changes are used as a proxy for actual current year's expenses.

Actuarial Method

Standard unit credit cost method

Valuation Date

January 1, 2019

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

Table 1

Retirement Rates

Age	Rate
55	5.00%
56	2.00%
57	2.00%
58	2.00%
59	2.00%
60	10.00%
61	10.00%
62	30.00%
63	15.00%
64	15.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

Table 2

Withdrawal Rates

Age	Rate	Age	Rate
15	35.50%	35	13.90%
16	35.50%	36	12.80%
17	35.50%	37	11.80%
18	35.50%	38	10.80%
19	35.50%	39	9.90%
20	35.50%	40	9.00%
21	35.50%	41	8.20%
22	33.50%	42	7.50%
23	31.70%	43	6.80%
24	29.90%	44	6.20%
25	28.10%	45	5.60%
26	26.40%	46	5.10%
27	24.80%	47	4.70%
28	23.20%	48	4.30%
29	21.70%	49	4.00%
30	20.30%	50	4.00%
31	18.90%	51	4.00%
32	17.50%	52	4.00%
33	16.30%	53	4.00%
34	15.10%	54	4.00%
		55+	4.00%

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
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Table 3

Disability Rates

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

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

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

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

OMB No. 1210-0110

2019**This Form is Open to Public
Inspection**For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019▶ **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**

New Richmond Production Hourly Retirement Plan

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

015

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF

Robert Bosch LLC

D Employer Identification Number (EIN)

36-2903176

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B**F Prior year plan size:** ☐ 100 or fewer ☐ 101-500 ☒ More than 500**Part I Basic Information****1** Enter the valuation date: Month 01 Day 01 Year 2019**2 Assets:****a** Market value.....**b** Actuarial value.....**2a**

2,541,802

2b

2,656,588

3 Funding target/participant count breakdown**a** For retired participants and beneficiaries receiving payment.....**b** For terminated vested participants.....**c** For active participants.....**d** Total.....(1) Number of
participants(2) Vested Funding
Target(3) Total Funding
Target

64

1,371,475

1,371,475

48

858,764

858,764

0

0

0

112

2,230,239

2,230,239

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.....**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.....**4a****4b****5 Effective interest rate.....****6 Target normal cost.....****5****6**

5.50%

66,563

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**Karen A. Hirschhorn *KAH*

Signature of actuary

Karen A. Hirschhorn

Type or print name of actuary

Aon Consulting, Inc.

Firm name

4 Overlook Point

Lincolnshire

IL

60069-4302

Address of the firm

08/07/2020

Date

2004099

Most recent enrollment number

847-295-5000

Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐
For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.**Schedule SB (Form 5500) 2019
v. 190130**

Part II Beginning of Year Carryover and Prefunding Balances

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	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8).....	0	0
10	Interest on line 9 using prior year's actual return of <u>- 5 . 07%</u>	0	0
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>5 . 69%</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	0

Part III	Funding Percentages
----------	---------------------

14	Funding target attainment percentage	14	119.11%
15	Adjusted funding target attainment percentage	15	119.11%
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	122.63%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ►	18(b)	0 18(c)

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year?..... ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

C If line 20a is "Yes," see instructions and complete the following table as applicable:

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

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

21 Discount rate:				
a Segment rates:	1st segment: 3.74 %	2nd segment: 5.35 %	3rd segment: 6.11 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22
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	66,563										
b Excess assets, if applicable, but not greater than line 31a	31b	66,563										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment	0	0	b Waiver amortization installment	0	0
	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	0										
	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	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			

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

Schedule SB, Part V—Summary of Plan Provisions

Effective Date	July 1, 2004. Amended and restated effective January 1, 2017. The latest amendment dated September 14, 2018.						
Eligibility for Participation	<p>Participants in the SIG Plan on June 30, 2004 shall become participants in this plan on the effective date. Other employees became participants in this plan on the January 1 or July 1 coincident with or next following the date on which 1,000 hours of service is completed in a year. The plan is frozen to new hires, rehires and transfers on and after November 1, 2012.</p> <p>Benefit accruals for all participants were frozen effective October 31, 2016.</p>						
Normal Retirement Eligibility	Age 65.						
Benefit	<p>A monthly amount equal to the sum of (1) plus (2):</p> <p>(1) Years of credited service earned after July 1, 2004 multiplied by an amount determined in connection with the date of termination of employment as follows:</p> <table><tr><th>Termination Date</th><th>Amount</th></tr><tr><td>On or after July 1, 2004</td><td>\$20.00</td></tr><tr><td>On or after November 1, 2004</td><td>\$20.50</td></tr></table> <p>(2) Years of SIG credited service as of June 30, 2004 multiplied by \$0.50 (only for associates termed on or after November 1, 2004).</p> <p>Benefit accruals were frozen effective October 31, 2016.</p>	Termination Date	Amount	On or after July 1, 2004	\$20.00	On or after November 1, 2004	\$20.50
Termination Date	Amount						
On or after July 1, 2004	\$20.00						
On or after November 1, 2004	\$20.50						
Early Retirement Eligibility	Age 55 and five years of vesting service.						
Benefit	A monthly benefit equal to the normal retirement benefit reduced by 1/2 of 1% for each month the early retirement precedes the normal retirement.						
Vested Termination Eligibility	Five years of vesting service.						
Benefit	The accrued benefit at the date of termination. Reduced payments may begin any time after eligibility for early retirement based on the same reductions as early retirement from active status.						

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
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Disability Eligibility	Five years of vesting service.
Benefit	The accrued benefit based on benefit service and multiplier level at the date of disability.
Surviving Spouse Eligibility	Five years of vesting service. Participant and spouse must be married at least one year prior to death.
Benefit	A monthly benefit payable to the surviving spouse beginning at the employee's earliest retirement age equal to 50% of the amount payable if the participant had retired early with a 50% joint and survivor benefit.
Normal Form of Annuity Without Spouse	Single life annuity.
With Spouse	50% Joint and survivor annuity reduced to be equivalent to the retirement benefit payable for employee's lifetime. Participant receives reduced lifetime benefit and, in event of participant's death, 50% of reduced benefit continues to surviving spouse.
Optional Forms of Annuity	Single life annuity 10-year certain and life annuity 75% joint and survivor annuity 66⅔% joint and survivor annuity 50% joint and survivor annuity
Actuarial Equivalence	Applicable mortality table per section 417(e)(3) of the Internal Revenue Code and 6% interest rate.
Definitions Credited Service	Service after June 30, 2004 based on hours. A full year of credited service is earned if the employee works 2,000 or more hours in one plan year. Fractional years are computed by taking the hours of service during the plan year divided by 2,000. Credited service (including SIG service) may not exceed 45 years.
SIG Credited Service	Service earned with SIG Doboy Inc. as of June 30, 2004 as defined in the SIG Plan for a participant who was an employee of SIG Doboy Inc. as of the effective date.

Schedule SB Attachment (Form 5500)—2019 Plan Year
New Richmond Production Hourly Retirement Plan
EIN: 36-2903176 PN: 015

Vesting Service

One year of vesting service is earned if the employee works 1,000 or more hours in one plan year. Vesting service credited under the SIG Plan prior to November 1, 2003 shall be included. Post October 31, 2016, participants continue to earn vesting service while employed by Bosch.

Plan Changes Since the Prior Year

The 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.