

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2013 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>UNILEVER SAVINGS PLAN FOR PUERTO RICO EMPLOYEES</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>010</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/2003</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>010</u>	1c Effective date of plan <u>01/01/2003</u>	
1b Three-digit plan number (PN) ▶	<u>010</u>				
1c Effective date of plan <u>01/01/2003</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>UNILEVER UNITED STATES, INC</u> <u>BENEFITS DEPARTMENT</u> <u>800 SYLVAN AVE</u> <u>ENGLEWOOD CLIFFS, NJ 07632</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>13-2915928</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>201-894-4000</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>311900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>13-2915928</u>	2c Sponsor's telephone number <u>201-894-4000</u>	2d Business code (see instructions) <u>311900</u>	
2b Employer Identification Number (EIN) <u>13-2915928</u>					
2c Sponsor's telephone number <u>201-894-4000</u>					
2d Business code (see instructions) <u>311900</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.	<u>10/14/2014</u>	<u>SUSAN LONG</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)			Preparer's telephone number (optional)

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

Form 5500 (2013)
v. 130118

3a Plan administrator's name and address ☐ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address BENEFITS ADMINISTRATION COMMITTEE BENEFITS DEPARTMENT 800 SYLVAN AVE ENGLEWOOD CLIFFS, NJ 07632		3b Administrator's EIN 01-9616810
		3c Administrator's telephone number 201-894-7035
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5	116
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants	6a	58
b Retired or separated participants receiving benefits	6b	0
c Other retired or separated participants entitled to future benefits	6c	41
d Subtotal. Add lines 6a , 6b , and 6c	6d	99
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	0
f Total. Add lines 6d and 6e	6f	99
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	97
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	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: 2F 2G 2J 2K 3C 2E 3H		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

A Name of plan UNILEVER SAVINGS PLAN FOR PUERTO RICO EMPLOYEES	B Three-digit plan number (PN) ▶	010
C Plan sponsor's name as shown on line 2a of Form 5500 UNILEVER UNITED STATES, INC	D Employer Identification Number (EIN) 13-2915928	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
THE VANGUARD GROUP, INC	
23-1945930	

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation	
CAPITAL RESEARCH AND MANAGEMENT COM	1 MARKET, STEWART TOWER
	SUITE 1800
	SAN FRANCISCO, CA 94105

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
PACIFIC INVESTMENT MANAGEMENT COMPA	
33-0629048	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
INVESCO	
58-1707262	

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 37 65	NONE	6693	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection.
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan <u>UNILEVER SAVINGS PLAN FOR PUERTO RICO EMPLOYEES</u>	B Three-digit plan number (PN)	<u>010</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>UNILEVER UNITED STATES, INC</u>	D Employer Identification Number (EIN) <u>13-2915928</u>	

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: <u>VANGUARD TARGET RETIREMENT INCOME T</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083967-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>36121</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2010 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083954-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>22978</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2015 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083984-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>335705</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2020 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083982-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>620101</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2025 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083980-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>581293</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2030 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083978-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1248239</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD TARGET RETIREMENT 2035 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD</u>		
c EIN-PN <u>90-6083976-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1470649</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 2040 TRU**b** Name of sponsor of entity listed in (a): VANGUARD

c EIN-PN 90-6083974-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 324508
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 2045 TRU**b** Name of sponsor of entity listed in (a): VANGUARD

c EIN-PN 90-6083972-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 125659
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 2050 TRU**b** Name of sponsor of entity listed in (a): VANGUARD

c EIN-PN 90-6083970-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 68466
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a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO GROUP TRUST FOR RETIREMENT**b** Name of sponsor of entity listed in (a): INVESCO GROUP TRUST FOR RETIREMENT

c EIN-PN 61-1246990-215	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 461300
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a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO GROUP TRUST FOR RETIREMENT**b** Name of sponsor of entity listed in (a): INVESCO GROUP TRUST FOR RETIREMENT

c EIN-PN 61-1246990-205	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 364030
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a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO GROUP TRUST FOR RETIREMENT**b** Name of sponsor of entity listed in (a): INVESCO GROUP TRUST FOR RETIREMENT

c EIN-PN 61-1246990-208	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 283248
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a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO GROUP TRUST FOR RETIREMENT**b** Name of sponsor of entity listed in (a): INVESCO GROUP TRUST FOR RETIREMENT

c EIN-PN 61-1246990-242	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 126938
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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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Part II Information on Participating Plans (to be completed by DFEs)

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2013 This Form is Open to Public Inspection
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For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>		
A Name of plan <u>UNILEVER SAVINGS PLAN FOR PUERTO RICO EMPLOYEES</u>	B Three-digit plan number (PN) ►	<u>010</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>UNILEVER UNITED STATES, INC</u>	D Employer Identification Number (EIN) <u>13-2915928</u>	

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)	11502	14140
(2) Participant contributions.....	1b(2)	6975	9866
(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)	259032	386452
(9) Value of interest in common/collective trusts	1c(9)	6178977	6069235
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	578462	908640
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	7034948	7388333

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	7034948	7388333
---	-----------	---------	---------

Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	389031	
(B) Participants	2a(1)(B)	269785	
(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)		658816
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)	11712	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		11712
(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)	46624	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		46624
(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)		762678
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		4970
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1484800

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1124722	
(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)		1124722
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)	6693	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		6693
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1131415

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		353385
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

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

☒ Yes ☐ No

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

(1) Name: PRICEWATERHOUSECOOPERS LLC

(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	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

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

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection.
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan <u>UNILEVER SAVINGS PLAN FOR PUERTO RICO EMPLOYEES</u>	B Three-digit plan number (PN) ▶ <u>010</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>UNILEVER UNITED STATES, INC</u>	D Employer Identification Number (EIN) <u>13-2915928</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>66-0563828</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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



Unilever Savings Plan for Puerto Rico Employees

**Financial Statements and Supplemental
Schedule**

December 31, 2013 and 2012

Unilever Savings Plan for Puerto Rico Employees

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Supplemental Schedule*

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) December 31, 2013.....	18
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*Note: All other schedules required by CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.



Independent Auditor's Report

To the Participants and Administrator of
Unilever Savings Plan for Puerto Rico Employees

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Unilever Savings Plan for Puerto Rico Employees (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2013, and 2012 and the related statement of changes in net assets available for benefits for the year ended December 31, 2013, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Fidelity Management Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of December 31, 2013 and 2012 and for the year ended December 31, 2013, that the information provided to the plan administrator by the custodian is complete and accurate.

Disclaimer of Opinion

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



Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2013 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the custodian, 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

San Juan, Puerto Rico
October 15, 2014

CERTIFIED PUBLIC ACCOUNTANTS
(OF PUERTO RICO)
License No. LLP-216 Expires Dec. 1, 2016
Stamp E139339 of the P.R. Society of
Certified Public Accountants has been
affixed to the file copy of this report

Unilever Savings Plan for Puerto Rico Employees
Statements of Net Assets Available for Benefits
December 31, 2013 and 2012

	2013	2012
Assets		
Investments, at fair value	<u>\$ 6,977,875</u>	<u>\$ 6,757,439</u>
Receivables		
Notes receivable from participants	386,452	259,032
Employer's contribution	14,140	11,502
Participants' contributions	<u>9,866</u>	<u>6,975</u>
Total receivables	<u>410,458</u>	<u>277,509</u>
Net assets reflecting investments at fair value	<u>7,388,333</u>	<u>7,034,948</u>
Adjustment from fair value to contract value for fully benefit-responsive investments contracts	<u>(39,786)</u>	<u>(123,507)</u>
Net assets available for benefits	<u>\$ 7,348,547</u>	<u>\$ 6,911,441</u>

The accompanying notes are an integral part of these financial statements.

Unilever Savings Plan for Puerto Rico Employees
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2013

Additions to assets attributed to

Additions to net assets attributable to

Investments income

Net appreciation in fair value of investments	\$ 814,525
---	------------

Interest and dividends	<u>83,468</u>
------------------------	---------------

Total investment income	897,993
-------------------------	---------

Interest from notes receivable from participants	<u>11,712</u>
--	---------------

	<u>909,705</u>
--	----------------

Contributions

Employer's	389,031
------------	---------

Participants'	<u>269,785</u>
---------------	----------------

Total contributions	658,816
---------------------	---------

Total additions before benefits paid and other deductions	<u>1,568,521</u>
---	------------------

Deductions from assets attributed to

Benefits paid to participants	1,124,722
-------------------------------	-----------

Other deductions	<u>6,693</u>
------------------	--------------

Total deductions	<u>1,131,415</u>
------------------	------------------

Net increase in net assets available for benefits	437,106
---	---------

Net assets available for benefits

Beginning of year	<u>6,911,441</u>
-------------------	------------------

End of year	<u>\$ 7,348,547</u>
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The accompanying notes are an integral part of these financial statements.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

1. Description of the Plan

The Unilever 1165(e) Employee Savings Plan was originally established effective January 1, 2003 by Chesebrough Ponds Manufacturing Co. in order to provide a retirement savings vehicle to its employees in Puerto Rico. Effective January 1, 2010, the Unilever 1165(e) Employee Savings Plan was amended to: (i) convert it into an individual designed plan; (ii) change the name to the Unilever Savings Plan for Puerto Rico Employees (the "Plan"); (iii) reflect the change in the sponsor to Unilever United States, Inc.; and, (iv) change certain provisions.

The following description of the Plan provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan that is subject to the provisions of the Employee Retirement Income Security Act to 1974, as amended ("ERISA"). The Plan is sponsored by Unilever United States, Inc. (the "Company" or "Unilever US").

Eligibility

All employees of the Chesebrough Ponds Manufacturing Co. and Unilever de Puerto Rico, Inc. and any employee of the Company who is a bona fide resident of the Commonwealth of Puerto Rico or who performs labor services primarily within the Commonwealth of Puerto Rico, regardless of residence for other purpose, scheduled to work twenty or more hours a week are eligible to participate in the Plan. Subject to the exceptions above, employees who are not regularly scheduled to work twenty or more hours a week may participate in the Plan after completing one year of service.

Contributions

An eligible employee may contribute up to an amount, not to exceed the maximum specified by section 1081.01(d)(7)(A) of the Internal Revenue Code for a New Puerto Rico of January 31, 2011, as amended ("PR Code") of \$15,000 for the tax year ended December 31, 2013 (\$13,000 for 2012). In addition, participants who will attain age 50 at any time during the Plan year and who have elected to make the maximum allowable elected deferral contribution, may elect to make additional before-tax contributions ("catch-up contributions") of up to \$1,500 per plan year.

Employees may elect to save 1% to 50% of eligible compensation through payroll deductions on a before-tax basis, an after-tax basis or a combination of both, provided that the maximum participant contributions to the before-tax and after-tax accounts do not exceed 50% of eligible compensation.

The Company has a matching program in which it contributes a portion of participant contributions to the participant's account. These contributions are recorded in a "company matching account." Company matching contributions are as follows:

- a. Employees that belong to Chesebrough Ponds Manufacturing Co. is equal to 50% of the first 6% of eligible compensation that participants contribute as after-tax and/or before tax contributions, that not exceed 6% of participants contribution; and
- b. Employees that belong to Unilever de Puerto Rico, Inc. is calculated under the final average pay formula equal to the sum of 100% of the first 3%; and 50% of the next 2% of eligible compensation not to exceed 5%; also the Company may perform contributions calculated under the cash benefit formula not to exceed 5% of eligible earnings.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

Employees hired or rehired after January 1, 2007, are eligible for employer nonelective contributions at a rate of 4% of eligible earnings following one year of service.

Participant Accounts

Each participant's account is credited with: (a) the participant's contribution; (b) the Company's contributions; and (c) an allocation of Plan earnings (losses) and administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the vested portion of the participant's account. At December 31, 2013 and 2012 there were 99 and 116 participants, respectively, in the Plan with account balances.

Vesting

Participants are fully vested in all of their before-tax and after-tax contributions as well as the earnings thereon. Company matching contributions are vested 100% immediately. Vesting provisions relating to Company nonelective contributions are vested 100% after 3 years of service or attainment of age 65, death or disability.

Forfeitures

Forfeiture amounts will be used to offset the cost of any future employer nonelective contributions. At December 31, 2013, forfeited nonvested accounts amounted to approximately \$37,000 (2012 - \$35,000).

Payment of Benefits

During employment, participants may withdraw all or part of their after-tax contributions, where applicable, and earnings thereon. Participants may apply for financial hardship withdrawals of up to the eligible portion of their vested before-tax account based on Plan provisions, prior to attaining age 59.5, provided the withdrawal does not exceed the amount of the hardship. Upon attainment of age 59.5, participants may withdraw all or part of their before-tax account, company matching account, and vested nonelective contribution account.

Upon termination of employment, participants are entitled to all of their vested balances. Terminated employees whose vested balances exceed \$5,000 may leave their account balance in the Plan until they attain the age 65. Terminated employees whose vested balances are \$5,000 or less are subject to involuntary cash out.

Participants who retire under the provision of certain defined benefit plan sponsored by the Company may roll over their lump sum distribution to the Plan.

Participants Investments Options

Participants have the option to invest in, and direct the Company matching contributions towards a wide variety of funds including stable value, fixed income, balanced, and equity. The funds offered by the Plan are as follows:

The INVESCO (Also known as PRIMCO) Interest Income Fund

This fund is primarily invested in a diversified portfolio of synthetic guaranteed investment contracts issued by highly rated financial institutions such as insurance companies and banks. Each contract has its own specific terms, including interest rate and maturity date. The crediting interest rates at December 31, 2013 and 2012 for the contracts range from 0.03% to 2.33% and 0.14% to 3.57%, respectively. The weighted average crediting interest rates at December 31, 2013 and 2012 for the contracts are 1.91% and 2.71%, respectively.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

As of December 31, 2013 and 2012, the investment categories of the INVESCO Interest Income Fund were as follows:

	2013	2012
Short-term investment fund	\$ 53,602	\$ 61,963
Synthetic guaranteed investment contract	1,235,516	1,264,811
	<u>\$ 1,289,118</u>	<u>\$ 1,326,774</u>

PIMCO Total Return Fund Institutional Class

This fund invests in all types of bonds, including U.S. Government, corporate, mortgage and foreign. While the fund maintains average portfolio duration of three to six years, investments may also include short and long-term maturity bonds. Participants can redeem daily.

Fidelity Contrafund

This fund seeks to provide capital appreciation, primarily invests in common stocks. The fund may invest in securities of domestic and foreign issuers whose value, the fund's manager believes, is not fully recognized by the public. Participants can redeem daily.

American Funds Washington Mutual Investors Fund (R5)

This fund is primarily invested in common stocks. The fund must be fully invested (95%) in the stocks of U.S. companies that meet the fund's "eligible list" criteria, which include specific guidelines for return of capital, capital strength, and dividend payment. Participants can redeem daily.

Vanguard Total Stock Market Index Investor Shares

The fund invests in a large sample of stocks that, in the aggregate approximate the MSCI U.S. Broad Market Index in terms of key characteristics, industry weightings and market capitalization, as well as certain financial measures, such as price/earnings ratio and dividend yield. Participants can redeem daily.

Vanguard FTSE All World ex-U.S. Index Fund Admiral Shares

The fund employs a "passive management" or indexing-investment approach designed to track the performance of FTSE All World ex-U.S. Index. The fund attempts to replicate the target index by investing all or substantially all, of its assets in the stocks that make up the index, holding each stock in approximately the same proportion as its weighting in the index. Foreign investments especially those in emerging markets, involve greater risk and may offer greater returns than U.S. investments. This risk includes political and economic uncertainties of foreign countries, as the risk of currency fluctuation. Participants can redeem daily.

The Vanguard Target Retirement Trust

Vanguard Target Retirement Income Trust II, Vanguard Target Retirement 2010 Trust II, Vanguard Target Retirement 2015 Trust II, Vanguard Target Retirement 2020 Trust II, Vanguard Target Retirement 2025 Trust II, Vanguard Target Retirement 2030 Trust II, Vanguard Target Retirement 2035 Trust II, Vanguard Target Retirement 2040 Trust II, Vanguard Target Retirement 2045 Trust II, and Vanguard Target Retirement 2050 Trust II.

These funds invest in Vanguard mutual funds according to an asset allocation strategy designed for investors who plan to retire in dates near the date specified in the fund. The trust's asset allocation will become more conservative over the time. Participants can redeem daily out of these funds.

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Notes Receivable from Participants

At the request of the Plan participants, loans are permitted up to the lesser of \$50,000 reduced by the largest outstanding loan balance in the previous 12 months or one-half of the participants' vested interest in accounts less any outstanding loans. Loans bear interest at a fixed rate based on the Reuters published prime rate plus one percent. Loans relating to the acquisition or construction of a participants' principal residence are to be repaid within fifteen years while general purpose loans are to be repaid within five years. Interest over notes receivables from participants ranged from 4.25% to 8.25% with maturity dates through 2025.

Administration

The Plan provides that the Benefits Administration Committee of the Plan Sponsor is responsible for the general administration of the Plan.

Subsequent Events

The Plan has evaluated subsequent events through October 15, 2014, the date the financial statements were available to be issued.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared using the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("GAAP").

Investments Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodian and insurance company. See Note 4 for further information regarding valuation of the Plan's investments.

Purchases and sales of securities are recorded on the trade-date basis. Realized gains and losses are recorded as the difference between acquisition cost and the selling price or fair value. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Investment Contracts (Also see Note 3)

The Plan accounts for synthetic guaranteed investment contracts (GIC) at contract value. Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully-benefit responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Statements of Net Assets Available for Benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. If a participant ceases to make a loan repayment and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

Benefits Payments

Benefit payments are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participants account. Investment management fees are included as a reduction of investment income.

Use of Estimates in the Preparation of Financial Statements

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities, if any, at the date of the financial statements. Actual results could differ from those estimates.

Risks and Uncertainties

The Plan provides for various investment options. Investments in securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the December 31, 2013 and 2012 Statements of Net Assets Available for Benefits.

3. Investments

The following investments represent 5% or more of the Plan's net assets as of December 31, 2013:

Vanguard Target Retirement 2020 Trust II	\$ 620,101
Vanguard Target Retirement 2025 Trust II	581,293
Vanguard Target Retirement 2030 Trust II	1,248,239
Vanguard Target Retirement 2035 Trust II	1,470,649
Fidelity Contrafund	505,869
	<u>4,426,151</u>
All other investments, as certified by custodian	2,551,724
Total investments at fair market value	<u>\$ 6,977,875</u>

The following investments represent 5% or more of the Plan's net assets as of December 31, 2012:

Vanguard Target Retirement 2015 Trust II	\$ 342,612
Vanguard Target Retirement 2020 Trust II	493,946
Vanguard Target Retirement 2025 Trust II	527,068
Vanguard Target Retirement 2030 Trust II	1,135,582
Vanguard Target Retirement 2035 Trust II	1,128,979
Vanguard Target Retirement 2055 Trust II	372,836
	<u>4,001,023</u>
All other investments, as certified by custodian	2,756,416
Total investments at fair market value	<u>\$ 6,757,439</u>

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Of the Guaranteed Investment Contract (GIC)'s funds none represented more than 5% of the Plan's net assets as of December 31, 2013. The following funds from the Guaranteed Investment Contract (GIC) represent 5% or more of the Plan's net assets as of December 31, 2012:

	2012	
	Investments at Fair Value	Adjustment to Contract Value
INVESCO Interest Income Fund		
Bank of America, N.A.	\$ 379,006	\$ (22,347)
JP Morgan Chase Manhattan Bank	372,390	(35,853)
State Street Bank & Trust	353,382	(26,532)
Pacific Life Insurance Company	334,101	(13,145)
Natixis Capital Markets	441,535	(17,704)
	<u>\$ 1,880,414</u>	<u>\$ (115,581)</u>

During 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$814,525 as follow:

Commingled Funds	\$ 809,555
Mutual funds	<u>4,970</u>
	<u>\$ 814,525</u>

Investment Contracts

The Plan entered into benefit-responsive investment contracts, such as synthetic guaranteed investment contracts ("GICs") and a stable return fund, with various third party financial institutions. These benefit-responsive investment contracts are held through the INVESCO Interest Income Fund (the "Fund"). Contract values represent contributions made to the investment contract plus earnings, less participant withdrawals and administrative expenses.

A synthetic GIC provides for a fixed return on principal over a specified period of time through fully benefit-responsive wrapper contracts issued by third party financial institutions which are backed by underlying assets owned by the Plan. The wrapper contract amortizes the realized and unrealized gains and losses on the underlying fixed income investments; typically over the duration of the investments through adjustments to the future interest crediting rate (which is the rate earned by participants in the Fund for the underlying investments). The issuer of the wrapper contract provides assurance that the adjustments to the interest crediting rate do not result in a future interest crediting rate that is less than zero. An interest crediting rate less than zero would result in a loss of principal or accrued interest.

Calculating the Interest Crediting Rate in Wrapper Contracts

The key factors that influence future interest crediting rates for a wrapper contract include:

- The level of market interest rates
- The amount and timing of participant contributions, transfers, and withdrawals into/out of the wrapper contract

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December 31, 2013 and 2012

- The investment returns generated by the fixed income investments that back the wrapper contract
- The duration of the underlying investments backing the wrapper contract

Wrapper contracts' interest crediting rates are typically reset on a monthly or quarterly basis. While there may be slight variations from one contract to another, most wrapper contracts use a formula that is based on the characteristics of the underlying fixed income portfolio. Over time, the crediting rate formula amortizes the Fund's realized and unrealized market value gains and losses over the duration of the underlying investments. Because changes in the market interest rates affect the yield to maturity and the market value of the underlying investments, they can have a material impact on the wrapper contract's interest crediting rate. In addition, participant withdrawals and transfers from the Fund are paid at contract value but funded through the market value liquidation of the underlying investments, which also impacts the interest crediting rate. The resulting gains and losses in the market value of the underlying investments relative to the contract value are presented on the Plan's Statements of Net Assets Available for Benefits as the "Adjustment from fair value to contract value." If the Adjustment from fair value to contract value is positive for a given contract, this indicates that the contract value is greater than the market value of the underlying investments. The embedded market value losses will be amortized in the future through a lower interest crediting rate than would otherwise be the case. If the Adjustment from fair value to contract value is negative, this indicates that the contract value is less than the market value of the underlying investments. The amortization of the embedded market value gains will cause the future interest crediting rate to be higher than it otherwise would have been.

All wrapper contracts provide for a minimum interest crediting rate of zero percent. In the event that the interest crediting rate should fall to zero and the requirements of the wrapper contract are satisfied, the wrapper issuers will pay to the Plan the shortfall needed to maintain the interest crediting rate at zero. This helps to ensure that participants' principal and accrued interest will be protected

Events That Limit the Ability of the Plan to Transact at Contract Value

In certain circumstances, the amount withdrawn from the wrapper contract would be payable at fair value rather than at contract value. These events include termination of the Plan, a material adverse change to the provisions of the Plan, if the employer elects to withdraw from a wrapper contract in order to switch to a different investment provider, or if the terms of a successor plan (in the event of the spin-off or sale of a division) do not meet the wrapper contract issuer's underwriting criteria for issuance of a clone wrapper contract. The events described above that could result in the payment of benefits at market value rather than contract value is not probable of occurring in the foreseeable future.

Issuer-Initiated Contract Termination

Examples of events that would permit a wrapper contract issuer to terminate a wrapper contract upon short notice include the Plan's loss of its qualified status, un-cured material breaches of responsibilities, or material and adverse changes to the provisions of the Plan. If one of these events was to occur, the wrapper contract issuer could terminate the wrapper contract at the market value of the underlying investments.

For the Plan, the contract values of the synthetic GICs were approximately \$1,195,730 and \$1,961,845 at December 31, 2013 and 2012, respectively. As of December 31, 2013 and 2012 the fair value of the synthetic GICs, based upon the fair value of underlying assets and wrapper contracts was greater than the contract value by \$39,786 and \$123,507, respectively.

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December 31, 2013 and 2012

As of December 31, 2013 and 2012 the average yields for synthetic GICs were as follows:

	2013	2012
Average yields for synthetic GICs		
Based on actual earnings	1.17 %	0.74 %
Based on interest rate credited to participants	1.85 %	2.56 %

As of December 31, 2013 and 2012, the fully benefit-responsive contracts were:

	2013	
	Investments, at Fair Value	Adjustment to Contract Value
ING Life & Annuity	\$ 312,787	\$ (9,196)
JP Morgan Chase Manhattan Bank	234,558	(10,935)
Pacific Life Insurance Company	215,465	(3,794)
RGA RGA	245,835	(5,507)
State Street Bank & Trust	226,871	(10,354)
	<u>\$ 1,235,516</u>	<u>\$ (39,786)</u>

	2012	
	Investments, at Fair Value	Adjustment to Contract Value
JP Morgan Chase Manhattan Bank	\$ 372,390	\$ (35,853)
State Street Bank & Trust	353,382	(26,532)
Bank of America, N. A	379,006	(22,347)
Natixis Capital Markets	441,535	(17,704)
ING Aetna	204,938	(7,926)
Pacific Life Insurance Company	334,101	(13,145)
	<u>\$ 2,085,352</u>	<u>\$ (123,507)</u>

4. Fair Value Measurements

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

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 Inputs to the valuation methodology that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. 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.

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

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. The following is a description of the valuation methodologies used for instruments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy.

There have been no changes in the methodologies used at December 31, 2013 and 2012.

Mutual Funds

A mutual fund's Net Asset Value ("NAV") is based on the value of underlying assets owned by the fund minus its liabilities and then divided by the number of shares outstanding calculated as of the close of business of the New York Stock Exchange. The fund's assets normally are fair valued as of this time for the purpose of computing the fund's NAV. Since the NAV is a quoted price in a market that is active, they are classified within Level 1 of the valuation hierarchy.

Synthetic Guaranteed Investment Contract

The fair value of the synthetic guaranteed investment contract is based on the underlying investments. The underlying investments are commingled funds, which are public investment vehicles, valued at the NAV as described above. The value of the wrapper contracts is determined using unobservable inputs including rebid rates from the wrapper provider. The fair value of the wrapper at December 31, 2013 and 2012 of \$0 and \$951, respectively, is included in the synthetic guaranteed investment contracts amount. Because the NAV is a quoted price in a market that is not active and the wrapper contracts are valued using unobservable inputs, the synthetic guaranteed investment contracts are classified within Level 2 of the valuation hierarchy.

Commingled Funds

These investments are investment vehicles valued using the NAV provided by the administrator of the fund. The values of the underlying assets owned by the fund are valued at quoted market prices in an active market. Each commingled fund provides for daily redemptions by the Plan at reported NAVs with no advance notice requirement. The NAV is a quoted price in a market that is not active and classified within Level 2 of the valuation hierarchy.

Short-term Investment Funds

The Short-term Investment funds, which include money market funds, are valued at quoted market prices in an active market, which represent the NAVs held by the Plan at year end and are classified within Level 1 of the valuation hierarchy.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

In accordance with guidance relating to fair value measurements, the following table represents the fair value hierarchy for its financial assets measured at fair value on a recurring basis as of December 31, 2013 and 2012.

Assets at Fair Value as of December 31, 2013				
	Level 1	Level 2	Level 3	Total
Mutual funds				
Bonds funds	\$ 276,857	\$ -	\$ -	\$ 276,857
International funds	4,154	-	-	4,154
Asset allocation	11,071	-	-	11,071
Equity funds	38,443	-	-	38,443
Stock index funds	18,644	-	-	18,644
Growth funds	505,869	-	-	505,869
Total mutual funds	855,038	-	-	855,038
Short-term investment fund	53,602	-	-	53,602
Synthetic guaranteed investments contract	-	1,235,516	-	1,235,516
Commingled funds	-	4,833,719	-	4,833,719
Investments at fair value	<u>\$ 908,640</u>	<u>\$ 6,069,235</u>	<u>\$ -</u>	<u>\$ 6,977,875</u>

Assets at Fair Value as of December 31, 2012				
	Level 1	Level 2	Level 3	Total
Mutual funds				
Bonds funds	\$ 372,836	\$ -	\$ -	\$ 372,836
International funds	14,850	-	-	14,850
Equity funds	16,614	-	-	16,614
Stock index funds	35,079	-	-	35,079
Growth funds	77,120	-	-	77,120
Total mutual funds	516,499	-	-	516,499
Short-term investment fund	61,963	-	-	61,963
Synthetic guaranteed investments contract	-	2,085,352	-	2,085,352
Commingled funds	-	4,093,625	-	4,093,625
Investments at fair value	<u>\$ 578,462</u>	<u>\$ 6,178,977</u>	<u>\$ -</u>	<u>\$ 6,757,439</u>

There were no transfers in and/or out of Level 1, Level 2, or Level 3 for the years ended December 31, 2013 and December 31, 2012.

5. Information Certified by the Custodian

Other than the fair value of the GIC and the related adjustment from fair value to contract value for fully benefit-responsive investment contracts, certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedule, including investments and notes receivable from participants held at December 31, 2013 and 2012, and net appreciation in fair value of investments, interest and dividends for the year ended December 31, 2013, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Fidelity Management Trust Company (the trustee of the Plan). The contract value of the GIC was certified by the trustee.

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

6. Party-In-Interest

Certain investments consist of units in investment funds managed by Fidelity Management Trust Company. Fidelity owns these investments funds, and is a party-in-interest as defined by ERISA. In the opinion of the Plan administrator, fees paid during the year for services rendered by parties-in-interest were based on customary and reasonable rates for such services. The administration fees paid by the Plan during 2013 and 2012 disclosed in the Statement of Changes in Net Assets Available for Benefits were paid to Fidelity.

Certain administrative functions are performed by officers or employees of the Company or its subsidiaries who may also be participants in the Plan. These actions qualify as permitted party-in-interest activities. No such officer or employee receives compensation from the Plan.

7. Plan Termination

Although the Plan Sponsor has established the Plan with bona fide intentions and expectations that it will be able to make contributions indefinitely, the Plan Sponsor shall not be under any obligation or liability whatsoever to continue its contributions or to maintain the Plan for any given period of time. An employer may, in its sole and absolute discretion, discontinue such contributions or terminate the Plan with respect to its employees, in accordance with the provisions of the Plan, at any time with no liability whatsoever for such discontinuance or termination. If the Plan is terminated, or if contributions of an employer are completely discontinued, the rights of all affected participants in their accounts shall thereupon become nonforfeitable, notwithstanding any other provisions of the Plan subject to the provision of ERISA.

8. Tax Status

The Company has obtained a favorable determination letter from the Puerto Rico Department of the Treasury. The trust under the Plan received exemption from taxes on income under the provisions of Section 1165(a) of the Puerto Rico Internal Revenue Code of 1994. On January 31, 2011, the Governor of Puerto Rico enacted the Internal Revenue Code for a New Puerto Rico of 2011 (the "2011 PR Code"). This code contains new rules governing qualified plans in Puerto Rico. The Plan filed for a favorable determination letter with the Puerto Rico Department of Treasury under the 2011 PR Code.

No events have occurred with respect to the Plan that, in substantial likelihood, would result in the Plan being disqualified by the PR Treasury. The Company also obtained a determination letter from the U.S. Internal Revenue Service (IRS) for the exemption of taxes under the IRS Code. The Plan has been amended since receiving the determination letters. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with Section 1022(i)(1) of ERISA. Therefore, no provision has been made for Puerto Rico and federal income taxes in the accompanying financial statements.

Under present U.S. and Puerto Rico income tax laws and regulations, a participant is not subject to income taxes on the contributions of the employing company, or on the interest, dividends or profits on the sale of securities received by the Trustee until the participant's account is distributed or withdrawals are made.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken a uncertain tax position that more likely than not would not be sustained upon examination by

Unilever Savings Plan for Puerto Rico Employees

Notes to Financial Statements

December 31, 2013 and 2012

federal, state and/or local taxing authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions. At December 31, 2013, the years 2009 and thereafter remains subject to examination; however, there are currently no audits for any tax periods in progress.

9. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits as disclosed in the Statement of Net Assets Available for Benefits at December 31, 2013 and 2012 to amounts presented in Form 5500:

	2013	2012
Net assets available for benefits as disclosed in the financial statements	\$ 7,348,547	\$ 6,911,441
Adjustments from fair value to contract value relating to fully benefit-responsive investments contracts	<u>39,786</u>	<u>123,507</u>
Net assets available for benefits as presented in Form 5500	<u>\$ 7,388,333</u>	<u>\$ 7,034,948</u>

The following is a reconciliation of total income as disclosed in the Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2013 to the amounts presented in Form 5500:

Total Income

Total additions before benefits paid and other deductions as presented in the financial statements	\$ 1,568,521
Adjustments from fair value to contract value relating to fully benefit-responsive investments contracts	<u>(83,721)</u>
Total income as presented in Form 5500	<u>\$ 1,484,800</u>

Supplemental Schedule

Unilever Savings Plan for Puerto Rico Employees
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2013

Supplemental Schedule

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost	Current Value
**	Vanguard Target Retirement Income Trust II	Commingled Fund	***	\$ 36,121
**	Vanguard Target Retirement 2010 Trust II	Commingled Fund	***	22,978
**	Vanguard Target Retirement 2015 Trust II	Commingled Fund	***	335,705
**	Vanguard Target Retirement 2020 Trust II	Commingled Fund	***	620,101
**	Vanguard Target Retirement 2025 Trust II	Commingled Fund	***	581,293
**	Vanguard Target Retirement 2030 Trust II	Commingled Fund	***	1,248,239
**	Vanguard Target Retirement 2035 Trust II	Commingled Fund	***	1,470,649
**	Vanguard Target Retirement 2040 Trust II	Commingled Fund	***	324,508
**	Vanguard Target Retirement 2045 Trust II	Commingled Fund	***	125,659
**	Vanguard Target Retirement 2050 Trust II	Commingled Fund	***	68,466
**	Vanguard Target Retirement 2055 Trust II	Mutual Fund	***	11,071
**	PIMCO Total Return Fund Institutional Class	Mutual Fund	***	276,857
**	American Funds Washington Mutual Investors Fund Class R5	Mutual Fund	***	38,443
**	Vanguard Total StockMarket IndexInvestor Shares	Mutual Fund	***	18,644
**	Fidelity Contrafund	Mutual Fund	***	505,869
**	Vanguard FTSE All Word ex-US Index	Mutual Fund	***	4,154
*	Invesco Interest Income Fund - Chase Manhattan Bank	Guaranteed Investment Contract	***	234,558
*	Invesco Interest Income Fund - ING Life & Annuity	Guaranteed Investment Contract	***	312,787
*	Invesco Interest Income Fund - RGA	Guaranteed Investment Contract	***	245,835
*	Invesco Interest Income Fund - Pacific Life	Guaranteed Investment Contract	***	
	Insurance Company	Guaranteed Investment Contract	***	215,465
*	Invesco Interest Income Fund - State Street Bank & Trust	Guaranteed Investment Contract	***	226,871
*	Invesco Interest Income Fund - Fidelity Short-term Fund	Short-term Investment Fund	***	53,602
*	Notes Receivable from Participants	Interest ranging from 4.25% to 8.25%, maturing through 2025	***	386,452
				<u>\$7,364,327</u>

* Represents transactions with a party-in-interest.

** Information has been certified as complete and accurate by Fidelity Management Trust Company, as custodian of the Plan (Notes 1 and 5).

*** Historical cost is not required for participant directed investments.

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

See Accountant's Report