

|                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br><br>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).<br><br><p style="text-align: center;">▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
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|                                                                                                          |                                                                                                                                                                                                                                           |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b>                                                                                            | <b>Annual Report Identification Information</b>                                                                                                                                                                                           |
| 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:                                                                             | <input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or<br><input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____                         |
| B This return/report is:                                                                                 | <input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report;<br><input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months). |
| C If the plan is a collectively-bargained plan, check here. . . . .                                      | <input type="checkbox"/>                                                                                                                                                                                                                  |
| D Check box if filing under:                                                                             | <input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program;<br><input type="checkbox"/> special extension (enter description)                                 |

|                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|------------|-------------------------------------------------------|--|---------------------------------------------------------------------|--|-------------------------------------------------------------|--|-------------------------------------------------------------|--|
| <b>Part II</b>                                                                                                                                                                                                           | <b>Basic Plan Information—enter all requested information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>1a</b> Name of plan<br><u>STANLEY BLACK &amp; DECKER PENSION PLAN</u>                                                                                                                                                 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><b>1b</b> Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>013</u></td> </tr> <tr> <td colspan="2"><b>1c</b> Effective date of plan<br/><u>01/01/1966</u></td> </tr> <tr> <td colspan="2"><b>2b</b> Employer Identification Number (EIN)<br/><u>52-1127357</u></td> </tr> <tr> <td colspan="2"><b>2c</b> Sponsor's telephone number<br/><u>410-716-3900</u></td> </tr> <tr> <td colspan="2"><b>2d</b> Business code (see instructions)<br/><u>335900</u></td> </tr> </table> | <b>1b</b> Three-digit plan number (PN) ▶ | <u>013</u> | <b>1c</b> Effective date of plan<br><u>01/01/1966</u> |  | <b>2b</b> Employer Identification Number (EIN)<br><u>52-1127357</u> |  | <b>2c</b> Sponsor's telephone number<br><u>410-716-3900</u> |  | <b>2d</b> Business code (see instructions)<br><u>335900</u> |  |
| <b>1b</b> Three-digit plan number (PN) ▶                                                                                                                                                                                 | <u>013</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>1c</b> Effective date of plan<br><u>01/01/1966</u>                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>2b</b> Employer Identification Number (EIN)<br><u>52-1127357</u>                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>2c</b> Sponsor's telephone number<br><u>410-716-3900</u>                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>2d</b> Business code (see instructions)<br><u>335900</u>                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |            |                                                       |  |                                                                     |  |                                                             |  |                                                             |  |
| <b>2a</b> Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)<br><br><u>BLACK &amp; DECKER (U.S.) INC.</u><br><br><u>701 E JOPPA ROAD</u><br><u>TOWSON, MD 21286</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.

|                                                                                                                                                                                                                                       |                                                   |            |                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------|---------------------------------------------------------------|
| <b>SIGN HERE</b>                                                                                                                                                                                                                      | Filed with authorized/valid electronic signature. | 10/15/2014 | EMILY SANFORD                                                 |
|                                                                                                                                                                                                                                       | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator        |
| <b>SIGN HERE</b>                                                                                                                                                                                                                      |                                                   |            |                                                               |
|                                                                                                                                                                                                                                       | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor  |
| <b>SIGN HERE</b>                                                                                                                                                                                                                      |                                                   |            |                                                               |
|                                                                                                                                                                                                                                       | 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)<br><br><u>FIONDELLA, MILONE &amp; LASARACINA LLP</u><br><br><u>300 WINDING BROOK DRIVE</u><br><u>GLASTONBURY, CT 06033</u> |                                                   |            | Preparer's telephone number (optional)<br><u>860-657-3651</u> |

|                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor Name <input type="checkbox"/> Same as Plan Sponsor Address                                                                                                                                                                                                                                                                   |  | <b>3b</b> Administrator's EIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |       |
| <b>4</b> 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:<br><b>a</b> Sponsor's name                                                                                                                                                                                                                     |  | <b>3c</b> Administrator's telephone number<br><br><b>4b</b> EIN<br><b>4c</b> PN                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                               |  | <b>5</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 22158 |
| <b>6</b> Number of participants as of the end of the plan year (welfare plans complete only lines <b>6a</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| <b>a</b> Active participants .....                                                                                                                                                                                                                                                                                                                                                                                                    |  | <b>6a</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 2793  |
| <b>b</b> Retired or separated participants receiving benefits .....                                                                                                                                                                                                                                                                                                                                                                   |  | <b>6b</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11412 |
| <b>c</b> Other retired or separated participants entitled to future benefits .....                                                                                                                                                                                                                                                                                                                                                    |  | <b>6c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 6239  |
| <b>d</b> Subtotal. Add lines <b>6a</b> , <b>6b</b> , and <b>6c</b> .....                                                                                                                                                                                                                                                                                                                                                              |  | <b>6d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 20444 |
| <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits .....                                                                                                                                                                                                                                                                                                                            |  | <b>6e</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 1646  |
| <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....                                                                                                                                                                                                                                                                                                                                                                               |  | <b>6f</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 22090 |
| <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....                                                                                                                                                                                                                                                                                       |  | <b>6g</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |       |
| <b>h</b> Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested .....                                                                                                                                                                                                                                                                                           |  | <b>6h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11    |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....                                                                                                                                                                                                                                                                                                  |  | <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br>1A 1I 3H                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| <b>9a</b> Plan funding arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                         |  | <b>9b</b> Plan benefit arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                |       |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |       |
| <b>a Pension Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)<br><br>(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary<br><br>(3) <input checked="" type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary |  | <b>b General Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)<br>(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)<br>(3) <input type="checkbox"/> <b>A</b> (Insurance Information)<br>(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)<br>(5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)<br>(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules) |       |

|                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
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| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).<br><br>▶ <b>File as an attachment to Form 5500 or 5500-SF.</b> | OMB No. 1210-0110<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

▶ **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.

|                                                                                                                                           |                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>STANLEY BLACK &amp; DECKER PENSION PLAN</u>                                                                   | <b>B</b> Three-digit plan number (PN) ▶ <u>013</u>                                                                                                      |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br><u>BLACK &amp; DECKER (U.S.) INC.</u>                         | <b>D</b> Employer Identification Number (EIN)<br><u>52-1127357</u>                                                                                      |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|                                                                                                                                                                                                                |                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|
| <b>Part I</b>                                                                                                                                                                                                  | <b>Basic Information</b>                  |
| <b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2013</u>                                                                                                                              |                                           |
| <b>2</b> Assets:                                                                                                                                                                                               |                                           |
| <b>a</b> Market value .....                                                                                                                                                                                    | <b>2a</b> <u>992969048</u>                |
| <b>b</b> Actuarial value .....                                                                                                                                                                                 | <b>2b</b> <u>944347544</u>                |
| <b>3</b> Funding target/participant count breakdown:                                                                                                                                                           |                                           |
| <b>a</b> For retired participants and beneficiaries receiving payment.....                                                                                                                                     | <b>3a</b> <u>13135</u> <u>626377424</u>   |
| <b>b</b> For terminated vested participants.....                                                                                                                                                               | <b>3b</b> <u>5575</u> <u>134694184</u>    |
| <b>c</b> For active participants:                                                                                                                                                                              |                                           |
| <b>(1)</b> Non-vested benefits .....                                                                                                                                                                           | <b>3c(1)</b> <u>9406255</u>               |
| <b>(2)</b> Vested benefits .....                                                                                                                                                                               | <b>3c(2)</b> <u>137501232</u>             |
| <b>(3)</b> Total active.....                                                                                                                                                                                   | <b>3c(3)</b> <u>3454</u> <u>146907487</u> |
| <b>d</b> Total.....                                                                                                                                                                                            | <b>3d</b> <u>22164</u> <u>907979095</u>   |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                          |                                           |
| <b>a</b> Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                      | <b>4a</b>                                 |
| <b>b</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..... | <b>4b</b>                                 |
| <b>5</b> Effective interest rate .....                                                                                                                                                                         | <b>5</b> <u>6.27 %</u>                    |
| <b>6</b> Target normal cost .....                                                                                                                                                                              | <b>6</b> <u>4356276</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.

|                                                                       |  |                                        |
|-----------------------------------------------------------------------|--|----------------------------------------|
| <b>SIGN HERE</b>                                                      |  | <u>10/15/2014</u>                      |
| Signature of actuary                                                  |  | Date                                   |
| <u>JEANNIE A MANDELL</u>                                              |  | <u>14-06089</u>                        |
| Type or print name of actuary                                         |  | Most recent enrollment number          |
| <u>TOWERS WATSON DELAWARE INC.</u>                                    |  | <u>617-638-3700</u>                    |
| Firm name                                                             |  | Telephone number (including area code) |
| <u>800 BOYLSTON STREET, SUITE 600</u><br><u>BOSTON, MA 02199-8103</u> |  |                                        |
| Address of the firm                                                   |  |                                        |

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

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

**Schedule SB (Form 5500) 2013**  
**v. 130118**

| 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                     | 47711249               |
| 8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                | 0                     | 16173372               |
| 9 Amount remaining (line 7 minus line 8) .....                                                                                      | 0                     | 31537877               |
| 10 Interest on line 9 using prior year's actual return of <u>12.22</u> % .....                                                      |                       | 3853929                |
| 11 Prior year's excess contributions to be added to prefunding balance:                                                             |                       |                        |
| a Present value of excess contributions (line 38a from prior year) .....                                                            |                       | 53946129               |
| b Interest on (a) using prior year's effective interest rate of <u>7.00</u> % except as otherwise provided (see instructions) ..... |                       | 4543196                |
| c Total available at beginning of current plan year to add to prefunding balance .....                                              |                       | 58489325               |
| d Portion of (c) to be added to prefunding balance .....                                                                            |                       | 58489325               |
| 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                     | 93881131               |

| Part III Funding Percentages                                                                                                                                        |    |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------|
| 14 Funding target attainment percentage .....                                                                                                                       | 14 | 93.53 %  |
| 15 Adjusted funding target attainment percentage .....                                                                                                              | 15 | 104.00 % |
| 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 | 95.39 %  |
| 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<br>(MM-DD-YYYY)                                                          | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
| 07/01/2014                                                                        | 28000000                          |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 |                          |                                   |                                 |
|                                                                                   |                                   |                                 | Totals ►                 | 18(b)                             | 28000000 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                                                                 |          |
| b Contributions made to avoid restrictions adjusted to valuation date .....                                                   | 19b                                                                 |          |
| c Contributions allocated toward minimum required contribution for current year adjusted to valuation date .....              | 19c                                                                 | 25558891 |
| 20 Quarterly contributions and liquidity shortfalls:                                                                          |                                                                     |          |
| a Did the plan have a "funding shortfall" for the prior year? .....                                                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |          |
| b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? .....              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |          |
| c If line 20a is "Yes," see instructions and complete the following table as applicable:                                      |                                                                     |          |
| Liquidity shortfall as of end of quarter of this plan year                                                                    |                                                                     |          |
| (1) 1st                                                                                                                       | (2) 2nd                                                             | (3) 3rd  |
| 0                                                                                                                             | 0                                                                   | 0        |
|                                                                                                                               |                                                                     | 0        |

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

|                                                                                                                                                                                              |                       |                       |                        |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|------------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                                                                                                                                                                     |                       |                       |                        |                                                     |
| <b>a</b> Segment rates:                                                                                                                                                                      | 1st segment:<br>4.94% | 2nd segment:<br>6.15% | 3rd segment:<br>6.76 % | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code).....                                                                                                                                                  |                       |                       |                        | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age .....                                                                                                                                              |                       |                       |                        | <b>22</b> 62                                        |
| <b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                       |                       |                        |                                                     |

**Part VI Miscellaneous Items**

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

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

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

**Part VIII Minimum Required Contribution For Current Year**

| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                                                                                                                                                                                                                                                                                                                                           |                   |                    |  |                     |             |                                                      |          |          |                                                |  |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------|--|---------------------|-------------|------------------------------------------------------|----------|----------|------------------------------------------------|--|---|
| <b>a</b> Target normal cost (line 6).....                                                                                                                                            | <b>31a</b>                                                                                                                                                                                                                                                                                                                                | 4356276           |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           | <b>31b</b>                                                                                                                                                                                                                                                                                                                                | 0                 |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>32</b> Amortization installments:                                                                                                                                                 | <table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td><b>a</b> Net shortfall amortization installment.....</td> <td>58660124</td> <td>22267916</td> </tr> <tr> <td><b>b</b> Waiver amortization installment .....</td> <td></td> <td>0</td> </tr> </tbody> </table> |                   |                    |  | Outstanding Balance | Installment | <b>a</b> Net shortfall amortization installment..... | 58660124 | 22267916 | <b>b</b> Waiver amortization installment ..... |  | 0 |
|                                                                                                                                                                                      | Outstanding Balance                                                                                                                                                                                                                                                                                                                       | Installment       |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>a</b> Net shortfall amortization installment.....                                                                                                                                 | 58660124                                                                                                                                                                                                                                                                                                                                  | 22267916          |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                           | 0                 |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>33</b> 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 ..... | <b>33</b>                                                                                                                                                                                                                                                                                                                                 | 0                 |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...                                                            | <b>34</b>                                                                                                                                                                                                                                                                                                                                 | 26624192          |                    |  |                     |             |                                                      |          |          |                                                |  |   |
|                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                           | Carryover balance | Prefunding balance |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>35</b> Balances elected for use to offset funding requirement.....                                                                                                                | 0                                                                                                                                                                                                                                                                                                                                         | 20400000          | 20400000           |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>36</b> Additional cash requirement (line 34 minus line 35).....                                                                                                                   | <b>36</b>                                                                                                                                                                                                                                                                                                                                 | 6224192           |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....                                                   | <b>37</b>                                                                                                                                                                                                                                                                                                                                 | 25558891          |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                                                                                                                                                                                                                                                                                                                                           |                   |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       | <b>38a</b>                                                                                                                                                                                                                                                                                                                                | 19334699          |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                | <b>38b</b>                                                                                                                                                                                                                                                                                                                                | 19334699          |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>                                                                                                                                                                                                                                                                                                                                 | 0                 |                    |  |                     |             |                                                      |          |          |                                                |  |   |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>                                                                                                                                                                                                                                                                                                                                 | 0                 |                    |  |                     |             |                                                      |          |          |                                                |  |   |

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

|                                                                                                |                                                                                                                         |   |  |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---|--|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:                |                                                                                                                         |   |  |
| <b>a</b> Schedule elected .....                                                                | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |   |  |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made .....               | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |   |  |
| <b>42</b> Amount of acceleration adjustment .....                                              | <b>42</b>                                                                                                               | 0 |  |
| <b>43</b> Excess installment acceleration amount to be carried over to future plan years ..... | <b>43</b>                                                                                                               | 0 |  |

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

|                                                                                             |                                                             |     |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----|
| For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013  |                                                             |     |
| <b>A</b> Name of plan<br>STANLEY BLACK & DECKER PENSION PLAN                                | <b>B</b> Three-digit plan number (PN) ▶                     | 013 |
|                                                                                             |                                                             |     |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br>BLACK & DECKER (U.S.) INC. | <b>D</b> Employer Identification Number (EIN)<br>52-1127357 |     |

|               |                                                        |
|---------------|--------------------------------------------------------|
| <b>Part I</b> | <b>Service Provider Information (see instructions)</b> |
|---------------|--------------------------------------------------------|

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>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |
|-------------------------------------------------------------------------------------------------------------------|

|                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation |
|------------------------------------------------------------------------------------------------------------------|

|                                                                                                                   |
|-------------------------------------------------------------------------------------------------------------------|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |
|-------------------------------------------------------------------------------------------------------------------|

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

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

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**(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)

TOWERS WATSON DELAWARE INC

53-0181291

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 65 99                  | NONE                                                                                              | 873713                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

T ROWE PRICE

52-1714114

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 65                     | NONE                                                                                              | 738467                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

NISA INVESTMENT ADVISORS

48-1140940

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 522703                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

WELLS FARGO BANK N.A.

94-1347393

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 99 64                  | NONE                                                                                              | 492160                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

HARDING LOEVNER LP

27-0684167

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 476646                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

SPRUCEGROVE INVESTMENT MGMT

98-0399967

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 402422                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

PACIFIC INVESTMENT MANAGEMENT

33-0629048

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 368516                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

BARROW, HANLEY, MEWHINNEY & STRAUSS

75-2403190

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 307594                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

REID & RIEGE

06-0867204

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 29                     | NONE                                                                                              | 256738                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

SSGA MSCI ACWI EX USA NON

04-0025081

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 65 28 21               | NONE                                                                                              | 250455                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

SHENKMAN CAPITAL MANAGEMENT

13-3280361

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 194905                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

FIONDELLA, MILONE & LASARACINA LLP

06-1648707

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 10 65                  | NONE                                                                                              | 108755                                                                 | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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)

DATABANK IMX LLC

25-1921937

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 65                     | NONE                                                                                              | 36689                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

DELOITTE TAX LLP

86-1065772

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 10                     | NONE                                                                                              | 16000                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

UBS FINANCIAL SERVICES INC.

13-2638166

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>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)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28                     | NONE                                                                                              | 11712                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

**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<br>(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<br>(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<br>(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)

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

|                    |                     |
|--------------------|---------------------|
| <b>a</b> Name:     | <b>b</b> EIN:       |
| <b>c</b> Position: |                     |
| <b>d</b> Address:  | <b>e</b> Telephone: |
|                    |                     |

Explanation:

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration

## DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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  
STANLEY BLACK & DECKER PENSION PLAN

|                                            |     |
|--------------------------------------------|-----|
| <b>B</b> Three-digit<br>plan number (PN) ▶ | 013 |
|--------------------------------------------|-----|

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500  
BLACK & DECKER (U.S.) INC.

|          |                                      |
|----------|--------------------------------------|
| <b>D</b> | Employer Identification Number (EIN) |
|          | 52-1127357                           |

|               |                                                                                                                                                                                  |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b> | <b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b><br>(Complete as many entries as needed to report all interests in DFEs) |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: **SBD PENSION MASTER TRUST**

**b** Name of sponsor of entity listed in (a): STANLEY BLACK & DECKER, INC.

|                                       |                               |                                                                                                                      |
|---------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <b>06-0548860-028</b> | <b>d</b> Entity code <b>M</b> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>973533790</b> |
|---------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------|

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

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

|                 |                      |                                                                                                     |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN | <b>d</b> Entity code | <b>e</b> 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):

|                 |                      |                                                                                                     |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN | <b>d</b> Entity code | <b>e</b> 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):

|                 |                      |                                                                                                     |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN | <b>d</b> Entity code | <b>e</b> 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):

|                 |                      |                                                                                                     |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN | <b>d</b> Entity code | <b>e</b> 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):

|                 |                      |                                                                                                     |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN | <b>d</b> Entity code | <b>e</b> 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):

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

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

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

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

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

|                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                              |                                                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Financial Information</b><br><br>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).<br><br><b>► File as an attachment to Form 5500.</b> | <small>OMB No. 1210-0110</small><br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection</b> |
| For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>                                                                                                                                                                 |                                                                                                                                                                                                                                                                              |                                                                                                          |
| <b>A</b> Name of plan<br><u>STANLEY BLACK &amp; DECKER PENSION PLAN</u>                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                              | <b>B</b> Three-digit plan number (PN) <span style="float: right;">►</span> <u>013</u>                    |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>BLACK &amp; DECKER (U.S.) INC.</u>                                                                                                                                                                   |                                                                                                                                                                                                                                                                              | <b>D</b> Employer Identification Number (EIN)<br><br><u>52-1127357</u>                                   |

| Part I Asset and Liability Statement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                       |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------|-----------------|
| <b>1</b> 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. <b>Round off amounts to the nearest dollar.</b> 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 |
| <b>a</b> Total noninterest-bearing cash .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>1a</b>       |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                       |                 |
| <b>(1)</b> Employer contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1b(1)</b>    | 31190000              | 28000000        |
| <b>(2)</b> Participant contributions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>1b(2)</b>    |                       |                 |
| <b>(3)</b> Other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>1b(3)</b>    | 119105                | 165000          |
| <b>c</b> General investments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(1)</b>    | 9929594               | 0               |
| <b>(2)</b> U.S. Government securities .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>1c(2)</b>    |                       |                 |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(A)</b> |                       |                 |
| <b>(B)</b> All other .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(3)(B)</b> |                       |                 |
| <b>(4)</b> Corporate stocks (other than employer securities):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(4)(A)</b> |                       |                 |
| <b>(B)</b> Common.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1c(4)(B)</b> |                       |                 |
| <b>(5)</b> Partnership/joint venture interests .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>1c(5)</b>    |                       |                 |
| <b>(6)</b> Real estate (other than employer real property).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(6)</b>    |                       |                 |
| <b>(7)</b> Loans (other than to participants) .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <b>1c(7)</b>    |                       |                 |
| <b>(8)</b> Participant loans.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>1c(8)</b>    |                       |                 |
| <b>(9)</b> Value of interest in common/collective trusts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <b>1c(9)</b>    |                       |                 |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>1c(10)</b>   |                       |                 |
| <b>(11)</b> Value of interest in master trust investment accounts .....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>1c(11)</b>   | 950439768             | 973533790       |
| <b>(12)</b> Value of interest in 103-12 investment entities.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>1c(12)</b>   |                       |                 |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>1c(13)</b>   |                       |                 |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>1c(14)</b>   |                       |                 |
| <b>(15)</b> Other.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>1c(15)</b>   |                       |                 |

**1d** Employer-related investments:

|                                                                      |              | (a) Beginning of Year | (b) End of Year |
|----------------------------------------------------------------------|--------------|-----------------------|-----------------|
| (1) Employer securities .....                                        | <b>1d(1)</b> |                       |                 |
| (2) Employer real property .....                                     | <b>1d(2)</b> |                       |                 |
| <b>e</b> Buildings and other property used in plan operation .....   | <b>1e</b>    |                       |                 |
| <b>f</b> Total assets (add all amounts in lines 1a through 1e) ..... | <b>1f</b>    | 991678467             | 1001698790      |

**Liabilities**

|                                                                           |           |       |        |
|---------------------------------------------------------------------------|-----------|-------|--------|
| <b>g</b> Benefit claims payable .....                                     | <b>1g</b> |       |        |
| <b>h</b> Operating payables .....                                         | <b>1h</b> | 0     | 766540 |
| <b>i</b> Acquisition indebtedness .....                                   | <b>1i</b> |       |        |
| <b>j</b> Other liabilities .....                                          | <b>1j</b> | 42108 |        |
| <b>k</b> Total liabilities (add all amounts in lines 1g through 1j) ..... | <b>1k</b> | 42108 | 766540 |

**Net Assets**

|                                                           |           |           |            |
|-----------------------------------------------------------|-----------|-----------|------------|
| <b>l</b> Net assets (subtract line 1k from line 1f) ..... | <b>1l</b> | 991636359 | 1000932250 |
|-----------------------------------------------------------|-----------|-----------|------------|

**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 |
|------------------------------------------------------------------------------------------------------------|-----------------|------------|-----------|
| <b>a Contributions:</b>                                                                                    |                 |            |           |
| (1) Received or receivable in cash from: <b>(A)</b> Employers .....                                        | <b>2a(1)(A)</b> | 28000000   |           |
| <b>(B)</b> Participants .....                                                                              | <b>2a(1)(B)</b> |            |           |
| <b>(C)</b> Others (including rollovers) .....                                                              | <b>2a(1)(C)</b> |            |           |
| (2) Noncash contributions .....                                                                            | <b>2a(2)</b>    |            |           |
| (3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> ..... | <b>2a(3)</b>    |            | 28000000  |
| <b>b Earnings on investments:</b>                                                                          |                 |            |           |
| (1) Interest:                                                                                              |                 |            |           |
| <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....       | <b>2b(1)(A)</b> |            |           |
| <b>(B)</b> U.S. Government securities .....                                                                | <b>2b(1)(B)</b> |            |           |
| <b>(C)</b> Corporate debt instruments .....                                                                | <b>2b(1)(C)</b> |            |           |
| <b>(D)</b> Loans (other than to participants) .....                                                        | <b>2b(1)(D)</b> |            |           |
| <b>(E)</b> Participant loans .....                                                                         | <b>2b(1)(E)</b> |            |           |
| <b>(F)</b> Other .....                                                                                     | <b>2b(1)(F)</b> |            |           |
| <b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....                              | <b>2b(1)(G)</b> |            |           |
| (2) Dividends: <b>(A)</b> Preferred stock .....                                                            | <b>2b(2)(A)</b> |            |           |
| <b>(B)</b> Common stock .....                                                                              | <b>2b(2)(B)</b> |            |           |
| <b>(C)</b> Registered investment company shares (e.g. mutual funds) .....                                  | <b>2b(2)(C)</b> |            |           |
| <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....                  | <b>2b(2)(D)</b> |            |           |
| (3) Rents .....                                                                                            | <b>2b(3)</b>    |            |           |
| (4) Net gain (loss) on sale of assets: <b>(A)</b> Aggregate proceeds .....                                 | <b>2b(4)(A)</b> |            |           |
| <b>(B)</b> Aggregate carrying amount (see instructions) .....                                              | <b>2b(4)(B)</b> |            |           |
| <b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....                  | <b>2b(4)(C)</b> |            |           |
| (5) Unrealized appreciation (depreciation) of assets: <b>(A)</b> Real estate .....                         | <b>2b(5)(A)</b> |            |           |
| <b>(B)</b> Other .....                                                                                     | <b>2b(5)(B)</b> |            |           |
| <b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....         | <b>2b(5)(C)</b> |            |           |

|                                                                                                 |        | (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)  |            | 37559898  |
| (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 <b>income</b> amounts in column (b) and enter total .....               | 2d     |            | 65559898  |

**Expenses**

|                                                                                      |       |          |          |
|--------------------------------------------------------------------------------------|-------|----------|----------|
| e Benefit payment and payments to provide benefits:                                  |       |          |          |
| (1) Directly to participants or beneficiaries, including direct rollovers .....      | 2e(1) | 71060039 |          |
| (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) |          | 71060039 |
| 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) | 840521   |          |
| (2) Contract administrator fees .....                                                | 2i(2) |          |          |
| (3) Investment advisory and management fees .....                                    | 2i(3) | 497185   |          |
| (4) Other .....                                                                      | 2i(4) | 2136136  |          |
| (5) Total administrative expenses. Add lines 2i(1) through (4) .....                 | 2i(5) |          | 3473842  |
| j Total expenses. Add all <b>expense</b> amounts in column (b) and enter total ..... | 2j    |          | 74533881 |

**Net Income and Reconciliation**

|                                                          |       |  |          |
|----------------------------------------------------------|-------|--|----------|
| k Net income (loss). Subtract line 2j from line 2d ..... | 2k    |  | -8973983 |
| l Transfers of assets:                                   |       |  |          |
| (1) To this plan .....                                   | 2l(1) |  | 18269874 |
| (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: FIONDELLA, MILONE & LASARACINA LLP

(2) EIN: 06-1648707

**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   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|----------|
| <b>c</b> 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  |          |
| <b>d</b> 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  |          |
| <b>e</b> Was this plan covered by a fidelity bond? .....                                                                                                                                                                      | X   |    | 20000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....                                                                                       |     | X  |          |
| <b>g</b> 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  |          |
| <b>h</b> 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  |          |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) .....                                                                |     | X  |          |
| <b>j</b> 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  |          |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....                                                           |     | X  |          |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan? .....                                                                                                                                            |     | X  |          |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....                                                                                                  |     | X  |          |
| <b>n</b> 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. ....                                      |     | X  |          |

**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)

|                         |                       |
|-------------------------|-----------------------|
| <b>6a</b> Name of trust | <b>6b</b> Trust's EIN |
|                         |                       |

|                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                            |                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>SCHEDULE R</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Retirement Plan Information</b><br><br>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).<br><br>▶ <b>File as an attachment to Form 5500.</b> | OMB No. 1210-0110<br><br><b>2013</b><br><br><b>This Form is Open to Public Inspection.</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|

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

|                                                                                                        |                                                                    |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>STANLEY BLACK &amp; DECKER PENSION PLAN</u>                                | <b>B</b> Three-digit plan number (PN) ▶<br><u>013</u>              |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>BLACK &amp; DECKER (U.S.) INC.</u> | <b>D</b> Employer Identification Number (EIN)<br><u>52-1127357</u> |

|               |                      |
|---------------|----------------------|
| <b>Part I</b> | <b>Distributions</b> |
|---------------|----------------------|

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

|                                                                                                                                                                                                                                                                    |          |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....                                                                                                                              | <b>1</b> | <u>0</u>   |
| <b>2</b> 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):<br><br>EIN(s): <u>52-1127357</u> |          |            |
| <b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>                                                                                                                                                                                            |          |            |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....                                                                                                                                    | <b>3</b> | <u>157</u> |

|                |                                                                                                                                                                              |
|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part II</b> | <b>Funding Information</b> (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) |
|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                           |                              |                                        |                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------------|-----------------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A            |
| <b>If the plan is a defined benefit plan, go to line 8.</b>                                                                                                                                                                                                                                                                                                               |                              |                                        |                                         |
| <b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____<br><b>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</b> |                              |                                        |                                         |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....                                                                                                                                                                                                                             | <b>6a</b>                    |                                        |                                         |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year.....                                                                                                                                                                                                                                                                                 | <b>6b</b>                    |                                        |                                         |
| <b>c</b> 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) .....                                                                                                                                                                                                                          | <b>6c</b>                    |                                        |                                         |
| <b>If you completed line 6c, skip lines 8 and 9.</b>                                                                                                                                                                                                                                                                                                                      |                              |                                        |                                         |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline?.....                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input type="checkbox"/> N/A            |
| <b>8</b> 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?.....                                                                                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input checked="" type="checkbox"/> N/A |

|                 |                   |
|-----------------|-------------------|
| <b>Part III</b> | <b>Amendments</b> |
|-----------------|-------------------|

|                                                                                                                                                                                                                            |                                              |                                   |                               |                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------|-------------------------------|-----------------------------|
| <b>9</b> 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..... | <input checked="" type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input type="checkbox"/> No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-----------------------------------|-------------------------------|-----------------------------|

|                |                                                                                                                                                   |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part IV</b> | <b>ESOPs</b> (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. |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                             |                              |                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....                                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....                                                                                                                                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>b</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.)..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....                                                                              | <input type="checkbox"/> Yes | <input type="checkbox"/> 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:

|                                                                          |            |  |
|--------------------------------------------------------------------------|------------|--|
| <b>a</b> The current year .....                                          | <b>14a</b> |  |
| <b>b</b> The plan year immediately preceding the current plan year ..... | <b>14b</b> |  |
| <b>c</b> The second preceding plan year .....                            | <b>14c</b> |  |

- 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:

|                                                                                                       |            |  |
|-------------------------------------------------------------------------------------------------------|------------|--|
| <b>a</b> The corresponding number for the plan year immediately preceding the current plan year ..... | <b>15a</b> |  |
| <b>b</b> The corresponding number for the second preceding plan year .....                            | <b>15b</b> |  |

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

|                                                                                                                                                                        |            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|
| <b>a</b> Enter the number of employers who withdrew during the preceding plan year .....                                                                               | <b>16a</b> |  |
| <b>b</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 ..... | <b>16b</b> |  |

- 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: 34.4% Investment-Grade Debt: 59.1% High-Yield Debt: 0.0% Real Estate: 0.5% Other: 6.0%

- 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):

***Financial Statements***

***Stanley Black & Decker Pension Plan***

*Years ended December 31, 2013 and 2012  
with Independent Auditors' Report*

Stanley Black & Decker Pension Plan

Financial Statements

Years Ended December 31, 2013 and 2012

Contents

|                                                                 |   |
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| Notes to Financial Statements.....                              | 5 |



## Independent Auditors' Report

To the Finance and Pension Committee of the Board of Directors  
Stanley Black & Decker, Inc.

### **Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of the Stanley Black & Decker Pension Plan (formerly, The Black & Decker Pension Plan) (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

### **Management's Responsibility for the Financial Statements**

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

### **Auditor's Responsibility**

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

## Independent Auditors' Report (continued)

### **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 4 and Note 9, which was certified by The Bank of New York Mellon, the trustee of the Plan as of December 31, 2013, and State Street Bank & Trust Company, The Bank of New York Mellon, and Bank of America, N.A., the trustees of the Plan as of December 31, 2012, except for comparing such information to the related information included in the financial statements. We have been informed by the Plan administrator that the trustee and trustees hold the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2013, and obtained certifications from the trustees as of and for the year ended December 31, 2012, that the information provided to the Plan administrator by the trustee and trustees is complete and accurate.

### **Disclaimer of Opinion**

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

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

The form and content of the information included in the financial statements, other than that derived from the information certified by the trustee and trustees for the year ending December 31, 2013 and 2012, respectively, 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.

*Fiondella, Milone & LaSaracina LLP*

Glastonbury, Connecticut  
September 30, 2014

Stanley Black & Decker Pension Plan

Statements of Net Assets Available for Benefits

|                                                                         | December 31,            |                       |
|-------------------------------------------------------------------------|-------------------------|-----------------------|
|                                                                         | 2013                    | 2012                  |
| <b>Assets</b>                                                           |                         |                       |
| Investments at fair value                                               |                         |                       |
| Plan interest in SBD Pension Master Trust<br>(SW Master Trust for 2012) | \$ 973,533,790          | \$ 90,594,627         |
| Plan interest in BD Master Trust                                        | -                       | 861,999,375           |
| Money market funds                                                      | -                       | 9,929,594             |
| Total investments at fair value                                         | <u>973,533,790</u>      | <u>962,523,596</u>    |
| Employer contribution receivable                                        | 28,000,000              | 31,190,000            |
| Other receivables                                                       | 165,000                 | 115,277               |
| Interest receivable                                                     | -                       | 3,828                 |
| Total assets                                                            | <u>1,001,698,790</u>    | <u>993,832,701</u>    |
| <b>Liabilities</b>                                                      |                         |                       |
| Accrued expenses and other liabilities                                  | 766,540                 | 2,154,234             |
| Other payables                                                          | -                       | 42,108                |
| Net assets available for benefits                                       | <u>\$ 1,000,932,250</u> | <u>\$ 991,636,359</u> |

*See accompanying notes.*

# Stanley Black & Decker Pension Plan

## Statements of Changes in Net Assets Available for Benefits

|                                                                                | Years Ended December 31, |                       |
|--------------------------------------------------------------------------------|--------------------------|-----------------------|
|                                                                                | 2013                     | 2012                  |
| <b>Additions</b>                                                               |                          |                       |
| Interest in net appreciation and investment income of SBD Pension Master Trust | \$ 37,559,898            | \$ -                  |
| Interest in net appreciation and investment income of BD Master Trust          | -                        | 103,648,283           |
| Employer contributions                                                         | 28,000,000               | 58,335,000            |
| Total additions                                                                | 65,559,898               | 161,983,283           |
| <b>Deductions</b>                                                              |                          |                       |
| Benefits paid directly to participants                                         | 71,060,039               | 180,720,753           |
| Administrative expenses                                                        | 3,473,842                | 6,666,525             |
| Total deductions                                                               | 74,533,881               | 187,387,278           |
| Net decrease                                                                   | (8,973,983)              | (25,403,995)          |
| Transfers in                                                                   | 18,269,874               | 154,310,716           |
| Net assets available for benefits, beginning of year                           | 991,636,359              | 862,729,638           |
| Net assets available for benefits, end of year                                 | <u>\$ 1,000,932,250</u>  | <u>\$ 991,636,359</u> |

*See accompanying notes.*

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements

Years Ended December 31, 2013 and 2012

### 1. Description of the Plan

The Stanley Black & Decker Pension Plan (the Plan) is a defined benefit plan which, prior to the plan mergers effective December 31, 2012 (see below), covered substantially all U.S. employees of The Black & Decker Corporation, Black & Decker (U.S.) Inc., Black & Decker Inc. and certain affiliated companies, other than those employees who are covered by other pension plans or by collectively bargained agreements that do not provide for their participation in the Plan. Black & Decker (U.S.) Inc. (the Company) is the Plan sponsor and Plan administrator. The Plan was previously amended whereby after December 31, 2006, with certain exceptions, no new employees would become covered under the Plan.

Effective December 31, 2010, the Plan was amended whereby benefit accruals for all participants under the Plan were frozen as of December 31, 2010. The accrued benefit of any participant shall not exceed the amount of his or her accrued benefit under the Plan as of December 31, 2010, and no participants shall receive benefit service and no additional benefits shall accrue for any period after December 31, 2010. Also, effective December 31, 2010, participation under the Plan was frozen, so that after December 31, 2010, coverage under the Plan is limited to participants who are already covered under the Plan on December 31, 2010.

Effective September 20, 2012, the Plan was amended whereby a temporary lump sum option program (the TLS Program) commenced, which made available certain benefit payment options to eligible participants under the TLS Program. Each eligible participant was given the option to elect to commence payment of his or her vested benefit, including the option to elect to receive the present value of the vested benefit in a lump sum payment. Eligible participants were permitted to make elections to receive payments of their vested benefits during an election period that ran from September 20, 2012 to October 31, 2012, and distributions, including lump sum distributions, were primarily made pursuant to those elections in December 2012.

Effective December 31, 2012, all of the assets and liabilities of the following defined benefit pension plans transferred to and merged into the Plan: Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation (Porter-Cable Plan); Retirement Plan for Hourly Employees of Price Pfister, Inc. (Price Pfister Plan); Pension Plan for Hourly Employees of the True Temper Sports Division Represented by the United Steelworkers of America (True Temper Plan); Best Lock Corporation Employees' Pension Plan (Best Lock Plan); Pension Plan for Employees of Sargent & Greenleaf, Inc. (S&G Plan); National Manufacturing Co. Pension Plan (National Manufacturing Plan); and Pension Plan for Employees of Lista International Corporation (Lista Plan) (collectively "the Merged Plans") (Note 4). As a result of these mergers, participants covered under the Merged Plans became participants in the Plan. Separate benefit formulas and other provisions pertaining to benefit determinations are set forth in the Plan that continue to apply after December 31, 2012, to the participants who were previously covered under the Merged Plans.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### **1. Description of the Plan (continued)**

In connection with the mergers, effective December 31, 2012, The Black & Decker Pension Plan was renamed the Stanley Black & Decker Pension Plan. All benefits under the Merged Plans were frozen prior to the effective date of the merger.

Effective December 31, 2013, all assets and liabilities of the HSM Electronic Protection Services, Inc. Pension Plan (HSM Plan) were transferred to and merged with the Plan. As a result of this merger, participants covered under the HSM Plan became participants in the Plan. Notwithstanding the foregoing, a separate benefit formula continues to apply to HSM Plan participants, as do certain other provisions pertaining to benefit determinations.

The Company determined certain prior years lump sum distributions made from the S&G Plan were calculated incorrectly. The Plan administrator has taken the necessary steps to address these lump sums pursuant to the Employee Plans Compliance Resolution System (EPCRS) of the IRS, with the exception of one distribution that is to be addressed pursuant to the Voluntary Correction Program of the EPCRS. The Company estimated the amount of corrective payments due (Overpayments) to the S&G Plan to be \$115,277, as adjusted for the S&G Plan's earnings rate, which was recorded as a receivable to the Plan as of December 31, 2012. The Company estimated the amount of corrective payments due to S&G Plan participants to be \$42,108, as adjusted for the S&G Plan's earnings rate, which was recorded as a payable from the Plan as of December 31, 2012. These amounts are included as part of the assets and liabilities of the Plan that were transferred to and merged with the Plan as a result of the merger of the S&G Plan into the Plan on December 31, 2012.

Included as part of the assets and liabilities of the Plan at December 31, 2013, transferred in and merged from the HSM Plan, \$118,429 in Overpayments remained from incorrectly calculated lump sum distributions in 2010 and 2011.

As of December 31, 2013, the Company made full corrective payments due to S&G Plan participants, and the Plan was made whole for \$68,706 of Overpayments relating to the S&G Plan and HSM Plan. The Plan also received \$165,000 in January 2014, which included the principal amount of the Overpayments, as adjusted for earnings at the Plan's earnings rate.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### **1. Description of the Plan (continued)**

The Company's funding policy is to contribute amounts sufficient to meet minimum funding requirements as set forth in employee benefit and tax laws plus such additional amounts as the Company may determine to be appropriate. For 2012, the minimum required contributions to the Plan, including the Merged Plans were \$3,802,897. For 2013, there were no minimum required contributions to the Plan. The Company made contributions to the Plan of \$28,000,000 pertaining to 2013 and, for 2012; contributions of \$62,849,496 were made to the Plan, which includes \$4,514,496 of contributions made by the Merged Plans, transferred in to the Plan. The Plan has met the Employee Retirement Income Security Act (ERISA) minimum funding requirements.

Information about the Plan, the vesting and benefit provisions, and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in a Summary Plan Description. Copies are available from the Plan Administrator.

#### **2. Significant Accounting Policies**

##### **Basis of Accounting**

The Plan's financial statements are prepared on the accrual basis of accounting. 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 can affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

##### **Investments**

Prior to January 1, 2013, the assets of the Merged Plans were held by State Street Bank & Trust Company (BD Trustee), The Bank of New York Mellon (SW Trustee), and Bank of America, N.A. (Lista Plan Trustee), in their respective roles as Trustees of particular Merged Plans.

The Plan's and Merged Plans' (with the exception of the Lista Plan) investments consisted of an interest in The Black & Decker Defined Benefit Plan Master Trust (BD Master Trust) or the Stanley Works Pension Plan Master Trust (SW Master Trust), (Note 4 and Note 9), as of December 31, 2012, and the Lista Plan investments consisted of money market funds (Note 4) as of December 31, 2012.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 2. Significant Accounting Policies (continued)

##### Investments (continued)

Effective January 1, 2013, The Bank of New York Mellon was appointed as successor trustee with respect to the Plan and those Merged Plans for which it did not already serve as trustee. All of the assets held previously by State Street Bank & Trust Company under the BD Master Trust, and Bank of America, N.A., as the Lista Plan Trustee, were transferred to and held under the SW Master Trust.

Effective January 1, 2013, the SW Master Trust was amended and renamed the “Stanley Black & Decker, Inc. Pension Master Trust” (SBD Pension Master Trust).

For 2013, the fair value of the Plan’s, including the HSM Plan, interest in the SBD Pension Master Trust and, for 2012, of the Plan’s and Merged Plans’ (with the exceptions of the Lista Plan) interests in the SW Master Trust and BD Master Trust is based on the assets held in the applicable master trust as adjusted for contributions, investment earnings and losses and actual benefit distributions. For 2012, the fair value of the Lista Plan’s investments in money market funds is based on 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.

At the end of each month, the fair value of the Plan’s, HSM Plan and Merged Plans’ master trust assets is determined based upon activity in the applicable master trust during that month. Items specifically identifiable with the Plan, HSM Plan or a Merged Plan, such as contributions, benefit payments, transfers, and expenses directly attributable to the plan, are first credited or charged to that plan. Next, allocations are made to the Plan, HSM Plan or Merged Plan for administrative expenses not specifically identifiable with any plan, investment income, and realized and unrealized gains and losses on investments of the master trusts. Such allocations are based on the relationship of the proportionate share of the Plan, HSM Plan or Merged Plan at the beginning of the period, after consideration of those specifically identifiable items first credited or charged to the plan, to the total share of all plans participating in the applicable master trust during such period.

The Plan, through its investment in the SBD Pension Master Trust in 2013 and BD Master Trust in 2012, utilizes derivative financial instruments to manage market risk. During 2013 the SBD Pension Master Trust and during 2012 the BD Master Trust utilized futures contracts for trading or hedging purposes. These derivative financial instruments are marked to market and reflected in the Statement of Net Assets Available for Benefits at fair value.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 2. Significant Accounting Policies (continued)

##### Fair Value of Investments

The Plan follows Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurement and Disclosures* (ASC 820), for all financial assets and liabilities and nonfinancial assets and liabilities that are recognized or disclosed at fair value in the financial statements on a recurring basis. ASC 820 defines fair value, establishes a fair value hierarchy, and expands disclosures about fair value measurements.

ASC 820 defines fair value as the price that would be received upon sale of an asset or paid upon the transfer of a liability in an orderly transaction between market participants at the measurement date and in the principal or most advantageous market for that asset or liability.

The fair value is calculated based on assumptions that market participants would use in pricing the asset or liability, not on assumptions specific to the entity. In addition, the fair value of liabilities includes consideration of non-performance risk including the Plan's own credit risk.

In addition to defining fair value, ASC 820 expands the disclosure requirements around fair value and establishes a fair value hierarchy for valuation inputs. The hierarchy prioritizes the inputs into three levels based on the extent to which inputs used in measuring fair value are observable in the market. Each fair value measurement is reported in one of three levels which is determined by the lowest level input that is significant to the fair value measurement.

These levels are:

Level 1 – Inputs are based upon unadjusted quoted prices for identical instruments traded in active markets.

Level 2 - Inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Inputs are generally unobservable and typically reflect management's estimates of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models, and similar techniques.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 2. Significant Accounting Policies (continued)

##### Fair Value of Investments (continued)

Following is a description of the valuation methodologies used for Plan assets measured at fair value within the SBD Pension Master Trust as of December 31, 2013 and within the SW Master Trust as of December 31, 2012.

Short-Term Investments – Level 1 short-term investments are valued at the closing price reported on the active market on which the individual securities are traded. Level 2 short-term investments are valued based on quoted prices for identical or similar assets or liabilities in non-active markets or pricing models for which inputs are observable.

Equity Investments – Level 1 securities are valued at the closing price reported on the active market on which the individual securities are traded. Level 2 securities are valued using the net asset value or unit value as reported by the investment managers. Level 3 securities consist mainly of limited partnership funds valued based on third party valuations for which significant unobservable inputs are not reasonably available.

Government Securities – Level 1 government securities are valued at the closing price reported on the active market on which the individual securities are traded. Level 2 government securities are valued at the closing price of similar assets in active markets.

Corporate Securities – Level 2 securities are valued at the closing price of similar assets that have recently traded.

Following is a description of the valuation methodologies used for Merged Plan assets measured at fair value within the BD Master Trust at December 31, 2012.

Short-term investments – Level 2 securities are valued based on quoted prices for identical or similar assets or liabilities in non-active markets or pricing models for which inputs are observable.

Fixed income – Level 1 securities are valued at the closing price reported on the active market on which the individual securities are traded. Level 2 securities are valued at the closing price of similar assets in active markets.

Equity investments – Level 1 securities are valued at the closing price reported on the active market on which the individual securities are traded. Level 2 securities are valued at the closing price of similar assets in active markets. Level 3 securities consist mainly of limited partnership funds valued based on third party valuations for which significant unobservable inputs are not reasonably available.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### **2. Significant Accounting Policies (continued)**

##### **Fair Value of Investments (continued)**

Following is a description of the valuation methodologies used for assets measured at fair value within the Lista Plan at December 31, 2012.

Money Market Funds – valued at the net asset value as of the close of business at the end of the plan year based on quoted active market prices of the underlying investments. Based on the valuation method these securities are categorized as Level 1.

There have been no changes in the valuation methodologies used to determine fair value at December 31, 2013 and 2012. See Note 10 for further discussion of fair value measurements.

##### **Benefits**

Benefit claims are recorded as deductions when they have been approved for payment and paid by the Plan.

##### **Administrative Expenses**

To the extent permitted by ERISA, certain Plan actuarial and investment advisory fees, Pension Benefit Guaranty Corporation premiums, and some other direct expenses are paid by the Plan from SBD Pension Master Trust assets. In 2012, certain fees, premiums and expenses were paid from assets of the BD Master Trust, the SW Master Trust, and the Lista Plan Trust. Certain other expenses are paid by the Company.

##### **Adoption of New Accounting Pronouncements**

In June 2013, the FASB issued ASU No. 2013-09, “Deferral of the Effective Date of Certain Disclosures for Nonpublic Employee Benefit Plans in Update No. 2011-04”, which defers indefinitely certain disclosures about investments held by nonpublic employee benefit plans in their plan sponsors’ own nonpublic equity securities. The deferral is effective immediately for all financial statements that were not yet issued as of the date of ASU 2013-09. The adoption of ASU 2013-09 did not have a material impact on the Plan’s financial statements.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 2. Significant Accounting Policies (continued)

##### Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those estimated future periodic payments that are attributable under a plan's provisions to services rendered by employees. These include benefits expected to be paid to:

- 1) Retired or terminated employees or their beneficiaries,
- 2) Beneficiaries of employees who have died, and
- 3) Present employees or their beneficiaries.

Benefits payable under all circumstances-retirement, death, and disability-are included, to the extent attributable to service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuation of the Plan are:

|                                            |                                                                       |
|--------------------------------------------|-----------------------------------------------------------------------|
| Mortality basis                            | Static tables under Section 430(h)(3)(A) of the IRC for 2013 and 2012 |
| Retirement age                             | Average retirement age of 65                                          |
| Present value of accumulated plan benefits | Discount rate of 6.25% for 2013 and 2012                              |

The foregoing assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable to determine the actuarial present value of accumulated plan benefits.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 3. Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is as follows:

|                                           | January 1,            |                       |
|-------------------------------------------|-----------------------|-----------------------|
|                                           | 2013                  | 2012                  |
| Vested benefits:                          |                       |                       |
| Participants currently receiving payments | \$ 619,537,361        | \$ 529,470,072        |
| Participants with deferred benefits       | 138,335,260           | 183,254,672           |
| Other participants                        | 142,157,878           | 140,830,033           |
| Total vested benefits                     | 900,030,499           | 853,554,777           |
| Nonvested benefits                        | 9,458,929             | 11,637,320            |
|                                           | <u>\$ 909,489,428</u> | <u>\$ 865,192,097</u> |

The statement of changes in the actuarial present value of accumulated plan benefits (PVAB) as of January 1, 2013 is as follows:

|                                                             |                       |
|-------------------------------------------------------------|-----------------------|
| Present value of accumulated benefits as of January 1, 2012 | \$ 865,192,097        |
| Changes during the year due to:                             |                       |
| Benefits paid                                               | (180,720,753)         |
| Amount of PVAB merged into the Plan                         | 146,585,063           |
| Decrease in the discount period                             | 51,883,606            |
| Changes in actuarial assumptions                            | 2,407,553             |
| Actuarial losses                                            | 24,141,862            |
| Net increase                                                | 44,297,331            |
| Present value of accumulated benefits as of January 1, 2013 | <u>\$ 909,489,428</u> |

The actuarial present value of accumulated plan benefits for the HSM Plan as of the beginning of the year, January 1, 2013, is \$16,772,836.

The significant assumptions underlying the actuarial computations for the HSM Plan as of January 1, 2013, are the same as those shown above for the Plan.

The actuarial present value of accumulated plan benefits for the Merged Plans as of the beginning of the prior year, January 1, 2012, is as follows: Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation, \$19,766,328; Retirement Plan for Hourly Employees of Price Pfister, Inc., \$29,173,217; Pension Plan for Hourly Employees of the True Temper Sports Division Represented by the United Steelworkers of America, \$6,261,515; Best Lock Corporation Employees' Pension Plan, \$10,930,868; Pension Plan for Employees of Sargent & Greenleaf, Inc., \$16,093,962; National Manufacturing Co. Pension Plan, \$56,319,014; and Pension Plan for Employees of Lista International Corporation, \$9,112,057.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 3. Accumulated Plan Benefits (continued)

Significant assumptions underlying the actuarial computations for the Merged Plans as of January 1, 2012, are as follows:

For the Porter-Cable Plan; Price Pfister Plan; and True Temper Plan, the significant assumptions underlying the actuarial computations are the same as those shown above for the Stanley Black & Decker Pension Plan.

Best Lock Plan and S&G Plan:

|                 |                                                     |
|-----------------|-----------------------------------------------------|
| Discount rate   | 6.50%                                               |
| Mortality basis | Static tables under Section 430(h)(3)(a) of the IRC |

The rates at which participants are assumed to retire by age are:

|            |      |
|------------|------|
| Age 55-59: | 2%   |
| Age 60:    | 5%   |
| Age 61:    | 10%  |
| Age 62:    | 20%  |
| Age 63:    | 10%  |
| Age 64:    | 20%  |
| Age 65-66: | 50%  |
| Age 67:    | 100% |

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 3. Accumulated Plan Benefits (continued)

National Manufacturing Plan:

|                 |                                                     |
|-----------------|-----------------------------------------------------|
| Discount rate   | 6.50%                                               |
| Mortality basis | Static tables under Section 430(h)(3)(a) of the IRC |

The rates at which participants are assumed to retire by age are:

|                   |      |
|-------------------|------|
| Age 55-60:        | 5%   |
| Age 61:           | 10%  |
| Age 62-64:        | 25%  |
| Age 65-68:        | 50%  |
| Age 69 and older: | 100% |

Lista Plan:

|                                            |                                                     |
|--------------------------------------------|-----------------------------------------------------|
| Mortality basis                            | Static tables under Section 430(h)(3)(A) of the IRC |
| Retirement age                             | Assumed average retirement age of 65                |
| Present value of accumulated plan benefits | Discount rate of 7.25%                              |

#### 4. Investments

In 2012, with respect to certain of the Merged Plans, the Porter-Cable Plan, Price Pfister Plan, and the True Temper Plan, the Company maintained The Black & Decker Defined Benefit Plan Master Trust Agreement for the BD Master Trust. Pursuant to the applicable trust agreement, the assets of the BD Master Trust were held and administered by State Street Bank and Trust Company (BD Trustee) as of December 31, 2012. The BD Trustee held cash, short-term investments, mutual funds, bonds, common stocks, and futures contracts, which are stated at fair market value. In accordance with the trust agreement, the BD Trustee held the assets of the aforementioned Merged Plans, and executed investment transactions. All investment information related to the BD Master Trust disclosed in the accompanying financial statements with respect to investments held at December 31, 2012, net appreciation of assets, interest income and expenses for the year then ended, were obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the BD Trustee with respect to 2012.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 4. Investments (continued)

All investment information relating to the Lista Plan disclosed in the accompanying financial statements, including investments held at December 31, 2012, and transfers in for the year then ended, was obtained or derived from information supplied to the Lista Plan administrator and certified as complete and accurate by Bank of America, N.A., the Lista Plan trustee for 2012.

Stanley Black & Decker, Inc. maintains the Defined Benefit Plan Master Trust Agreement, dated as of July 1, 2008, between Stanley Black & Decker, Inc. (formerly known as The Stanley Works) and The Bank of New York Mellon (successor by operation of law to Mellon Bank, N.A.), as Master Trustee, for the SW Master Trust (for 2013, the SBD Pension Master Trust, as discussed below). Pursuant to the trust agreement, the assets of the SW Master Trust were held and administered by The Bank of New York Mellon (SW Trustee) as of December 31, 2012. The SW Trustee held the annuity contract purchased in 2002, cash, short-term investments, debt securities, and mutual funds, which are stated at fair market value with respect to the year ending on December 31, 2012. In accordance with the trust agreement, the SW Trustee held the assets of the Merged Plans other than those of which were held under the BD Master Trust or by the Lista Trustee, and executed investment transactions. All investment information related to the SW Master Trust disclosed in the accompanying financial statements, including investments held at December 31, 2012, and transfers in for the year then ended, were obtained or derived from information supplied to the administrator of the Plan or the Merged Plans, as applicable, and certified as complete and accurate by the SW Trustee with respect to 2012.

Effective January 1, 2013, The Bank of New York Mellon was appointed as successor trustee with respect to the assets of the Plan and certain Merged Plans held under the BD Master Trust; the Porter-Cable Plan, the Price Pfister Plan, and the True Temper Plan, and the assets of the Lista Plan previously held by Bank of America, N.A., as the Lista Plan Trustee. All of the assets held previously by State Street Bank & Trust Company under the BD Master Trust, and Bank of America, N.A., as the Lista Plan Trustee were transferred to and held under the SW Master Trust.

Effective January 1, 2013, the SW Master Trust was amended and renamed the “Stanley Black & Decker, Inc. Pension Master Trust” (SBD Pension Master Trust) and effective January 1, 2013, the Plan, including the Merged Plans, participated in the SBD Pension Master Trust. The Bank of New York Mellon (successor by operation of law to Mellon Bank, N.A.) is Master Trustee under the SBD Pension Master Trust. All investment information related to the SBD Pension Master Trust that is disclosed in the accompanying financial statements, including investments held at December 31, 2013, and transfers in for the year then ended, was obtained or derived from information supplied to the administrator of the Plan, including the HSM Plan and Merged Plans, and certified as complete and accurate by the Master Trustee.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 4. Investments (continued)

The change in the difference between fair value and the cost of investments is reflected as unrealized appreciation or (depreciation) in the aggregate fair value of investments. The realized gain or (loss) on investments is the difference between the proceeds received and the average cost of investments sold. The total unrealized appreciation or (depreciation) and the realized gain or (loss) is reflected as net appreciation or (depreciation) of Plan assets within the operating results of the SBD Pension Master Trust for 2013, and the SW Master Trust, BD Master Trust, or Lista Plan Trust, as applicable for 2012.

The fair values of individual investments that represent 5% or more of the Plan's assets available for benefits are as follows (Note 9):

|                                                                           | <b>December 31,</b>   |                      |
|---------------------------------------------------------------------------|-----------------------|----------------------|
|                                                                           | <b>2013</b>           | <b>2012</b>          |
| Plan's interest in SBD Pension Master Trust<br>(SW Master Trust for 2012) | <b>\$ 973,533,790</b> | <b>\$ 90,594,627</b> |
| Plan's interest in BD Master Trust                                        | -                     | <b>861,999,375</b>   |

#### 5. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service dated October 20, 2009, stating that the form of the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, is not subject to tax under the present income tax law. Since the form of the Plan is qualified, the Plan is required to operate in accordance with its terms in order to maintain its qualification. The Plan administrator is not aware of any course of action or series of events that have occurred that might adversely affect the Plan's qualified status.

Taking into account certain corrections being made pursuant to the Employee Plans Compliance Resolution System (EPCRS), including certain matters to be submitted pursuant to the Voluntary Correction Program of the EPCRS, the Plan administrator, which consults regularly with legal counsel regarding Plan matters, believes that the Plan is currently being operated in accordance with its terms. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### **6. Risks and Uncertainties**

The Plan, including the HSM Plan and Merged Plans, through its participation in the applicable master trusts or through individual plan investments, invests in various investment securities. 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 change could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

#### **7. Plan Termination**

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated.

- a. That portion of a participant's benefit derived from his or her own contributions.
- b. Benefits that former employees or their beneficiaries have been receiving for at least three years as of the date of the Plan termination, or that employees who were eligible to retire at least three years prior to the date of the Plan termination would have been receiving if they had retired and received benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest amount that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under the Plan provisions in effect at any time during the five years preceding Plan termination.
- c. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) up to the applicable limitations (discussed below).
- d. All other vested benefits not insured by the PBGC.
- e. All non-vested benefits.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### **7. Plan Termination (continued)**

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2013 and 2012, the monthly ceiling was \$4,790 and \$4,653, respectively. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination, whichever comes later. For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceiling is actuarially adjusted downward.

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

If participants receive all of their benefits pursuant to the termination of the Plan, any assets remaining after the benefits are provided will be returned to the Company.

#### **8. Party-in-Interest Transactions**

For 2013, Plan assets, including the HSM Plan, include investment in funds held by The Bank of New York Mellon which serves as the Plan's sole Trustee. For 2012, the assets of the Plan and certain Merged Plans, the Porter-Cable Plan, Price Pfister Plan, and True Temper Plan, were separately invested in funds held by State Street Bank & Trust Company, and the assets of certain Merged Plans, the Best Lock Corporation Employees' Pension Plan, Pension Plan for Employees of Sargent & Greenleaf, Inc., and National Manufacturing Co. Pension Plan, were separately invested in funds held by The Bank of New York Mellon. For 2012, the assets of the Lista Plan were separately invested by Bank of America, N.A. The Plan's Trustees in 2013 and 2012, performed certain administrative services for the Plan and as such, these transactions qualified as party-in-interest transactions under ERISA. These party-in-interest transactions are deemed not to be prohibited because they are covered by statutory and administrative exemptions pursuant to the IRC and the rules under ERISA regarding prohibited transactions.

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 9. Investment in Master Trust

As of December 31, 2013, the Plan's, including the HSM Plan, investment consists of an interest in the SBD Pension Master Trust, and as of December 31, 2012, investments of certain of the Merged Plans, the Best Lock Plan, National Manufacturing Plan, and S&G Plan, consist of an interest in the SW Master Trust. The SBD Pension Master Trust (for 2012, the SW Master Trust) was created and is maintained for certain employee pension benefit plans sponsored by the Company, including the Plan and the aforementioned Merged Plans. The Plan's interest in the assets of the SBD Pension Master Trust was 92.5%, amounting to \$973,533,790 for the year ended December 31, 2013. The aforementioned Merged Plans interest in the assets of the SW Master Trust was 66.9%, amounting to \$90,594,627, for the year ended December 31, 2012.

The following is a summary of the financial information and data for the SBD Pension Master Trust (SW Master Trust for 2012) certified by the Master Trustee as complete and accurate in accordance with Section 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA:

|                                                                     | <b>December 31,</b> |                |
|---------------------------------------------------------------------|---------------------|----------------|
|                                                                     | <b>2013</b>         | <b>2012</b>    |
| <b>Master trust assets</b>                                          |                     |                |
| Cash                                                                | \$ 7,201,751        | \$ 100,008     |
| Investments at fair value:                                          |                     |                |
| Short-term investments                                              | 17,097,374          | 1,733,035      |
| Equity investments                                                  | 396,654,983         | 64,045,928     |
| Government securities                                               | 235,975,341         | 36,083,307     |
| Corporate securities                                                | 388,523,008         | 32,867,794     |
| Total investments at fair value                                     | 1,038,250,706       | 134,730,064    |
| Receivables                                                         |                     |                |
| Investment income receivable                                        | 6,135,831           | 705,094        |
| Receivable for investments sold                                     | 12,773,696          | 149,998        |
| FFX contracts receivable                                            | 10,249,903          | -              |
| Total receivables                                                   | 29,159,430          | 855,092        |
| Total assets                                                        | 1,074,611,887       | 135,685,164    |
| <b>Master trust liabilities</b>                                     |                     |                |
| Payable for investments purchased                                   | 11,129,544          | 227,301        |
| FFX contracts payable                                               | 10,249,903          | -              |
| Other investment payables                                           | 325,912             | -              |
| Total master trust liabilities                                      | 21,705,359          | 227,301        |
| Total SBD Pension Master Trust (SW Master Trust in 2012) net assets | \$ 1,052,906,528    | \$ 135,457,863 |

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 9. Investment in Master Trust (continued)

The changes in the assets of the SBD Pension Master Trust (SW Master Trust for 2012) are as follows:

|                                        | Years Ended<br>December 31, |                |
|----------------------------------------|-----------------------------|----------------|
|                                        | 2013                        | 2012           |
| Additions:                             |                             |                |
| Investment income:                     |                             |                |
| Net appreciation of plan assets        | \$ 12,562,854               | \$ 11,616,959  |
| Dividends on common stock              | 4,204,205                   | 720,600        |
| Interest                               | 24,512,046                  | 2,865,738      |
| Total investment gain                  | 41,279,105                  | 15,203,297     |
| Employer contributions                 | 37,120,000                  | 6,460,000      |
| Transfer from other accounts           | 2,592,861                   | 2,219,468      |
| Total additions                        | 80,991,966                  | 23,882,765     |
| Deductions:                            |                             |                |
| Benefits paid directly to participants | 78,773,535                  | 10,704,665     |
| Administrative expenses                | 5,636,721                   | 788,465        |
| Total deductions                       | 84,410,256                  | 11,493,130     |
| Net (decrease) increase                | (3,418,290)                 | 12,389,635     |
| Transfers in                           | 920,866,955                 | -              |
| Assets at beginning of year            | 135,457,863                 | 123,068,228    |
| Assets at end of year                  | \$ 1,052,906,528            | \$ 135,457,863 |

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 9. Investment in Master Trust (continued)

The investments in the SBD Pension Master Trust (for 2012, the SW Master Trust), including those bought, sold and held during the year, appreciated (depreciated) in value as follows:

|                        | <b>December 31,</b>                                                                      |                                                  |                                                                           | <b>December 31,</b>                              |  |
|------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------|--|
|                        | <b>2013</b>                                                                              |                                                  | <b>2013</b>                                                               | <b>2012</b>                                      |  |
|                        | <b>Net<br/>Appreciation<br/>(Depreciation)<br/>in Fair Value<br/>During the<br/>Year</b> | <b>Fair Value at<br/>the End of the<br/>Year</b> | <b>Net<br/>Appreciation<br/>in Fair<br/>Value<br/>During the<br/>Year</b> | <b>Fair Value at<br/>the End of the<br/>Year</b> |  |
| Short-term investments | \$ 69,072                                                                                | \$ 17,097,374                                    | \$ 533                                                                    | \$ 1,733,035                                     |  |
| Equity investments     | 79,145,418                                                                               | 396,654,983                                      | 8,747,133                                                                 | 64,045,928                                       |  |
| Government securities  | (30,591,150)                                                                             | 235,975,341                                      | 124,453                                                                   | 36,083,307                                       |  |
| Corporate securities   | (36,060,486)                                                                             | 388,523,008                                      | 2,744,840                                                                 | 32,867,794                                       |  |
|                        | <b>\$ 12,562,854</b>                                                                     | <b>\$ 1,038,250,706</b>                          | <b>\$ 11,616,959</b>                                                      | <b>\$ 134,730,064</b>                            |  |

The fair values of individual investments that represent 5% or more of the SBD Pension Master Trust's (for 2012, the SW Master Trust's) assets are as follows:

|                                                  | <b>December 31,</b> |             |
|--------------------------------------------------|---------------------|-------------|
|                                                  | <b>2013</b>         | <b>2012</b> |
| MSCI World Index CTF                             | \$ 193,094,708      | \$ *        |
| Sprucegrove U.S. Global PF                       | 89,213,276          | *           |
| PIMCO FDS Long Duration Corporate Bond Portfolio | 59,509,361          | *           |
| EuroPacific Growth Fund                          | *                   | 34,803,829  |
| SSgA S&P 500 Flagship NL Fund                    | *                   | 23,674,582  |

\*Investment did not exceed 5% of plan assets.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 9. Investment in Master Trust (continued)

At December 31, 2012, the Plan's investment consists of an interest in the BD Master Trust. The BD Master Trust was created and maintained for certain employee pension benefit plans sponsored by the Company, including the Plan. The Plan's interest in the assets of the BD Master Trust was 94.6%, amounting to \$861,999,375, for the year ended December 31, 2012.

The following is a summary of the financial information and data for the BD Master Trust certified by the BD Trustee as complete and accurate in accordance with Section 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA:

|                                   | <b>December 31,<br/>2012</b> |
|-----------------------------------|------------------------------|
| <b>Master trust assets</b>        |                              |
| Cash                              | \$ 95,023                    |
| Investments, at fair value:       |                              |
| Short-term investments            | 11,744,701                   |
| Fixed income                      | 574,355,823                  |
| Common stocks (domestic)          | 140,394,959                  |
| Common stocks (foreign)           | 178,511,010                  |
| Total investments at fair value   | <u>905,006,493</u>           |
| Receivables:                      |                              |
| Investment income receivable      | 5,681,832                    |
| Receivable for investments sold   | 4,131,305                    |
| Total receivables                 | <u>9,813,137</u>             |
| Total assets                      | <u>914,914,653</u>           |
| <b>Master trust liabilities</b>   |                              |
| Payable for investments purchased | 3,230,519                    |
| Total master trust net assets     | <u><u>\$ 911,684,134</u></u> |

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 9. Investment in Master Trust (continued)

At December 31, 2012, the changes in the assets of the BD Master Trust are as follows:

|                                        | <b>Year Ended<br/>December 31,<br/>2012</b> |
|----------------------------------------|---------------------------------------------|
| Additions:                             |                                             |
| Investment income:                     |                                             |
| Net appreciation of plan assets        | \$ 87,088,962                               |
| Interest and dividend income           | 28,561,151                                  |
| Total investment gain                  | 115,650,113                                 |
| Employer contributions                 | 38,670,000                                  |
| Total additions                        | 154,320,113                                 |
| Deductions:                            |                                             |
| Benefits paid directly to participants | 192,386,103                                 |
| Administrative expenses                | 6,817,528                                   |
| Total deductions                       | 199,203,631                                 |
| Net decrease                           | (44,883,518)                                |
| Assets at beginning of year            | 956,567,652                                 |
| Assets at end of year                  | \$ 911,684,134                              |

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 9. Investment in Master Trust (continued)

At December 31, 2012, the BD Master Trust's investments (including those bought, sold and held during the year) appreciated in value as follows:

|                          | <b>December 31,<br/>2012</b>                                          |                                                  |
|--------------------------|-----------------------------------------------------------------------|--------------------------------------------------|
|                          | <b>Net<br/>Appreciation<br/>in Fair Value<br/>During the<br/>Year</b> | <b>Fair Value at<br/>the End of<br/>the Year</b> |
| Short-term investments   | \$ 745,580                                                            | \$ 11,744,701                                    |
| Fixed income             | 35,331,057                                                            | 574,355,823                                      |
| Common stocks (domestic) | 43,875,182                                                            | 140,394,959                                      |
| Common stocks (foreign)  | 7,137,143                                                             | 178,511,010                                      |
|                          | <u>\$ 87,088,962</u>                                                  | <u>\$ 905,006,493</u>                            |

At December 31, 2012, the fair values of individual investments that represented 5% or more of the BD Master Trust's assets were as follows:

|                                                  | <b>December 31,<br/>2012</b> |
|--------------------------------------------------|------------------------------|
| MSCI World Index NL QP CTF                       | \$ 144,168,562               |
| Sprucegrove US Global PF                         | 72,890,776                   |
| PIMCO FDS Long Duration Corporate Bond Portfolio | 47,188,750                   |

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 10. Fair Value Measurement

The following tables summarize the fair values and levels within the fair value hierarchy of the Plan investments, which are measured on a recurring basis, for the investments of the SBD Pension Master Trust (for 2012, the SW Master Trust) as of December 31, 2013 and 2012:

| <b>Fair Value at December 31, 2013</b> |                       |                       |                      |                         |
|----------------------------------------|-----------------------|-----------------------|----------------------|-------------------------|
|                                        | <b>Level 1</b>        | <b>Level 2</b>        | <b>Level 3</b>       | <b>Total</b>            |
| Short-term investments                 | \$ 770,234            | \$ 16,327,140         | \$ -                 | \$ 17,097,374           |
| Equity investments                     | 79,592,177            | 282,307,984           | 34,754,822           | 396,654,983             |
| Government securities                  | 222,758,264           | 13,217,077            | -                    | 235,975,341             |
| Corporate securities                   | -                     | 388,523,008           | -                    | 388,523,008             |
| Total investments at fair value        | <u>\$ 303,120,675</u> | <u>\$ 700,375,209</u> | <u>\$ 34,754,822</u> | <u>\$ 1,038,250,706</u> |

  

| <b>Fair Value at December 31, 2012</b> |                      |                      |                |                       |
|----------------------------------------|----------------------|----------------------|----------------|-----------------------|
|                                        | <b>Level 1</b>       | <b>Level 2</b>       | <b>Level 3</b> | <b>Total</b>          |
| Short-term investments                 | \$ 1,189,827         | \$ 543,208           | \$ -           | \$ 1,733,035          |
| Equity mutual funds                    | 40,371,346           | 23,674,582           | -              | 64,045,928            |
| Government securities                  | 33,549,972           | 2,533,335            | -              | 36,083,307            |
| Corporate securities                   | -                    | 32,867,794           | -              | 32,867,794            |
| Total investments at fair value        | <u>\$ 75,111,145</u> | <u>\$ 59,618,919</u> | <u>\$ -</u>    | <u>\$ 134,730,064</u> |

At December 31, 2013, the SBD Pension Master Trust held approximately 60% of its assets in government and corporate debt securities with the remainder allocated among various equity investments as well as a small allocation to alternative investments. The debt securities were split between levels 1 and 2 based on their liquidity, with U.S. Treasury securities being assigned to Level 1 and corporate debt securities assigned to Level 2. The SBD Pension Master Trust's equity holdings were split between levels 1 and 2 based on the type of investment, with publically quoted equities held in a separately managed account placed in Level 1 and investments held in commingled funds and similar vehicles, which are recorded at the net asset value based on the market prices of the underlying securities, placed in Level 2.

At December 31, 2012, the SW Master Trust held approximately 51% of its assets in government and corporate debt securities with the remainder allocated between a collective trust invested in the S&P 500 Index, and two mutual funds invested in small cap U.S. equities and international equities, respectively. The debt securities have been split between Levels 1 and 2 based on their perceived liquidity, with U.S. Treasury securities being assigned to Level 1 and corporate debt securities assigned to Level 2. The SW Master Trust's equity holdings have been split between Levels 1 and 2 based on the type of investment vehicle, with publically quoted mutual funds being placed in Level 1 and commingled index fund, which is recorded at the net asset value based on the market prices of the underlying securities, being placed in Level 2.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 10. Fair Value Measurement (continued)

The following table sets forth a summary of changes in the fair value of the Level 3 assets of the SBD Pension Master Trust assets for the year ended December 31, 2013:

|                                          | <b>Year Ended<br/>December 31,<br/>2013</b> |
|------------------------------------------|---------------------------------------------|
| Balance, beginning of year *             | \$ 32,619,412                               |
| Purchases                                | 3,010,000                                   |
| Sales                                    | (5,261,594)                                 |
| Net realized and unrealized appreciation | 4,387,004                                   |
| Balance, end of year                     | <u>\$ 34,754,822</u>                        |

\*The beginning of year assets represents the Level 3 investments held under the BD Master Trust during 2012 which transferred into the SBD Pension Master Trust during 2013.

The SBD Pension Master Trust's investments include limited partnership interests, which had an aggregate fair value of \$34,754,822 at December 31, 2013. The fair value of these limited partnership interests is determined by the general partners based upon the SBD Pension Master Trust's pro rata ownership in the investments held by the partnerships. Investments in limited partnerships are recorded at market value using external pricing sources or, when such sources are not readily available or deemed inappropriate, at fair values determined in good faith by the general partners. The determination by the general partners of estimated fair values of certain illiquid investments includes, among other methods such as the use of external pricing models, obtaining valuation-related information from third-party investment firms and pricing services, and performing other research activities. Such determinations involve subjective judgment as the value of these limited partnership investments is generally ultimately determined by negotiation between parties in a sales transaction. The carrying value recorded in the financial statements of the SBD Pension Master Trust's investments in these limited partnership interests may differ materially from the amounts ultimately realized from these limited partnership interests and from the values that would have been reported in the financial statements had a ready market for these partnership interests existed.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the SBD Pension Master Trust believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 10. Fair Value Measurement (continued)

The following table summarizes the contractual amounts and fair values of the SBD Pension Master Trust's derivative financial instruments as of December 31, 2013:

|                      | <b>Contractual<br/>Amount</b> | <b>Fair Value</b> |
|----------------------|-------------------------------|-------------------|
| Futures contracts *: |                               |                   |
| Long (purchased)     | \$ 45,000,000                 | \$ (103,865)      |

All of the derivative contracts are short-term and mature within one year.

\*Contractual amount represents the notional value of the futures.

The following table summarizes the realized and unrealized gain (loss) associated with the SBD Pension Master Trust's derivative financial instruments during the year ended December 31, 2013. These amounts are included in net appreciation on the Statement of Changes in Net Assets Available for Benefits.

|                    | <b>Realized Gain<br/>(Loss)</b> | <b>Unrealized<br/>Appreciation<br/>(Depreciation)</b> | <b>Net Realized and<br/>Unrealized<br/>Depreciation</b> |
|--------------------|---------------------------------|-------------------------------------------------------|---------------------------------------------------------|
| Futures contracts: |                                 |                                                       |                                                         |
| Long (purchased)   | \$ (111,186)                    | \$ (136,335)                                          | \$ (247,521)                                            |

The SBD Pension Master Trust is exposed to credit-related losses in the event of nonperformance by counterparties to its futures contracts. The SBD Pension Master Trust, through its investment managers, monitors creditworthiness of the counterparties and presently does not expect default by any of the counterparties. The SBD Pension Master Trust does not obtain collateral in connection with its derivative financial instruments.

# Stanley Black & Decker Pension Plan

## Notes to Financial Statements (continued)

### 10. Fair Value Measurement (continued)

The following table summarizes the fair values within the fair value hierarchy of the Plan investments, which are measured on a recurring basis, for the investments of the BD Master Trust as of December 31, 2012.

| Fair value at December 31, 2012 |                       |                       |                      |                       |
|---------------------------------|-----------------------|-----------------------|----------------------|-----------------------|
|                                 | Level 1               | Level 2               | Level 3              | Total                 |
| Short-term investments          | \$ -                  | \$ 11,744,701         | \$ -                 | \$ 11,744,701         |
| Fixed income                    | 71,871,696            | 502,484,127           | -                    | 574,355,823           |
| Equity investments              | 69,227,219            | 217,059,338           | 32,619,412           | 318,905,969           |
|                                 | <u>\$ 141,098,915</u> | <u>\$ 731,288,166</u> | <u>\$ 32,619,412</u> | <u>\$ 905,006,493</u> |

At December 31, 2012, the BD Master Trust held approximately 63% of its assets in government and corporate debt securities with the remainder allocated among various equity investments as well as a small allocation to alternative investments. The debt securities were split between levels 1 and 2 based on their liquidity, with U.S. Treasury securities being assigned to Level 1 and corporate debt securities assigned to Level 2. The Trust's equity holdings were split between levels 1 and 2 based on the type of investment, with publically quoted equities held in a separately managed account placed in Level 1 and investments held in commingled funds and similar vehicles placed in Level 2.

The following table sets forth a summary of changes in the fair value of the Level 3 assets of the BD Master Trust for the year ended December 31, 2012:

|                                          | Year Ended<br>December 31,<br>2012 |
|------------------------------------------|------------------------------------|
| Balance, beginning of year               | \$ 30,853,955                      |
| Purchases                                | 4,807,500                          |
| Sales                                    | (2,100,487)                        |
| Net realized and unrealized depreciation | (941,556)                          |
| Balance, end of year                     | <u>\$ 32,619,412</u>               |

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 10. Fair Value Measurement (continued)

The BD Master Trust's investments included limited partnership interests, which had an aggregate fair value of \$32,619,412 at December 31, 2012. The fair value of these limited partnership interests is determined by the general partners based upon the BD Master Trust's pro rata ownership in the investments held by the partnerships. Investments in limited partnerships are recorded at market value using external pricing sources or, when such sources are not readily available or deemed inappropriate, at fair values determined in good faith by the general partners. The determination by the general partners of estimated fair values of certain illiquid investments includes, among other methods such as the use of external pricing models, obtaining valuation-related information from third-party investment firms and pricing services, and performing other research activities. Such determinations involve subjective judgment as the value of these limited partnership investments is generally ultimately determined by negotiation between parties in a sales transaction. The carrying value recorded in the financial statements of the BD Master Trust's investments in these limited partnership interests may differ materially from the amounts ultimately realized from these limited partnership interests and from the values that would have been reported in the financial statements had a ready market for these partnership interests existed.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the BD Master Trust believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table summarizes the contractual amounts and fair values of the BD Master Trust's derivative financial instruments as of December 31, 2012:

|                      | <b>Contractual<br/>Amount</b> | <b>Fair Value</b> |
|----------------------|-------------------------------|-------------------|
| Futures contracts *: |                               |                   |
| Long (purchased)     | \$ 24,500,000                 | \$ 32,470         |
| Short (written)      | -                             | -                 |

All of the derivative contracts were short-term and matured within one year.

\*Contractual amount represents the notional value of the futures.

## Stanley Black & Decker Pension Plan

### Notes to Financial Statements (continued)

#### 10. Fair Value Measurement (continued)

The following table summarizes the realized and unrealized gain (loss) associated with the BD Master Trust's derivative financial instruments during the year ended December 31, 2012. These amounts are included in net realized and unrealized appreciation in fair value of investments in the Statement of Changes in Net Assets Available for Benefits.

|                    | <u>Realized Gain</u> | <u>Unrealized<br/>Appreciation</u> | <u>Net Realized and<br/>Unrealized<br/>Appreciation</u> |
|--------------------|----------------------|------------------------------------|---------------------------------------------------------|
| Futures contracts: |                      |                                    |                                                         |
| Long (purchased)   | \$ -                 | \$ 8,865                           | \$ 8,865                                                |
| Short (written)    | 134,789              | -                                  | 134,789                                                 |

The BD Master Trust was exposed to credit-related losses in the event of nonperformance by counterparties to its futures contracts. The BD Master Trust, through its investment managers, monitored creditworthiness of the counterparties and presently does not expect default by any of the counterparties. The BD Master Trust did not obtain collateral in connection with its derivative financial instruments.

The portion of the Merged Plans' investments pertaining to the Lista Plan, which are measured on a recurring basis, for the Lista Plan as of December 31, 2012 were \$9,929,594 of investments in money market funds classified as Level 1 within the fair value hierarchy.

#### 11. Subsequent Events

The Plan has evaluated events occurring between December 31, 2013 and September 30, 2014, the date the financial statements were available to be issued.

Effective January 10, 2014, the Plan was made whole for the remaining Overpayments (Note 1) in the amount of \$165,000, which included the principal amount of the Overpayments, as adjusted for earnings at the Plan's earnings rate.

## **SCHEDULE SB ATTACHMENTS**

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

#### **Effective Date and Most Recent Amendment**

The plan was amended and restated January 1, 2007. Most recently amended effective December 31, 2012.

#### **Eligibility**

One year of eligible service is required for participation. All participants under a prior plan before January 1, 1992 are automatically included. Participation closed to new employees hired on or after January 1, 2007.

#### **Normal Retirement**

- |    |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. | Eligibility       | Age 65.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| b. | Benefit           | <p>1.0% of Final Average Pay (base percentage) plus 0.425% of Final Average Pay in excess of Covered Compensation (excess percentage), times Benefit Service Credit after December 31, 1991. Service for the excess formula is limited to 35 years, including service under the Prior Plan.</p> <p>plus</p> <p>The benefit calculated under the Prior Plan, as of December 31, 1991 multiplied by Final Average Pay at date of termination divided by Final Average Pay at December 31, 1991, not less than one.</p> |
| c. | Commencement Date | Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.                                                                                                                                                                                                                                                                                                                                                                                     |

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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- d. Form of Payment For a single participant the normal form of payment is a monthly pension ceasing at the retired participant's death. For a married participant the normal form of payment is a reduced monthly pension which allows for a continuation of payments equal to one-half of the reduced pension to the surviving spouse after the participant's death. Any participant may elect, by written application, to receive the normal benefit or other optional forms of benefit payment. Optional forms of payment include: life annuity, 50%, 66-2/3%, 75% and 100% joint and survivor annuities, 5-year or 10-year certain and continuous annuity, and Level Income Annuity (with Social Security). If the present value of Accrued Pension is less than or equal to \$1,000, a cash-out payment will be made.

### Early Retirement

- a. Eligibility Age 55 and five years of Vesting Service Credit. Age 55 for employees covered under a prior plan whose early retirement eligibility was age 55 without regard to service.
- b. Benefit Normal Retirement benefit decreased by 1/4% per month for the first 60 months and by 1/3% per month for the next 60 months that commencement precedes age 65.
- For employees meeting the Rule of 90 requirement (age plus Vesting Service Credit equal or exceed 90), no reduction for retirement between ages 62 and 65. Accrued Pension decreased by 1/4% per month for the first 24 months and by 1/3% per month for the next 60 months that commencement precedes age 62.
- c. Commencement Date Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.
- d. Form of Payment Same as for normal retirement.

### Disability Retirement

- a. Eligibility Disability while in employment and before age 65.
- b. Benefit The member may elect to begin receiving any Termination Benefit or Early Retirement Benefit for which he or she may qualify.
- c. Commencement Date Payments commence as soon as practicable following the approval of the application for benefits.
- d. Form of Payment Same as for normal retirement.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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### Death Prior to Retirement

- |                      |                                                                                                                                                                                                                                                                                                         |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | On the death of an active, married participant who has completed at least five years of service or a vested terminated married participant.                                                                                                                                                             |
| b. Benefit           | Return of Prior Plan accumulated contributions (if applicable) with credited interest. The spouse will receive a monthly annuity based on the Joint and 50% Survivor Annuity Option.                                                                                                                    |
| c. Commencement Date | The benefit will commence:<br>If the participant had not attained age 55 at death, on the date he would have attained 55 had he lived, or If the participant was eligible for Early Retirement, immediately. The spouse may elect to defer commencement up to the participant's normal retirement date. |
| d. Form of Payment   | The surviving spouse's benefit is paid monthly for the life of the surviving spouse.                                                                                                                                                                                                                    |

### Death After Retirement

- |                      |                                                                                                                            |
|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| a. Benefit           | The beneficiary will be paid in accordance with the form of retirement payment selected by the participant at retirement.  |
| b. Commencement Date | Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs. |

### Termination of Employment

- |                      |                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | 100% vested with five or more years of Vesting Service Credit, or at age 65, regardless of service.                                                                                                                                                                                                                                                                      |
| b. Benefit           | Accrued pension based on Benefit Service Credit to termination date. Benefit is payable starting at age 65. Benefits may commence as early as age 55 decreased by 3/4% per month for the first 48 months and 5/12% per month in excess of 48 months prior to age 65. An employee's vested benefit in the Plan cannot be less than his vested benefit under a Prior Plan. |
| c. Commencement Date | Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date, or the participant may elect to have payments commence as early as the first day of the month coinciding with or next following his attainment of age 55, in an amount reduced for early commencement.                                           |
| d. Form of Payment   | The forms of payment available are the same as for normal retirement.                                                                                                                                                                                                                                                                                                    |

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## **SCHEDULE SB ATTACHMENTS**

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### **Change in Plan Provisions Since Last Actuarial Valuation**

- Effective December 31, 2012, the plan name changed from The Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National, Porter Cable, Price Pfister, Sargent and Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- As a result of a bulk lump sum offering, there was a settlement charge of \$11,058,613 in December 2012 due to the lump sums paid for The Black & Decker Pension Plan and the Porter Cable pension plan.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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### Hartford Division Emhart

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**Effective Date** The plan was amended and restated effective January 1, 2007. Most recently amended effective December 31, 2012. Initially effective January 1, 1965.

**Eligibility Requirements** Covered employees are eligible immediately.

#### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit 0.75% of Average Compensation multiplied by Years of Benefit Service plus 0.75% of Average Compensation in excess of \$6,000 multiplied by Years of Benefit Service.
- c. Commencement Date Payments commence on the first day of the month coincident with or following the participant's normal or actual retirement date.
- d. Form of Payment
  - Normal Single Life Annuity for unmarried participants, 50% Joint and Survivor Annuity for married participants.
  - Optional Single Life Annuity, 50%, 75%, and 100% Joint and Survivor Annuities. If the present value of the accrued benefit is less than or equal to \$1,000, a cash-out payment will be made.

#### Early Retirement

- a. Eligibility Age 55 and ten years of Service.
- b. Benefit Actuarial equivalent of accrued normal retirement pension as of early retirement date or date benefit is to commence, if later.

#### Disability Retirement

- a. Eligibility Total and permanent in the opinion of a qualified physician. In addition, participant must be eligible to receive Social Security benefits.
- b. Benefit Participant election of (1) or (2):
  - (1) A benefit equal to Accrued Benefit deferred to Normal Retirement Date or
  - (2) Actuarial Equivalent of accrued benefit computed at the date of disability payable immediately.

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### **Late Retirement**

- a. Eligibility                      No maximum age after age 65.
- b. Benefit                        Greater of:
  - (1) Accrued Benefit on Late Retirement Date or
  - (2) Accrued Benefit on Normal Retirement Date actuarially increased

### **Vesting**

- a. Eligibility                      Five years of Service.
- b. Benefit                        Starting at age 65, a pension calculated as for normal retirement, based on Benefit Service to date of termination.

### **Death Benefit After Retirement**

- a. Eligibility                      Qualified married participant with vested accrued benefit.
- b. Benefit                        The beneficiary will be paid in accordance with the form of retirement payment selected by the participant at retirement.
- c. Commencement                Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs.

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## **SCHEDULE SB ATTACHMENTS**

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### **Death Benefit Before Retirement**

- |    |              |                                                                                                                                                                                                                                                                                                                                 |
|----|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. | Eligibility  | Five years of Service.                                                                                                                                                                                                                                                                                                          |
| b. | Benefit      | The spouse will receive a monthly annuity based on the 50% Joint and Survivor annuity option.                                                                                                                                                                                                                                   |
| c. | Commencement | If the spouse elects to receive benefits early, payments will be made no later than the participant's Earliest Retirement age (if the participant dies prior to Earliest Retirement age). Otherwise, payments will commence at the time the participant would have attained the earlier of his Normal Retirement age or age 62. |

### **Change in Plan Provisions Since Last Actuarial Valuation**

- Effective December 31, 2012, the plan name changed from The Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National, Porter Cable, Price Pfister, Sargent and Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- As a result of a bulk lump sum offering, there was a settlement charge of \$11,058,613 in December 2012 due to the lump sums paid for The Black & Decker Pension Plan and the Porter Cable pension plan.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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### Former Hartford Participants

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#### Effective Date

- a. Original September 1, 1958. The plan was amended and restated January 1, 2007. Most recently amended effective December 31, 2012.
- b. Eligibility Covered employees are eligible immediately.

#### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The appropriate amount shown below multiplied by years of Credited Service:

| Date of Retirement       | Monthly Benefit<br>Accrual Rate |
|--------------------------|---------------------------------|
| Prior to 09/03/1979      | \$10.00                         |
| 09/13/1979 to 09/12/1980 | \$11.00                         |
| 09/13/1980 to 09/12/1981 | \$12.00                         |
| 09/12/1981 to 07/06/1986 | \$12.50                         |
| 07/07/1986 to 07/06/1987 | \$13.50                         |
| 07/07/1987 to 07/06/1989 | \$14.00                         |
| 07/07/1989 to 07/06/1990 | \$15.00                         |
| 07/07/1990 to 07/06/1991 | \$15.50                         |
| 07/07/1991 to 07/06/1992 | \$16.00                         |
| 07/07/1992 to 07/06/1994 | \$17.50                         |
| 07/07/1994 to 07/06/1995 | \$18.00                         |
| 07/07/1995 to 07/06/1996 | \$18.50                         |
| 07/07/1996 to 07/06/1997 | \$19.00                         |
| 07/07/1997 to 07/06/1998 | \$19.50                         |
| 07/07/1998 to 06/15/1999 | \$20.50                         |
| 06/16/1999 and after     | \$22.50                         |

NOTE: Credited Service for active employees, on the sale date, with service between 3 and 5 years as of December 31, 1999 was set equal to 5.

- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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d. Form of Payment

- Normal Life Annuity for unmarried employees, 50% Contingent Annuitant for married employees.
- Optional Single Life Annuity, 50% and 75% Contingent Annuitant option; Social Security option; Life Annuity option, lump sum.

### Early Retirement

- a. Eligibility Age 55 and ten years of Continuous Service.
- b. Benefit

Accrued normal retirement pension as of early retirement date commencing at age 62 or reduced if commencing before age 62 by  $\frac{1}{3}$  of 1% for each month that the benefit commences before age 62.

Note: Active employees, between June 16, 1999 and December 31, 1999, were eligible for early retirement if they were age 54 with ten or more years of continuous service as of December 31, 1999. Benefits were unreduced for employees age 59 with ten or more years of continuous service.

### Disability Retirement

- a. Eligibility Ten years of Continuous Employment.
- b. Benefit

If not eligible to receive a social security disability benefit, twice the normal retirement benefit accrued to date of disability is payable to age 65. After age 65, normal retirement benefit accrued to date of disability is payable. If eligible to receive a social security disability benefit the normal retirement benefit accrued to date of disability is payable.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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### Vesting

- a. Eligibility Five years of Continuous Service.
- b. Benefit Starting at age 65, a pension calculated as for normal retirement, based on Credited Service to date of termination. If a former employee had ten years of Continuous Service, a reduced benefit is payable commencing between ages 55 and 65. The following schedule shows, for each whole age, the vested early retirement factors used in calculating the benefit:

| <u>Vested Early Retirement Factors</u> |               |            |               |
|----------------------------------------|---------------|------------|---------------|
| <u>Age</u>                             | <u>Factor</u> | <u>Age</u> | <u>Factor</u> |
| 55                                     | .387693       | 60         | .605340       |
| 56                                     | .422296       | 61         | .665827       |
| 57                                     | .460762       | 62         | .734114       |
| 58                                     | .503640       | 63         | .811485       |
| 59                                     | .551578       | 64         | .899490       |

### Preretirement Surviving Spouse's Benefit

- a. Eligibility Five years of Continuous Service and prior to commencement of retirement benefits. During the periods where a reduction in benefit charge is assessed for such coverage, employee can reject coverage but requires spouse's consent.
- b. Benefit For a vested active employee or former employee who dies after attaining age 55, the benefit is calculated as if the employee had retired on the first of the month in which he died with the automatic form of benefit in effect. For such employee who dies prior to attaining age 55, the benefit commences when the deceased employee would have attained age 55 and is calculated as if the employee had terminated employment on his date of death and commenced receiving a reduced deferred vested benefit at age 55 with the automatic form of benefit in effect. For employees who terminated prior to January 1, 1992, Benefits of employees and their surviving spouses are reduced to reflect the cost of the coverage during the period it is in effect, except that there is no charge while the employee is in active service after age 55 or during the deferral period after an employee retires early and defers commencement of his benefit.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Change in Plan Provisions Since Last Actuarial Valuation**

- Effective December 31, 2012, the plan name changed from the Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totalling \$125,990,245.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Best Lock**

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#### **Effective date and most recent amendment**

The plan was originally effective September 1, 1989. The plan was amended and restated January 1, 2011. Most recently amended effective December 31, 2012. The Best Lock plan merged into the Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### **Plan year**

The twelve-month period ending December 31.

#### **Eligibility**

Employees include persons actively employed by the Company on September 1, 1989 who completed at least one hour of service before September 1, 1989 or persons on an authorized leave of absence on September 1, 1989 or totally disabled on September 1, 1989. Employees are eligible to participate in the plan at the later of the attainment of age twenty-one, completion of one year of service, or September 1, 1989.

#### **Normal retirement benefit**

Eligibility: A participant is eligible for normal retirement on his 65th birthday.

Benefit Formula: The normal retirement benefit for a participant is the product of:

- (i) 1% of participant's base pay
- (ii) The greater of:
  - (a) 2
  - (b) Elapsed time from date of hire to August 31, 1989, measured in years and complete months.

Commencement Date: The first day of the month immediately following the date the participant reaches age 65.

Normal Form of Benefit:

Single employees – Life annuity

Married employees – Unreduced 50% joint and survivor annuity and 75% joint and survivor.

Optional forms of payment are determined using UP-84 mortality table and 8% interest.

Joint and 75% survivor option is available, determined using the mortality table in Revenue Ruling 2001-62 and 5% interest and is actuarially equivalent to the Life Annuity.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Late retirement**

Payment of normal retirement benefits may be deferred beyond the normal retirement date, provided that the participant completes 40 hours of service per month.

### **Early retirement benefit**

Eligibility: After attaining age 55 and 5 more or years of service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit, reduced by 5/12 of 1% for each full calendar month by which benefit commencement precedes the normal retirement date.

Form of payment: Same as for normal retirement.

### **Disability benefit**

None.

### **Vested benefits upon termination of service**

Eligibility: A participant whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit.

Termination Benefit: The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Vested benefits are payable as early as age 55, if the participant had five years of service at termination. Benefits payable prior to normal retirement date are reduced as for early retirement.

Form of payment: Same as for retirement.

### **Death benefits for participants not receiving benefits**

If a vested participant dies after becoming eligible for early retirement, a benefit equal to half of the participant's early retirement benefit is payable to the surviving spouse.

If an active vested participant dies prior to becoming eligible for early retirement, the above benefit is deferred to the date the participant would have become eligible for early retirement.

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## **SCHEDULE SB ATTACHMENTS**

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### **Pension increases**

Not applicable.

### **Plan participants' contributions**

Not applicable.

### **Maximum on benefits and pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future plan changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

### **Change in Plan Provisions Since Last Actuarial Valuation**

- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Lista**

#### **Effective date and most recent amendment**

The plan was originally effective January 1, 1979 and the plan was restated January 1, 2011. Most recently amended effective December 31, 2012. The Lista plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### **Plan year**

The twelve-month period ending December 31.

#### **Eligibility**

Employees are eligible to participate in the plan upon completion of one year of service, defined as a 12-consecutive-month computation period in which an employee is credited with 1,000 or more hours of service. Computation period commences on employee's date of hire.

Participation in the plan is frozen as of August 1, 2004.

#### **Average Annual Earnings**

Average Annual Earnings means the average of the participant's W-2 earnings during the highest five consecutive Plan Years during the participant's career.

#### **Final Average Compensation**

Final average compensation is the average of the participant's W-2 earnings over the consecutive three year period ending on December 31 of the Plan Year coinciding with or immediately preceding the participant's termination of employment. Final Average Compensation shall not exceed Covered Compensation as defined under Section 401(I)(5)(E) of the Internal Revenue Code and earnings shall not exceed the Taxable Wage Base in any year.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Normal Retirement Benefit**

Eligibility: A participant is eligible for normal retirement on the first day of the month coinciding with the later of:

- (a) the participant's 65<sup>th</sup> birthday.
- (b) the earlier of either the fifth anniversary of Participation date or the completion of five years of Credited Service

Benefit Formula: The normal retirement benefit for a participant is 1.5% of Average Annual Earnings minus the lesser of:

- (a) 0.65% of Final Average Compensation
- (b) 0.75% of Average Annual Earnings, limited to Final Average Compensation, multiplied by years and months of credited service, to a maximum of 30 years.

Benefits are now frozen for all groups effective August 1, 2004.

Commencement Date: Participants whose employment has terminated shall have distribution of their benefits commence within sixty (60) days following their Normal Retirement Date, unless the Participants elects to defer receipt of his benefits.

The normal form of benefit is a life annuity. Actuarially equivalent optional forms are based upon the UP-84 mortality with a 3-year setback for beneficiaries at 7% interest.

Forms of payment:

Single employees – Life annuity, 10 years certain and life

Married employees – Life annuity, 50%, 66 <sup>2</sup>/<sub>3</sub>%, 75% and 100% joint and survivor annuity, and 10 years certain and life

Lump sums are available for amounts \$5,000 or less

### **Late Retirement**

A Late Retirement Benefit equal to greater of the Accrued Benefit determined at actual retirement date and the benefit available at the participant's Normal Retirement Date actuarially increased to actual retirement date is available for participants who continue employment after their Normal Retirement Date.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Early Retirement Benefit**

Eligibility: After attaining age 55 and 5 years of Credited Service an employee is eligible for Early Retirement.

Benefit: The Early Retirement benefit is equal to the Accrued Benefit, reduced actuarially for payment prior to Normal Retirement Date.

Forms of payment: Same as for normal retirement.

### **Disability Benefit**

Not Applicable

### **Vested Benefits Upon Termination of Service**

Eligibility: A participant whose employment is terminated before retirement is eligible for a vested deferred retirement benefit, provided the participant has at least 5 years of credited service.  
Termination Benefit: The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Benefits payable prior to normal retirement date are reduced as for early retirement.

Forms of payment: Same as for normal retirement.

### **Death Benefits for Participants Not Receiving Benefits**

If a vested participant dies after becoming eligible for early retirement or a deferred vested benefit, the surviving spouse is entitled to an amount equal to the benefit the participant would have received had they terminated employment on the date of death and elected to receive benefits as a 50% Joint and Survivor annuity option. Monthly payments commence as of the later of the participant's date of death or age 55.

### **Pension Increases**

Not Applicable.

### **Plan Participants' Contributions**

Not Applicable.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions except as follows Towers Watson is not aware of any future plan changes which are required to be reflected.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **National Manufacturing**

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#### **Effective date and most recent amendment**

Original: July 1, 1957

Most Recent Amendment: The plan was amended December 31, 2012. The National Manufacturing plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### **Eligibility**

Each participant who was in the plan prior to December 31, 1983 is eligible. Other employees become eligible to participate in the plan at the later of the attainment of age twenty-one and completion of one year of service with at least 1,000 hours of service with the Company.

No employee shall become a member under the plan after December 31, 2006.

#### **Normal retirement**

Eligibility: A participant is eligible for normal retirement after attaining age 65 or 5 years of Credited Service.

Regular Benefit: The monthly normal retirement benefit for Regular employees is the sum of:

- (i) 0.825% of Final Average Earnings up to \$12,000 (annual earnings) multiplied by years of Benefit Service
- (ii) 1.5% of Final Average Earnings in excess of \$12,000 (annual earnings) multiplied by years of Benefit Service

Sales Benefit: The monthly normal retirement benefit for salesmen is 0.5% of Final Average Earnings multiplied by years of Benefit Service. Earnings in excess of \$50,000 are not recognized.

For both groups, benefit accruals ceased on December 31, 2006.

Commencement date: The first day of the month immediately coinciding with or following the participant's normal retirement date.

#### **Form of payment**

Single employees – Life annuity

Married employees – 50%, 66-2/3%, 75% and 100% joint and survivor annuities.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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The normal form of payment is a life annuity. Actuarially equivalent optional forms are based upon the 1971 Group Annuity Mortality table for males and 7% interest.

### **Deferred retirement**

Payment of monthly retirement benefits may be deferred beyond the normal retirement date if a participant continues in the active employ of the Company beyond normal retirement date. The monthly deferred retirement benefit is calculated in the same manner as the normal retirement benefit, based on Final Average Earnings and benefit service as of the deferred retirement date.

### **Early retirement**

Eligibility: After attaining age 55 and 10 or more years of Credited Service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit actuarially reduced for each month by which benefit commencement precedes the normal retirement date.

Form of payment: Same as for normal retirement.

### **Disability benefit**

Eligibility: After attaining 10 or more years of Credited Service and entitled to disability payments under the Social Security Act or a Company sponsored disability program.

Benefit: The monthly benefit is determined in the same manner as the normal retirement benefit using Final Average Earnings and benefit service as of the disability date.

### **Termination of employment**

Eligibility: A participant with at least 5 years of Credited Service whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit.

Benefit: The participant's accrued benefit as of the termination date under the normal retirement benefit formula is provided.

Commencement date: Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Vested benefits are payable as early as age 55, if the participant had 10 years of service at termination. Benefits payable prior to normal retirement date are reduced in the same manner as early retirement.

Form of payment: Same as for normal retirement.

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## SCHEDULE SB ATTACHMENTS

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### Pre-retirement death benefits

#### Eligibility:

A participant's spouse will be entitled to a spouse's benefit in the event of the participant's death, if the following conditions are met as of the participant's date of death:

- (1) The participant was employed by the Company
- (2i) The participant completed 10 or more years of Credited Service  
or
- (2ii) 5 years of Credited Service.
- (3) The participant had been married to the same spouse for the one-year period ending on his date of death

#### Benefit:

- (i) If the participant meets eligibility requirement (2i), the monthly benefit payable to the spouse is 50% of the participant's accrued benefit determined as if the participant had attained his Normal Retirement Date and retired on the first day of the month following the month in which his death occurred.

If the surviving spouse was more than ten years younger than the participant, the amount of monthly retirement income is reduced to be the Actuarial Equivalent of the monthly benefit that would have been payable to the spouse if the spouse had been exactly ten years younger than the participant.

If the present value of the monthly retirement income payable to the spouse is greater than 100 times the monthly retirement income the participant would have received (under the normal form) at his Normal Retirement Date, had he continued to work until such date, the spouse's monthly retirement income will be reduced by the ratio of:

- (1) 100 times the monthly retirement income in the normal form which would have been payable to the participant at his Normal Retirement Date to
  - (2) the present value of the monthly retirement income otherwise payable to the spouse.
- (ii) If the participant meets eligibility requirement (2ii), the spouse is entitled to a benefit equal to the benefit that would have been payable to the spouse if the Participant had elected to receive his benefits in the 50% joint and survivor form.

#### Commencement date:

- (i) If the participant meets eligibility requirement (2i), the spouse's benefit is payable on the first of the month following the participant's death. A later commencement date can be selected provided that such date will not be later than the date the participant would have reached his Earliest Retirement Age.
- (ii) If the participant meets eligibility requirement (2ii) then the spouse's benefit is payable on the date on which the participant would have reached his Earliest Retirement Age.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Death After Retirement**

Benefit: A lump sum payment of \$1,000, less proceeds under any group life insurance program financed by the company, is payable to the designated beneficiary or estate.

In addition, the spouse will continue to get any death benefit payable in accordance with the terms of the form of benefit payments elected by the participant.

Commencement date: Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

The sale of the HHI division occurred in December 2012.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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### Porter Cable

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#### Effective Date and Most Recent Amendment

The plan was originally effective January 1, 1970. Amended and restated effective January 1, 2007. Most recently amended effective December 31, 2012. The Porter Cable plan merged into the Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### Eligibility

All covered employees are eligible immediately. Participation closed to new employees hired on or after January 1, 2007. Benefit accruals were frozen effective December 31, 2010.

#### Normal Retirement

- a. Eligibility Later of Age 65 and the fifth anniversary of participation.
- b. Benefit

| Date of Termination      | Monthly Benefit Accrual Rate |
|--------------------------|------------------------------|
| 12/01/1984 to 12/31/1986 | \$9.00                       |
| 01/01/1987 to 12/31/1988 | \$10.00                      |
| 01/01/1988 to 01/31/1990 | \$11.00                      |
| 02/01/1990 to 12/31/1991 | \$12.00                      |
| 01/01/1991 to 01/31/1992 | \$13.00                      |
| 02/01/1992 to 01/31/1994 | \$14.00                      |
| 02/01/1994 to 01/31/1995 | \$15.00                      |
| 02/01/1995 to 12/31/1996 | \$16.00                      |
| 01/01/1997 to 01/31/2002 | \$17.00                      |
| On or after 02/01/2002   | \$18.00                      |

Monthly unit from above times years of Credited Service. For the period 12/1/1984 to 12/31/1995, a 30-year cap on Credited Service applies.

- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.
- d. Form of Payment
- Normal: Single Life Annuity for unmarried participants, 50% Joint and Survivor Annuity for married participants.
  - Optional: Single Life Annuity. 50%, 75%, and 100% Joint and Survivor Annuity.
  - Lump Sum: A participant whose Actuarial Equivalent lump sum is \$1,000 or less shall receive an automatic lump sum

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### Early Retirement

- |                      |                                                                                                                                                                                     |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Age 55 and ten years of Vesting Service.                                                                                                                                            |
| b. Benefit           | Accrued normal retirement pension reduced by 1/2% per month for the first 60 months and by 1/3% per month for the next 60 months that commencement precedes normal retirement date. |
| c. Commencement Date | Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.                                     |
| d. Form of Payment   | Same as for normal retirement.                                                                                                                                                      |

### Death Prior to Retirement

- |                      |                                                                                                                                                                                                                                              |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Five years of Vesting Service and at least one year of marriage.                                                                                                                                                                             |
| b. Benefit           | Pension is equal to what the spouse would have received had the employee terminated at date of death, survived to earliest retirement age, and retired on his early retirement date with the 50% Joint and Survivor Annuity form of payment. |
| c. Commencement Date | Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.                                                                                                                       |
| d. Form of Payment   | The surviving spouse's benefit is paid monthly for the life of the surviving spouse.                                                                                                                                                         |

|                 |                                     |
|-----------------|-------------------------------------|
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## **SCHEDULE SB ATTACHMENTS**

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### **Termination of Employment**

- |                      |                                                                                                                                                                                                                                                                                                                                     |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Five years of Vesting Service, or Age 55 regardless of service.                                                                                                                                                                                                                                                                     |
| b. Benefit           | Starting at age 65, a pension calculated as for normal retirement, based on Credited Service to date of termination. Participants with 10 years or more of Vesting Service at termination may commence benefits under the same provisions as Early Retirement.                                                                      |
| c. Commencement Date | Payments commence on the first day of the month coinciding with, or next following the participant's normal retirement date, or the participant may elect to have payments commence as early as the first day of the month coinciding with or next following his attainment of age 55, in an amount reduced for early commencement. |
| d. Form of Payment   | Same as for normal retirement.                                                                                                                                                                                                                                                                                                      |

### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Change**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totaling \$125,990,245.

|                 |                                     |
|-----------------|-------------------------------------|
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| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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### Price Pfister

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#### Effective Date and Most Recent Amendment

Amended and restated effective January 1, 2007, initially effective June 27, 1983. Most recently amended effective December 31, 2012. The Price Pfister plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### Eligibility

Covered employees are eligible immediately. There are no longer any active participants.

#### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The monthly benefit is equal to:
  - 1. For members of the International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America.

| Year of Benefit Service                                                                                                                                                 | Monthly Retirement Benefit for Each Year of Benefit Service |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Prior to 04/01/1982                                                                                                                                                     | \$10.00                                                     |
| 04/01/1982 to 03/31/1983                                                                                                                                                | \$11.00                                                     |
| 04/01/1983 to 06/26/1983                                                                                                                                                | \$12.00                                                     |
| 06/27/1983 to 10/31/1990                                                                                                                                                | \$15.00                                                     |
| November 1, 1990 and<br>Thereafter; other than<br>Employees who are laid<br>Off as a result of the<br>Closing of the Employer's<br>Pacoima, California plant            | \$20.00                                                     |
| November 1, 1990 and<br>Thereafter for Employees<br>Laid off as a result of the<br>Closing of the Employer's<br>Pacoima, California plant,<br>And who retire thereafter | \$21.00                                                     |

where only the most recent 35 years of Benefit Service Credit are counted.

|                 |                                     |
|-----------------|-------------------------------------|
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or

2. For member in Package and General Utility Drivers Local 396

| Year of Benefit Service   | Monthly Retirement Benefit for Each Year of Benefit Service |
|---------------------------|-------------------------------------------------------------|
| 04/03/1978 to 04/30/1981  | \$7.50                                                      |
| 05/01/1981 to 04/03/1990  | \$10.00                                                     |
| 04/04/1990 to 04/03/1991  | \$11.00                                                     |
| 04/04/1991 to 04/03/1992  | \$12.00                                                     |
| 04/04/1992 and thereafter | \$13.00                                                     |

where only the most recent 30 years of Benefit Service Credit are counted.

less

3. Benefit attributable to service with Norris Industries, Inc.

- c. Commencement Date

Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.

- d. Form of Payment

Single Life Annuity and 50% and 75% Joint and Survivor Annuity.

A participant whose present value of benefits is \$1,000 or less will receive an automatic cash out.

### Early Retirement

- a. Eligibility

Age 60 and ten years of Vesting Service Credit.

- b. Benefit

Accrued normal benefit based on years of service at termination date. Benefits payable either at normal retirement date or if earlier, the benefit is reduced by 4/10% for each month that payments begin prior to normal retirement date.

- c. Commencement Date

Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.

- d. Form of Payment

Same as for normal retirement.

### Disability Retirement

- a. Eligibility

Age 50 with 15 years of Vesting Service Credit and eligible for Social Security disability benefits.

- b. Benefit

Accrued benefit at disability without any reduction for early payment.

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## SCHEDULE SB ATTACHMENTS

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- c. Commencement Date                      Payments commence as soon as practicable following the approval of the application for benefits.
- d. Form of Payment                      Same as for normal retirement.

### Death Prior to Retirement

- a. Eligibility                      Age 65 or five Years of Vesting Service Credit.
- b. Benefit                      One half of benefit that would have been payable to the member if he had retired or terminated immediately prior to death with payment in the form of a Spouse's Joint and 50% Survivor annuity.
- c. Commencement Date                      Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.
- d. Form of Payment                      The surviving spouse's benefit is paid monthly for the life of the surviving spouse.

### Maximum on Benefits and Pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

### Change in Plan Provisions Since Last Actuarial Valuation

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## **SCHEDULE SB ATTACHMENTS**

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### **Sargent & Greenleaf**

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#### **Effective Date and Most Recent Amendment**

The plan was originally effective December 28, 1961. The plan was amended and restated January 1, 2011. Most recently amended effective December 31, 2012. The Sargent & Greenleaf plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### **Plan Year**

The twelve-month period ending December 31.

#### **Eligibility**

Employees are eligible to participate in the plan at the attainment of age twenty-one. This includes employees who are members of a unit covered by a collective bargaining agreement. Participation in the plan is frozen.

#### **Final Average Compensation**

Plan compensation is base pay. Average compensation is the highest average compensation over a consecutive five year period.

#### **Normal Retirement Benefit**

Eligibility: A participant is eligible for normal retirement on the first day of the month following his 65th birthday.

Benefit Formula: The normal retirement benefit for a participant is the greater of:

- (i) 50% of Average Annual Earnings minus 50% of Primary Social Security Benefit – reduced one-fifteenth for each year of Credited Service less than 15 years. Certain employees have maximum Social Security offset provision in accordance with Code Section 401(l) and certain location groups have additional benefit of \$3/month for each year of Credited Service.
- (ii) Pension Trust Benefit
- (iii) \$600; reduced one-fifteenth for each year of Credited Service less than 15 years.

|                 |                                     |
|-----------------|-------------------------------------|
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Benefits are now frozen for all groups.

Commencement Date: The first day of the month immediately following the date the participant reaches age 65.

The normal form of benefit is a life annuity. Actuarially equivalent optional forms are based upon 1994 Uninsured Pensioner Mortality Table and 5% interest.

Optional forms of payment:

Single employees – Life annuity, 10 years certain and life

Married employees – Life annuity, 50% and 75% joint and survivor annuity, and 10 years certain and life

Lump sums are available for employees of Safemasters grandfathered group.

### **Late Retirement**

Payment of normal retirement benefits may be deferred beyond the normal retirement date up to five years. The late retirement benefit is the same as the normal retirement benefit taking into account Credited Service and Average Annual Earnings up to the late retirement date.

### **Early Retirement Benefit**

Eligibility: After attaining age 55 and 10 more or years of service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit, reduced by 5/9 of 1% for each full calendar month for the first 60 months and 5/18 of 1% for each additional month by which the early retirement date precedes the normal retirement date.

Forms of payment: Same as for normal retirement.

### **Disability Benefit**

Eligibility: Totally and permanently disabled for at least 6 months prior to severance from employment. Also the participant is not covered by the employer's LTD plan.

Benefit: The monthly benefit is determined in the same manner as the normal retirement benefit. The benefit is unreduced for early commencement and payable upon eligibility.

|                 |                                     |
|-----------------|-------------------------------------|
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### **Vested Benefits Upon Termination of Service**

**Eligibility:** A participant whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit, provided the participant has at least 5 years (4 years for Safemasters) of credited service.

**Termination Benefit:** The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Benefits payable prior to normal retirement date are reduced as for early retirement.

**Forms of payment:** Same as for normal retirement.

### **Death Benefits for Participants Not Receiving Benefits**

If a vested participant dies after becoming eligible for early retirement, a benefit equal to half of the participant's early retirement benefit under the 50% Joint and Survivor annuity option is payable to the surviving spouse.

If an active vested participant dies prior to becoming eligible for early retirement, the above benefit is deferred to the date the participant would have become eligible for early retirement.

### **Pension Increases**

Not Applicable.

### **Plan Participants' Contributions**

Not Applicable.

### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

Towers Watson is not aware of any future plan changes which are required to be reflected.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## **SCHEDULE SB ATTACHMENTS**

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### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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### True Temper

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#### Effective Date and Most Recent Amendment

Amended and restated August 1, 2007. The plan was most recently amended effective December 31, 2012. The True Temper plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### Eligibility

Covered employees are eligible immediately. There are no longer any active employees covered under this plan.

#### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The Benefit Rate shown below multiplied by years of Continuous Service.
- | Date of Retirement       | Monthly Benefit Accrual Rate |
|--------------------------|------------------------------|
| Prior to 07/01/1987      | \$15.00                      |
| 07/01/1987 to 06/30/1988 | \$16.00                      |
| 07/01/1988 to 06/30/1989 | \$17.00                      |
| 07/01/1989 to 06/30/1990 | \$18.00                      |
| 07/01/1990 to 06/30/1991 | \$20.00                      |
| 07/01/1991 and after     | \$22.00                      |
- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.
- d. Form of Payment Single Life Annuity, 50%, 75%, and 100% Joint and Survivor Annuities.
- A participant whose present value of benefits is \$1,000 or less will receive an automatic cash out.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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### Early Retirement

- a. Eligibility                      Age 62 and 15 years of Continuous Service.
- Less than age 62 with 30 or more years of Continuous Service.
- Age 50, 15 years of Continuous Service and Age Plus Continuous Service equals 70 or more, or 15 years of Continuous Service and age plus Continuous Service equals 80 or more and Continuous Service is broken by reason of plant shutdown, layoff or disabilities.
- At least 15 years but less than 30 years of Continuous Service and age 60.
- b. Benefit                        Accrued pension payable at age 62 or reduced by 1/2 of 1% for each month that commencement precedes age 62. Reductions apply only to participants who are eligible with 15 years of Continuous Service and age 60.
- c. Commencement Date        Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.
- d. Form of Payment            Same as for normal retirement.

### Disability Retirement (Permanent Incapacity Retirement)

- a. Eligibility                      Fifteen years of Continuous Service and permanently disabled for at least six months.
- b. Benefit                        The accrued pension plus \$230 supplement payable until social security benefits commence or age 62, if earlier; the accrued pension is payable thereafter.
- c. Commencement Date        Payments commence as soon as practicable following the approval of the application for benefits.
- d. Form of Payment            Same as for normal retirement.

|                 |                                     |
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### Death Prior to Retirement

- |                      |                                                                                                                                                                                                                                                                      |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Death in active service after 15 years of Continuous Service or eligible for an immediate pension.                                                                                                                                                                   |
| b. Benefit           | Spouse receives 50% of accrued monthly pension (\$100 minimum); such benefit is reduced by 50% of the widow's social security benefit when first payable (\$50 minimum net benefit). The above 50% rate is reduced by 1/2% for each year the spouse is under age 50. |
| c. Commencement Date | Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.                                                                                                                                               |
| d. Form of Payment   | The surviving spouse's benefit is paid monthly for the life of the surviving spouse.                                                                                                                                                                                 |

### Pre-pension Spouse's Benefit

- |                             |                                                                                                                                                                                                                                                                                                                                                                                               |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility              | Employee can elect pre-pension coverage if he is age 55 or older and has 15 years of Continuous Service or 10 years of Continuous Service and age 60, or age 65 or older.                                                                                                                                                                                                                     |
| b. Monthly Spouse's Pension | The spouse's pension is calculated as if the employee had terminated employment on his date of death with the automatic form of pension in effect. For participants with a break in Continuous Service prior to January 1, 1992, pensions of the employees and their surviving spouses are reduced 7/10% per year the coverage is in effect, to reflect the cost of the pre-pension coverage. |

### Vested Spouse's Benefit

- |                |                                                                                                                                                                            |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility | Death after permanent incapacity prior to Age 62 or after 5 years of Continuous Service and not eligible for pre-pension spouse's benefit.                                 |
| b. Benefit     | 50% of the accrued monthly pension at earlier of death or termination assuming participant lived to date benefits were payable and elected 50% Joint and Survivor Annuity. |

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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## **SCHEDULE SB ATTACHMENTS**

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### **Special Payment**

- |                |                                                                                                                                                                                                                                                             |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility | Eligible for normal or early retirement                                                                                                                                                                                                                     |
| b. Benefit     | Thirteen weeks vacation pay (14 weeks if participant currently receives more than 4 weeks of vacation per year) reduced by any vacation taken in the year of retirement. If participant receives special payment, monthly pension is deferred three months. |

### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost, but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

Towers Watson is not aware of any future plan changes which are required to be reflected.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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## Schedule SB, Line 26 Schedule of Active Participant Data for Frozen Plans as of January 1, 2013

| Attained Age | Years of Credited Service |           |        |           |        |           |          |           |          |           |          |           |          |           |          |           |          |           |
|--------------|---------------------------|-----------|--------|-----------|--------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|
|              | Under 1                   |           | 1 to 4 |           | 5 to 9 |           | 10 to 14 |           | 15 to 19 |           | 20 to 24 |           | 25 to 29 |           | 30 to 34 |           | 35 to 39 |           |
|              | No.                       | Avg. Ben. | No.    | Avg. Ben. | No.    | Avg. Ben. | No.      | Avg. Ben. | No.      | Avg. Ben. | No.      | Avg. Ben. | No.      | Avg. Ben. | No.      | Avg. Ben. | No.      | Avg. Ben. |
| Under 25     | 0                         | 0         | 1      | 0         | 0      | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         |
| 25 - 29      | 4                         | 0         | 51     | 1,439     | 20     | 2,017     | 1        | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         |
| 30 - 34      | 16                        | 0         | 90     | 1,855     | 132    | 3,918     | 31       | 3,889     | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         |
| 35 - 39      | 17                        | 0         | 75     | 2,282     | 151    | 4,401     | 144      | 9,241     | 22       | 4,155     | 0        | 0         | 0        | 0         | 0        | 0         | 0        | 0         |
| 40 - 44      | 15                        | 0         | 60     | 2,498     | 148    | 3,826     | 165      | 10,322    | 84       | 11,616    | 31       | 8,454     | 0        | 0         | 0        | 0         | 0        | 0         |
| 45 - 49      | 13                        | 0         | 53     | 2,331     | 154    | 4,428     | 153      | 8,382     | 97       | 14,935    | 91       | 13,971    | 45       | 7,742     | 3        | 0         | 0        | 0         |
| 50 - 54      | 21                        | 3,936     | 45     | 1,846     | 133    | 4,013     | 99       | 7,813     | 89       | 10,809    | 94       | 16,823    | 82       | 13,869    | 45       | 7,692     | 5        | 0         |
| 55 - 59      | 14                        | 0         | 28     | 1,865     | 117    | 3,815     | 73       | 6,820     | 78       | 11,451    | 63       | 10,744    | 79       | 18,709    | 69       | 13,392    | 27       | 13,350    |
| 60 - 64      | 6                         | 0         | 17     | 0         | 82     | 3,513     | 51       | 5,447     | 34       | 11,110    | 35       | 13,370    | 28       | 19,188    | 51       | 14,769    | 33       | 21,752    |
| 65 - 69      | 1                         | 0         | 6      | 0         | 10     | 0         | 10       | 0         | 9        | 0         | 7        | 0         | 6        | 0         | 14       | 0         | 5        | 0         |
| 70 & Over    | 0                         | 0         | 0      | 0         | 3      | 0         | 1        | 0         | 2        | 0         | 2        | 0         | 2        | 0         | 3        | 0         | 0        | 0         |

Plan Name: Stanley Black & Decker Pension Plan  
 EIN / PN: 52-1127357 / 013  
 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

#### Interest rate basis:

- |                       |                 |
|-----------------------|-----------------|
| ● Applicable month    | September       |
| ● Interest rate basis | 3-Segment Rates |

#### Interest rates:

- |                           | Reflecting<br>Corridors | Not Reflecting<br>Corridors |
|---------------------------|-------------------------|-----------------------------|
| ● First segment rate      | 4.94%                   | 1.75%                       |
| ● Second segment rate     | 6.15%                   | 4.62%                       |
| ● Third segment rate      | 6.76%                   | 5.72%                       |
| ● Effective interest rate | 6.27%                   |                             |

#### Annual rates of increase

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| ● Compensation:                     | Not Applicable, benefits are frozen |
| ● Future Social Security wage bases | Not Applicable, benefits are frozen |

#### Assumed cost of living adjustment

None.

#### Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

#### Plan-Related Expenses

The amount included this year for administrative expenses is \$4,356,276, which is the prior year actual administrative expenses with a \$0 adjustment to reflect expected changes in PBGC variable premiums.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

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### Mortality

For all participants: The prescribed mortality assumption under IRC §430(h)(3)(A) using static tables with separate mortality rates for annuitants and non-annuitants was used for all participants.

### Retirement

For purposes of determining the Funding Target (disregarding at-risk assumptions), the rates at which active participants are assumed to retire by age and gender are shown below.

#### Retirement – Black & Decker Pension Plan

The rates at which participants are assumed to retire by age and gender are shown below:

| Age     | Males and Females |
|---------|-------------------|
| 55 - 59 | 7.50%             |
| 60 - 61 | 10.00%            |
| 62      | 20.00%            |
| 63 - 64 | 15.00%            |
| 65      | 40.00%            |
| 66 - 68 | 20.00%            |
| 69      | 35.00%            |
| 70+     | 100.00%           |

Terminated vested participants are assumed to commence benefits at age 62.

**Retirement - Best Lock, and Sargent & Greenleaf -** The rates at which participants are assumed to retire by age and gender are shown below:

| Percentage retiring during the year |       |         |
|-------------------------------------|-------|---------|
| Age                                 | Males | Females |
| 55 - 59                             | 2%    | 2%      |
| 60                                  | 5%    | 5%      |
| 61                                  | 10%   | 10%     |
| 62                                  | 20%   | 20%     |
| 63                                  | 10%   | 10%     |
| 64                                  | 20%   | 20%     |
| 65 - 66                             | 50%   | 50%     |
| 67+                                 | 100%  | 100%    |

Terminated vested participants are assumed to retire at age 65.

**Retirement - Lista, Price Pfister, and True Temper employees and terminated vested participants** were assumed to retire at normal retirement age.

Plan Name: Stanley Black & Decker Pension Plan  
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Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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**Retirement - National Manufacturing** – The rates at which participants are assumed to retire are shown below:

| Attained Age | Percentage |
|--------------|------------|
| 55-60        | 5%         |
| 61           | 10%        |
| 62-64        | 25%        |
| 65-68        | 50%        |
| 69+          | 100%       |

Terminated vested participants are assumed to retire at age 60.

**Retirement - Porter Cable** – The rates at which participants retire by age are shown below:

| Percentage retiring during the year |         |
|-------------------------------------|---------|
| Age                                 | Rate    |
| 55                                  | 15.00%  |
| 56 - 59                             | 4.50%   |
| 60                                  | 25.00%  |
| 61                                  | 35.00%  |
| 62                                  | 15.00%  |
| 63                                  | 50.00%  |
| 64                                  | 35.00%  |
| 65                                  | 50.00%  |
| 66                                  | 75.00%  |
| 67 - 69                             | 50.00%  |
| 70+                                 | 100.00% |

For terminated vested participants, if vesting service is greater than or equal to 10 years then assumed to retire at age 60, else age 65.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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### Disability Rates – Black & Decker Pension Plan

The rates at which participants are assumed to become disabled are shown below:

| Age | Males   | Females |
|-----|---------|---------|
| 15  | 0.0225% | 0.0225% |
| 20  | 0.0225% | 0.0225% |
| 25  | 0.0225% | 0.0225% |
| 30  | 0.0225% | 0.0300% |
| 35  | 0.0300% | 0.0525% |
| 40  | 0.0600% | 0.0975% |
| 45  | 0.1200% | 0.1800% |
| 50  | 0.2475% | 0.3000% |
| 55  | 0.5175% | 0.4800% |
| 60  | 0.8625% | 0.6750% |
| 65+ | 0.0000% | 0.0000% |

### Disability Rates - National Manufacturing

The rates at which participants are assumed to become disabled by age and gender are shown below:

| Attained Age | Males | Females |
|--------------|-------|---------|
| 25           | 0.04% | 0.04%   |
| 30           | 0.04% | 0.06%   |
| 35           | 0.05% | 0.10%   |
| 40           | 0.11% | 0.18%   |
| 45           | 0.22% | 0.34%   |
| 50           | 0.46% | 0.56%   |
| 55           | 0.96% | 0.89%   |
| 60           | 1.61% | 1.97%   |
| 64           | 2.29% | 1.02%   |

Plan Name: Stanley Black & Decker Pension Plan  
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## SCHEDULE SB ATTACHMENTS

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### Disability Rates - Porter Cable

The rates at which participants become disabled are shown below:

| Percentage becoming disabled during the year |         |
|----------------------------------------------|---------|
| Age                                          | Rate    |
| 15                                           | 0.0602% |
| 20                                           | 0.0602% |
| 25                                           | 0.0901% |
| 30                                           | 0.1159% |
| 35                                           | 0.1583% |
| 40                                           | 0.2658% |
| 45                                           | 0.4260% |
| 50                                           | 0.7453% |
| 55                                           | 1.2267% |
| 60                                           | 1.9490% |
| 63+                                          | 0.0000% |

**Disability Rates** – Best Lock, Lista, Price Pfister, Sargent & Greenleaf, True Temper – Not applicable or none assumed.

### Future Increases in Maximum Benefits and Plan Compensation Limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC §415. Plan compensation is limited to the maximum presently allowed under IRC §401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
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## SCHEDULE SB ATTACHMENTS

### Representative Termination Rates (not due to disability, retirement, or mortality) – Black & Decker Pension Plan.

The rates at which participants are expected to terminate employment are shown below:

| Age | Years of Service |        |        |        |        |        |
|-----|------------------|--------|--------|--------|--------|--------|
|     | 0                | 1      | 2      | 3      | 4      | 5+     |
| ≤21 | 43.75%           | 43.75% | 43.75% | 43.75% | 43.75% | 43.75% |
| 25  | 35.75%           | 35.75% | 35.75% | 35.75% | 35.75% | 35.75% |
| 30  | 31.75%           | 29.75% | 27.50% | 27.00% | 27.00% | 27.00% |
| 35  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 19.75% |
| 40  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 14.00% |
| 45  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 9.75%  |
| 50  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 6.75%  |
| 55+ | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 5.50%  |

### Representative Termination Rates - Best Lock

The rates at which participants are assumed to leave the Company by age and gender are shown below:

| Percentage leaving during the year |       |         |
|------------------------------------|-------|---------|
| Attained Age                       | Males | Females |
| 25                                 | 5.2%  | 5.2%    |
| 30                                 | 4.9%  | 4.9%    |
| 35                                 | 4.5%  | 4.5%    |
| 40                                 | 3.8%  | 3.8%    |
| 45                                 | 3.2%  | 3.2%    |
| 50                                 | 1.5%  | 1.5%    |
| 55                                 | 0.3%  | 0.3%    |
| 60                                 | 0.0%  | 0.0%    |
| 65                                 | 0.0%  | 0.0%    |

Plan Name: Stanley Black & Decker Pension Plan  
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 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

### Representative Termination Rates - National Manufacturing

The rates at which participants are assumed to leave the company by age and gender are shown below:

| Percentage leaving during the year |       |         |
|------------------------------------|-------|---------|
| Attained Age                       | Males | Females |
| 25                                 | 10.4% | 14.1%   |
| 30                                 | 6.4%  | 9.0%    |
| 35                                 | 5.0%  | 7.4%    |
| 40                                 | 3.9%  | 5.9%    |
| 45                                 | 2.8%  | 4.3%    |
| 50                                 | 1.7%  | 2.5%    |
| 55                                 | 0.3%  | 0.4%    |
| 57+                                | 0.0%  | 0.0%    |

### Representative Termination Rates - Sargent & Greenleaf

The rates at which participants are assumed to leave the Company by age and gender are shown below:

| Age | Males   | Females |
|-----|---------|---------|
| 20  | 11.630% | 11.630% |
| 25  | 11.630% | 11.630% |
| 30  | 9.969%  | 9.969%  |
| 35  | 8.307%  | 8.307%  |
| 40  | 6.646%  | 6.646%  |
| 45  | 4.984%  | 4.984%  |
| 50  | 3.323%  | 3.323%  |
| 55  | 1.661%  | 1.661%  |
| 60  | 0.000%  | 0.000%  |

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
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## SCHEDULE SB ATTACHMENTS

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### Representative Termination Rates – Porter Cable

| Age | Percentage leaving during the year |         |         |        |
|-----|------------------------------------|---------|---------|--------|
|     | Years of Service                   |         |         |        |
|     | 0                                  | 1       | 2       | 3+     |
| 19  | 40.100%                            | 30.075% | 20.050% | 6.700% |
| 20  | 39.800%                            | 29.850% | 19.900% | 6.600% |
| 25  | 35.900%                            | 26.925% | 17.950% | 5.300% |
| 30  | 34.700%                            | 26.025% | 17.350% | 4.900% |
| 35  | 33.800%                            | 25.350% | 16.900% | 4.600% |
| 40  | 32.000%                            | 24.000% | 16.000% | 4.000% |
| 45  | 30.800%                            | 23.100% | 15.400% | 3.600% |
| 50  | 26.600%                            | 19.950% | 13.300% | 2.200% |
| 55  | 24.200%                            | 18.150% | 12.100% | 1.400% |
| 60+ | 0.000%                             | 0.000%  | 0.000%  | 0.000% |

**Termination Rates** – Lista, Price Pfister, and True Temper – Not applicable.

**Form of Payment** - Black & Decker Pension Plan, Lista, National Manufacturing, Porter Cable, and Sargent & Greenleaf

Participants are assumed to elect single life annuities.

**Form of Payment** - Best Lock

Married participants are assumed to elect the unreduced 50% joint and survivor annuity and single participants are assumed to elect the life only annuity.

### Marriage

For purposes of valuing the pre-retirement surviving spouse's benefit, 85% of males and 50% of females are assumed to be married and male spouses are assumed to be 3 years older than female spouses.

### Employees

It was assumed there will be no new or rehired employees.

### Plan Compensation

Not Applicable.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## **SCHEDULE SB ATTACHMENTS**

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### **Valuation Date**

First day of plan year.

### **Funding Target**

Present value of accrued benefits.

### **Target Normal Cost**

Since the Plan has no participants accruing benefits, the target normal cost consists entirely of plan-related expenses.

### **Asset Method**

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2012 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

As of January 1, 2013, the market value of assets for Lista were merged into the consolidated plan assets without any smoothing.

### **Participant Data**

Census data was supplied by T Rowe Price and Wells Fargo on behalf of Stanley Black & Decker, Inc. as of January 1, 2013.

### **Benefits not Included in Valuation**

All benefits described in the Plan Provisions section of this report were valued based on discussions with Stanley Black & Decker, Inc. regarding the likelihood that these benefits will be paid. Towers Watson has reviewed the plan provisions with Stanley Black & Decker, Inc. and based on that review, is not aware of any significant benefits required to be valued that were not.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## **SCHEDULE SB ATTACHMENTS**

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### **Significant Events since Last Actuarial Valuation Report**

- Effective December 31, 2012, the plan name changed from the Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were all merged into the Stanley Black & Decker Pension Plan.
- The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totaling \$125,990,245.
- The sale of the HHI division occurred in December 2012

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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### Changes in Assumptions and Methods since Last Actuarial Valuation

The following changes in assumptions were made as part of this valuation:

- The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of September 2011 (January 2012 for Porter Cable) to September 2012, with MAP-21 corridor, as applicable.
- The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.
- For National Manufacturing and Price Pfister there was a change from disabled mortality to healthy mortality.
- For all groups, for purposes of valuing the pre-retirement surviving spouse's benefit, 85% of males and 50% of females are assumed to be married and male spouses are assumed to be 3 years older than female spouses. This assumption varied by group in previous valuations.
- As of January 1, 2013, the market value of assets for Lista were merged into the consolidated plan without any smoothing.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2013

| Type of Base | Date<br>Established | Initial Amount | Remaining<br>Amortization<br>Period (Years) | Outstanding<br>Balance | Amortization<br>Payment |
|--------------|---------------------|----------------|---------------------------------------------|------------------------|-------------------------|
| 1 Shortfall  | 01/01/2013          | 31,929,670     | 7                                           | 31,929,670             | 5,328,806               |
| 2 Shortfall  | 01/01/2012          | (104,608,083)  | 6                                           | (94,009,147)           | (17,761,402)            |
| 3 Shortfall  | 01/01/2011          | 56,800,308     | 5                                           | 42,507,549             | 9,340,471               |
| 4 Shortfall  | 01/01/2010          | 40,413,506     | 4                                           | 25,168,165             | 6,754,179               |
| 5 Shortfall  | 01/01/2009          | 97,998,641     | 3                                           | 52,704,085             | 18,421,625              |
| 6 Shortfall  | 01/01/2008          | 968,835        | 2                                           | 359,802                | 184,237                 |
| Total        |                     |                |                                             | 58,660,124             | 22,267,916              |

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## SCHEDULE SB ATTACHMENTS

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### Changes in Assumptions and Methods since Last Actuarial Valuation

The following changes in assumptions were made as part of this valuation:

- The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of September 2011 (January 2012 for Porter Cable) to September 2012, with MAP-21 corridor, as applicable.
- The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.
- For National Manufacturing and Price Pfister there was a change from disabled mortality to healthy mortality.
- For all groups, for purposes of valuing the pre-retirement surviving spouse's benefit, 85% of males and 50% of females are assumed to be married and male spouses are assumed to be 3 years older than female spouses. This assumption varied by group in previous valuations.
- As of January 1, 2013, the market value of assets for Lista were merged into the consolidated plan without any smoothing.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
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## **SCHEDULE SB ATTACHMENTS**

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### **Schedule SB – Statement by Enrolled Actuary**

|                          |                                     |
|--------------------------|-------------------------------------|
| <b>Plan Sponsor</b>      | Black & Decker (U.S.) Inc.          |
| <b>EIN/PN</b>            | 52-1127357/013                      |
| <b>Plan Name</b>         | Stanley Black & Decker Pension Plan |
| <b>Valuation Date</b>    | January 1, 2013                     |
| <b>Enrolled Actuary</b>  | Jeannie A. Mandell                  |
| <b>Enrollment Number</b> | 14-06089                            |

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

The plan sponsor has elected to not apply corridor extensions under HATFA for funding (IRC §430) or benefit restriction purposes (IRC §436) for the 2013 plan year. Thus corridors for the 2013 plan year are set at 85%/115%.

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**

The average retirement age for Line 22 was calculated by weighting each plan's weighted average retirement by percentage of active employees within each plan.

| (a)                                                                                                                             | (b)                                 | (c)                           | Product (d)     |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------|-----------------|
| Plan                                                                                                                            | Number of<br>Active<br>Participants | Plan's<br>Weighted<br>Average | (b)/3,454 x (c) |
| Best Lock Corporation Employees'<br>Pension Plan                                                                                | 131                                 | 63.29                         | 2.400           |
| Pension Plan for Employees of Lista<br>International Corporation                                                                | 141                                 | 65.00                         | 2.653           |
| National Manufacturing Co.<br>Pension Plan                                                                                      | 3                                   | 62.10                         | 0.053           |
| Retirement Plan for Hourly<br>Employees of Price Pfister, Inc.                                                                  | 0                                   | 65.00                         | 0.000           |
| Retirement Plan for Hourly-Rated<br>Employees of Porter Cable<br>Corporation                                                    | 227                                 | 60.36                         | 3.966           |
| Pension Plan for Employees of<br>Sargent & Greenleaf, Inc.                                                                      | 86                                  | 63.29                         | 1.575           |
| Pension Plan for Hourly Employees<br>of the True Temper Sports Division<br>Represented by the United<br>Steelworkers of America | 0                                   | 65.00                         | 0.000           |
| Stanley Black & Decker, Inc.<br>Pension Plan                                                                                    | 2,866                               | 61.90                         | 51.36           |
| <b>Total</b>                                                                                                                    | <b>3,454</b>                        |                               | <b>62.007</b>   |
| <b>Rounded for Schedule SB item 22</b>                                                                                          |                                     |                               | <b>62</b>       |

Plan Name: Stanley Black & Decker Pension Plan  
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 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Best Lock Corporation Employees' Pension Plan and**  
**Pension Plan for Employees of Sargent & Greenleaf, Inc.**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)<br>Age              | (b)<br>Rate | (c)<br>Weight | Product (d)<br>(a) x (b) x (c) |
|-------------------------|-------------|---------------|--------------------------------|
| 55                      | 2.00%       | 1,000,000     | 1.100000                       |
| 56                      | 2.00%       | 980,000       | 1.097600                       |
| 57                      | 2.00%       | 960,400       | 1.094856                       |
| 58                      | 2.00%       | 941,192       | 1.091783                       |
| 59                      | 2.00%       | 922,368       | 1.088394                       |
| 60                      | 5.00%       | 903,921       | 2.711762                       |
| 61                      | 10.00%      | 858,725       | 5.238221                       |
| 62                      | 20.00%      | 772,852       | 9.583368                       |
| 63                      | 10.00%      | 618,282       | 3.895175                       |
| 64                      | 20.00%      | 556,454       | 7.122607                       |
| 65                      | 50.00%      | 445,163       | 14.467795                      |
| 66                      | 50.00%      | 222,581       | 7.345188                       |
| 67                      | 100.00%     | 111,291       | 7.456479                       |
| <b>Weighted Average</b> |             |               | <b>63.29</b>                   |

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**National Manufacturing Co. Pension Plan**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)              | (b)                                                         | (c)                                                                                        | (d)                                              | (e)                                                                                  | (f)                                       | (g)       |
|------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------|-----------|
| Age              | Retirement Assumption As Fraction Those Attaining Age Shown | Fraction Of Those Attaining Earliest Retirement Age Still Not Retired At Beginning Of Year | Fraction Of Original Group Retiring At Age Shown | Fraction Of Those Attaining Earliest Retirement Age Still Not Retired At End of Year | Ages With Non Zero Retirement Probability | (d) x (f) |
| 55               | 0.0500                                                      | 1.0000                                                                                     | 0.0500                                           | 0.9500                                                                               | 55                                        | 2.7500    |
| 56               | 0.0500                                                      | 0.9500                                                                                     | 0.0475                                           | 0.9025                                                                               | 56                                        | 2.6600    |
| 57               | 0.0500                                                      | 0.9025                                                                                     | 0.0451                                           | 0.8574                                                                               | 57                                        | 2.5707    |
| 58               | 0.0500                                                      | 0.8574                                                                                     | 0.0429                                           | 0.8145                                                                               | 58                                        | 2.4882    |
| 59               | 0.0500                                                      | 0.8145                                                                                     | 0.0407                                           | 0.7738                                                                               | 59                                        | 2.4013    |
| 60               | 0.0500                                                      | 0.7738                                                                                     | 0.0387                                           | 0.7351                                                                               | 60                                        | 2.3220    |
| 61               | 0.1000                                                      | 0.7351                                                                                     | 0.0735                                           | 0.6616                                                                               | 61                                        | 4.4835    |
| 62               | 0.2500                                                      | 0.6616                                                                                     | 0.1654                                           | 0.4962                                                                               | 62                                        | 10.2548   |
| 63               | 0.2500                                                      | 0.4962                                                                                     | 0.1240                                           | 0.3722                                                                               | 63                                        | 7.8120    |
| 64               | 0.2500                                                      | 0.3722                                                                                     | 0.0931                                           | 0.2792                                                                               | 64                                        | 5.9520    |
| 65               | 0.5000                                                      | 0.2792                                                                                     | 0.1396                                           | 0.1396                                                                               | 65                                        | 9.0740    |
| 66               | 0.5000                                                      | 0.1396                                                                                     | 0.0698                                           | 0.0698                                                                               | 66                                        | 4.6068    |
| 67               | 0.5000                                                      | 0.0698                                                                                     | 0.0349                                           | 0.0349                                                                               | 67                                        | 2.3383    |
| 68               | 0.5000                                                      | 0.0349                                                                                     | 0.0174                                           | 0.0175                                                                               | 68                                        | 1.1832    |
| 69               | 1.0000                                                      | 0.0175                                                                                     | 0.0175                                           | 0.0000                                                                               | 69                                        | 1.2075    |
| Weighted Average |                                                             |                                                                                            |                                                  |                                                                                      |                                           | 62.10     |

Plan Name: Stanley Black & Decker Pension Plan  
 EIN / PN: 52-1127357 / 013  
 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

## **SCHEDULE SB ATTACHMENTS**

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**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

---

| <b>(a)</b>       | <b>(b)</b>  | <b>(c)</b>    | <b>Product (d)</b>     |
|------------------|-------------|---------------|------------------------|
| <b>Age</b>       | <b>Rate</b> | <b>Weight</b> | <b>(a) x (b) x (c)</b> |
| 55               | 15.00%      | 1.0000        | 8.250                  |
| 56               | 4.50%       | 0.8500        | 2.142                  |
| 57               | 4.50%       | 0.8118        | 2.082                  |
| 58               | 4.50%       | 0.7752        | 2.023                  |
| 59               | 4.50%       | 0.7403        | 1.966                  |
| 60               | 25.00%      | 0.7070        | 10.605                 |
| 61               | 35.00%      | 0.5303        | 11.321                 |
| 62               | 15.00%      | 0.3447        | 3.205                  |
| 63               | 50.00%      | 0.2930        | 9.229                  |
| 64               | 35.00%      | 0.1465        | 3.281                  |
| 65               | 50.00%      | 0.0952        | 3.095                  |
| 66               | 75.00%      | 0.0476        | 2.357                  |
| 67               | 50.00%      | 0.0119        | 0.399                  |
| 68               | 50.00%      | 0.0060        | 0.202                  |
| 69               | 50.00%      | 0.0030        | 0.103                  |
|                  | 15.00%      | 1.0000        | 8.250                  |
| Weighted Average |             |               | 60.36                  |

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Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Stanley Black & Decker Pension Plan**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)<br>Age       | (b)<br>Rate | (c)<br>Weight | Product (d)<br>(a) x (b) x (c) |
|------------------|-------------|---------------|--------------------------------|
| 55               | 7.50%       | 1.0000        | 4.125                          |
| 56               | 7.50%       | 0.9250        | 3.885                          |
| 57               | 7.50%       | 0.8556        | 3.657                          |
| 58               | 7.50%       | 0.7915        | 3.442                          |
| 59               | 7.50%       | 0.7321        | 3.239                          |
| 60               | 10.00%      | 0.6772        | 4.063                          |
| 61               | 10.00%      | 0.6095        | 3.717                          |
| 62               | 20.00%      | 0.5485        | 6.801                          |
| 63               | 15.00%      | 0.4388        | 4.146                          |
| 64               | 15.00%      | 0.3730        | 3.580                          |
| 65               | 40.00%      | 0.3170        | 8.243                          |
| 66               | 20.00%      | 0.1902        | 2.511                          |
| 67               | 20.00%      | 0.1522        | 2.039                          |
| 68               | 20.00%      | 0.1217        | 165.57                         |
| 69               | 35.00%      | 0.0974        | 2.352                          |
| 70               | 100.00      | 0.0633        | 4.431                          |
| Weighted Average |             |               | 61.90                          |

**Retirement** - Lista, Price Pfister, and True Temper employees and terminated vested participants were assumed to retire at normal retirement age.

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

# SCHEDULE SB ATTACHMENTS

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## Schedule SB, Line 13 Carryover Balances and Prefunding Balances as of January 1, 2013

Effective December 31, 2012, the following plans merged into the Stanley Black & Decker, Inc. Pension Plan. Listed below are Carryover and Prefunding balances for each plan as of January 1, 2013.

| Plan Name                                                                                                                  | Plan EIN/PN           | Funding Standard<br>Carry Over Balance | Prefunding Balance |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------|--------------------|
| Best Lock Corporation Employees' Pension Plan (BL)                                                                         | 35-1842918/002        | \$ 249,116                             | \$ 0               |
| Pension Plan for Employees of Lista International Corporation (L)                                                          | 04-2440593/001        | \$ 0                                   | \$ 43              |
| National Manufacturing Co. Pension Plan (N)                                                                                | 36-1524190/001        | \$ 0                                   | \$ 0               |
| Retirement Plan for Hourly Employees of Price Pfister, Inc. (PP)                                                           | 52-1127357/053        | \$ 0                                   | \$ 211,279         |
| Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation (PC)                                                | 52-1127357/055        | \$ 0                                   | \$ 0               |
| Pension Plan for Employees of Sargent & Greenleaf, Inc. (S&G)                                                              | 52-1127357/037        | \$ 0                                   | \$ 0               |
| Pension Plan for Hourly Employees of the True Temper Sports Division Represented by the United Steelworkers of America(TT) | 52-1127357/045        | \$ 548,687                             | \$ 0               |
| <b>Total Merged into Stanley Black &amp; Decker, Inc. Pension Plan</b>                                                     | <b>52-1127357/013</b> | <b>\$ 797,803</b>                      | <b>\$ 211,322</b>  |

Plan Name: Stanley Black & Decker Pension Plan  
 EIN / PN: 52-1127357 / 013  
 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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### Schedule SB, Line 13

#### Line 13 Adjusted for Merger

| Plan Name                                                      | Plan EIN/PN    | Funding Standard<br>Carry Over Balance | Prefunding Balance <sup>1</sup> |
|----------------------------------------------------------------|----------------|----------------------------------------|---------------------------------|
| Line 13 without adjustment                                     |                | \$ 0                                   | \$ 93,881,131                   |
| Total Merged into Stanley Black &<br>Decker, Inc. Pension Plan | 52-1127357/013 | \$ 797,803                             | \$ 349,639                      |
| Line 13 with adjustment                                        |                | \$ 797,803                             | \$ 94,230,770                   |

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<sup>1</sup> Prefunding balances include amounts added to the prefunding balances for excess 2012 contributions with interest (\$18,289 for BL, \$7,605 for L, \$20,946 for N, \$17,951 for PC, \$44,873 for PP, \$14,878 for S&G and \$13,775 for TT.)

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

|                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                       |                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><small>Department of Labor<br/>Employee Benefits Security Administration<br/>Pension Benefit Guaranty Corporation</small> | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><p>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).</p> <p>► <b>File as an attachment to Form 5500 or 5500-SF.</b></p> | <small>OMB No. 1210-0110</small><br><b>2013</b><br><b>This Form is Open to Public Inspection</b> |
| For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                       |                                                                                                  |

► **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.

|                                                                                                                                                                          |                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <b>A</b> Name of plan<br><br>Stanley Black & Decker Pension Plan                                                                                                         | <b>B</b> Three-digit plan number (PN) ► <u>013</u>              |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br><br>BLACK & DECKER (U.S.) INC.                                                               | <b>D</b> Employer Identification Number (EIN)<br><br>52-1127357 |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B <input type="checkbox"/> Other |                                                                 |
| <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500                  |                                                                 |

**Part I Basic Information**

|                                                                                                                                                                                                          |              |                            |                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------------------|--------------------|
| <b>1</b> Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2013</u>                                                                                                                          |              |                            |                    |
| <b>2</b> Assets:                                                                                                                                                                                         |              |                            |                    |
| a Market value .....                                                                                                                                                                                     | <b>2a</b>    |                            | 992,969,048        |
| b Actuarial value .....                                                                                                                                                                                  | <b>2b</b>    |                            | 944,347,544        |
| <b>3</b> Funding target/participant count breakdown:                                                                                                                                                     |              |                            |                    |
|                                                                                                                                                                                                          |              | (1) Number of participants | (2) Funding Target |
| a For retired participants and beneficiaries receiving payment .....                                                                                                                                     | <b>3a</b>    | 13,135                     | 626,377,424        |
| b For terminated vested participants .....                                                                                                                                                               | <b>3b</b>    | 5,575                      | 134,694,184        |
| <b>c</b> For active participants:                                                                                                                                                                        |              |                            |                    |
| (1) Non-vested benefits .....                                                                                                                                                                            | <b>3c(1)</b> |                            | 9,406,255          |
| (2) Vested benefits .....                                                                                                                                                                                | <b>3c(2)</b> |                            | 137,501,232        |
| (3) Total active .....                                                                                                                                                                                   | <b>3c(3)</b> | 3,454                      | 146,907,487        |
| <b>d</b> Total .....                                                                                                                                                                                     | <b>3d</b>    | 22,164                     | 907,979,095        |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                    |              |                            |                    |
| a Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                       | <b>4a</b>    |                            |                    |
| 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 ..... | <b>4b</b>    |                            |                    |
| <b>5</b> Effective interest rate .....                                                                                                                                                                   | <b>5</b>     |                            | 6.27 %             |
| <b>6</b> Target normal cost .....                                                                                                                                                                        | <b>6</b>     |                            | 4,356,276          |

**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.

|                      |                                                                               |                                                          |
|----------------------|-------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>SIGN<br/>HERE</b> | Jeannie A Mandell <i>JAM</i><br>Signature of actuary                          | <u>10/15/2014</u><br>Date                                |
|                      | Jeannie A Mandell<br>Type or print name of actuary                            | 14-06089<br>Most recent enrollment number                |
|                      | Towers Watson Delaware Inc.<br>Firm name                                      | (617) 638-3700<br>Telephone number (including area code) |
|                      | 800 Boylston Street, Suite 600<br>Boston MA 02199-8103<br>Address of the firm |                                                          |

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

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

Schedule SB (Form 5500) 2013  
v. 130118

**Part II Beginning of Year Carryover and Prefunding Balances**

|                                                                                                                                            | (a) Carryover balance | (b) Prefunding balance |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                   | 0                     | 47,711,249             |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                | 0                     | 16,173,372             |
| <b>9</b> Amount remaining (line 7 minus line 8) .....                                                                                      | 0                     | 31,537,877             |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>12.22</u> % .....                                                      |                       | 3,853,929              |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                             |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                            |                       | 53,946,129             |
| <b>b</b> Interest on (a) using prior year's effective interest rate of <u>7.00</u> % except as otherwise provided (see instructions) ..... |                       | 4,543,196              |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                              |                       | 58,489,325             |
| <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                            |                       | 58,489,325             |
| <b>12</b> Other reductions in balances due to elections or deemed elections .....                                                          | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) .....                                               | 0                     | 93,881,131             |

**Part III Funding Percentages**

|                                                                                                                                                                            |           |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 93.53 %  |
| <b>15</b> Adjusted funding target attainment percentage .....                                                                                                              | <b>15</b> | 104.00 % |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 95.39 %  |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....                                        | <b>17</b> | %        |

**Part IV Contributions and Liquidity Shortfalls**

| <b>18</b> Contributions made to the plan for the plan year by employer(s) and employees: |                                   |                                 |                          |                                   |                                 |
|------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
| (a) Date<br>(MM-DD-YYYY)                                                                 | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
| 07/01/2014                                                                               | 28,000,000                        |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
|                                                                                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ▶</b>                                                                          |                                   |                                 | <b>18(b)</b>             | 28,000,000                        | <b>18(c)</b> 0                  |

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

|                                                                                                                         |            |            |
|-------------------------------------------------------------------------------------------------------------------------|------------|------------|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....                    | <b>19a</b> |            |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                      | <b>19b</b> |            |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..... | <b>19c</b> | 25,558,891 |

**20** Quarterly contributions and liquidity shortfalls:

|                                                                                                                         |                                                                     |
|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>a</b> Did the plan have a "funding shortfall" for the prior year? .....                                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>b</b> If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ..... | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>c</b> If line 20a is "Yes," see instructions and complete the following table as applicable:                         |                                                                     |

Liquidity shortfall as of end of quarter of this plan year

| (1) 1st | (2) 2nd | (3) 3rd | (4) 4th |
|---------|---------|---------|---------|
| 0       | 0       | 0       | 0       |

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

|                                                                                                                                                                                              |                        |                        |                        |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------|------------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                                                                                                                                                                     |                        |                        |                        |                                                     |
| <b>a</b> Segment rates:                                                                                                                                                                      | 1st segment:<br>4.94 % | 2nd segment:<br>6.15 % | 3rd segment:<br>6.76 % | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code).....                                                                                                                                                  |                        |                        |                        | <b>21b</b> 4                                        |
| <b>22</b> Weighted average retirement age .....                                                                                                                                              |                        |                        |                        | <b>22</b> 62                                        |
| <b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                        |                        |                        |                                                     |

**Part VI Miscellaneous Items**

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

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

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

**Part VIII Minimum Required Contribution For Current Year**

|                                                                                                                                                                                      |                     |                    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                     |                    |
| <b>a</b> Target normal cost (line 6) .....                                                                                                                                           | <b>31a</b>          | 4,356,276          |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           | <b>31b</b>          | 0                  |
| <b>32</b> Amortization installments:                                                                                                                                                 | Outstanding Balance | Installment        |
| <b>a</b> Net shortfall amortization installment .....                                                                                                                                | 58,660,124          | 22,267,916         |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       |                     | 0                  |
| <b>33</b> 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 ..... | <b>33</b>           | 0                  |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) ..                                                            | <b>34</b>           | 26,624,192         |
|                                                                                                                                                                                      | Carryover balance   | Prefunding balance |
| <b>35</b> Balances elected for use to offset funding requirement .....                                                                                                               | 0                   | 20,400,000         |
| <b>36</b> Additional cash requirement (line 34 minus line 35) .....                                                                                                                  | <b>36</b>           | 6,224,192          |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....                                                  | <b>37</b>           | 25,558,891         |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                     |                    |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       | <b>38a</b>          | 19,334,699         |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances .....                                                                | <b>38b</b>          | 19,334,699         |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>           | 0                  |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>           | 0                  |

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

|                                                                                                |                                                                                                                         |  |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:                |                                                                                                                         |  |
| <b>a</b> Schedule elected .....                                                                | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |  |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made .....               | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |  |
| <b>42</b> Amount of acceleration adjustment .....                                              | <b>42</b> 0                                                                                                             |  |
| <b>43</b> Excess installment acceleration amount to be carried over to future plan years ..... | <b>43</b> 0                                                                                                             |  |

## SCHEDULE SB ATTACHMENTS

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### Schedule SB – Statement by Enrolled Actuary

|                          |                                     |
|--------------------------|-------------------------------------|
| <b>Plan Sponsor</b>      | Black & Decker (U.S.) Inc.          |
| <b>EIN/PN</b>            | 52-1127357/013                      |
| <b>Plan Name</b>         | Stanley Black & Decker Pension Plan |
| <b>Valuation Date</b>    | January 1, 2013                     |
| <b>Enrolled Actuary</b>  | Jeannie A. Mandell                  |
| <b>Enrollment Number</b> | 14-06089                            |

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

The plan sponsor has elected to not apply corridor extensions under HATFA for funding (IRC §430) or benefit restriction purposes (IRC §436) for the 2013 plan year. Thus corridors for the 2013 plan year are set at 85%/115%.

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 13 Carryover Balances and Prefunding Balances as of January 1, 2013

Effective December 31, 2012, the following plans merged into the Stanley Black & Decker, Inc. Pension Plan. Listed below are Carryover and Prefunding balances for each plan as of January 1, 2013.

| Plan Name                                                                                                                  | Plan EIN/PN           | Funding Standard<br>Carry Over Balance | Prefunding Balance |
|----------------------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------|--------------------|
| Best Lock Corporation Employees' Pension Plan (BL)                                                                         | 35-1842918/002        | \$ 249,116                             | \$ 0               |
| Pension Plan for Employees of Lista International Corporation (L)                                                          | 04-2440593/001        | \$ 0                                   | \$ 43              |
| National Manufacturing Co. Pension Plan (N)                                                                                | 36-1524190/001        | \$ 0                                   | \$ 0               |
| Retirement Plan for Hourly Employees of Price Pfister, Inc. (PP)                                                           | 52-1127357/053        | \$ 0                                   | \$ 211,279         |
| Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation (PC)                                                | 52-1127357/055        | \$ 0                                   | \$ 0               |
| Pension Plan for Employees of Sargent & Greenleaf, Inc. (S&G)                                                              | 52-1127357/037        | \$ 0                                   | \$ 0               |
| Pension Plan for Hourly Employees of the True Temper Sports Division Represented by the United Steelworkers of America(TT) | 52-1127357/045        | \$ 548,687                             | \$ 0               |
| <b>Total Merged into Stanley Black &amp; Decker, Inc. Pension Plan</b>                                                     | <b>52-1127357/013</b> | <b>\$ 797,803</b>                      | <b>\$ 211,322</b>  |

Plan Name: Stanley Black & Decker Pension Plan  
 EIN / PN: 52-1127357 / 013  
 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 13

Line 13 Adjusted for Merger

| Plan Name                                                      | Plan EIN/PN    | Funding Standard<br>Carry Over Balance | Prefunding Balance <sup>1</sup> |
|----------------------------------------------------------------|----------------|----------------------------------------|---------------------------------|
| Line 13 without adjustment                                     |                | \$ 0                                   | \$ 93,881,131                   |
| Total Merged into Stanley Black &<br>Decker, Inc. Pension Plan | 52-1127357/013 | \$ 797,803                             | \$ 349,639                      |
| Line 13 with adjustment                                        |                | \$ 797,803                             | \$ 94,230,770                   |

<sup>1</sup> Prefunding balances include amounts added to the prefunding balances for excess 2012 contributions with interest (\$18,289 for BL, \$7,605 for L, \$20,946 for N, \$17,951 for PC, \$44,873 for PP, \$14,878 for S&G and \$13,775 for TT.)

Plan Name: Stanley Black & Decker Pension Plan  
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Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

### Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2013

The average retirement age for Line 22 was calculated by weighting each plan's weighted average retirement by percentage of active employees within each plan.

| (a)<br>Plan                                                                                                            | (b)<br>Number of<br>Active<br>Participants | (c)<br>Plan's<br>Weighted<br>Average | Product (d)<br>(b)/3,454 x (c) |
|------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------|--------------------------------|
| Best Lock Corporation Employees' Pension Plan                                                                          | 131                                        | 63.29                                | 2.400                          |
| Pension Plan for Employees of Lista International Corporation                                                          | 141                                        | 65.00                                | 2.653                          |
| National Manufacturing Co. Pension Plan                                                                                | 3                                          | 62.10                                | 0.053                          |
| Retirement Plan for Hourly Employees of Price Pfister, Inc.                                                            | 0                                          | 65.00                                | 0.000                          |
| Retirement Plan for Hourly-Rated Employees of Porter Cable Corporation                                                 | 227                                        | 60.36                                | 3.966                          |
| Pension Plan for Employees of Sargent & Greenleaf, Inc.                                                                | 86                                         | 63.29                                | 1.575                          |
| Pension Plan for Hourly Employees of the True Temper Sports Division Represented by the United Steelworkers of America | 0                                          | 65.00                                | 0.000                          |
| Stanley Black & Decker, Inc. Pension Plan                                                                              | 2,866                                      | 61.90                                | 51.36                          |
| Total                                                                                                                  | 3,454                                      |                                      | 62.007                         |
| Rounded for Schedule SB item 22                                                                                        |                                            |                                      | 62                             |

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Best Lock Corporation Employees' Pension Plan and**  
**Pension Plan for Employees of Sargent & Greenleaf, Inc.**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)<br>Age       | (b)<br>Rate | (c)<br>Weight | Product (d)<br>(a) x (b) x (c) |
|------------------|-------------|---------------|--------------------------------|
| 55               | 2.00%       | 1,000,000     | 1.100000                       |
| 56               | 2.00%       | 980,000       | 1.097600                       |
| 57               | 2.00%       | 960,400       | 1.094856                       |
| 58               | 2.00%       | 941,192       | 1.091783                       |
| 59               | 2.00%       | 922,368       | 1.088394                       |
| 60               | 5.00%       | 903,921       | 2.711762                       |
| 61               | 10.00%      | 858,725       | 5.238221                       |
| 62               | 20.00%      | 772,852       | 9.583368                       |
| 63               | 10.00%      | 618,282       | 3.895175                       |
| 64               | 20.00%      | 556,454       | 7.122607                       |
| 65               | 50.00%      | 445,163       | 14.467795                      |
| 66               | 50.00%      | 222,581       | 7.345188                       |
| 67               | 100.00%     | 111,291       | 7.456479                       |
| Weighted Average |             |               | 63.29                          |

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

# SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**National Manufacturing Co. Pension Plan**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)                     | (b)                                                           | (c)                                                                                                                | (d)                                                          | (e)                                                                                                       | (f)                                                | (g)              |
|-------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------|------------------|
|                         | Retirement<br>Assumption<br>As Fraction<br>Those<br>Attaining | Fraction<br>Of Those<br>Attaining<br>Earliest<br>Retirement<br>Age Still<br>Not Retired<br>At Beginning<br>Of Year | Fraction<br>Of Original<br>Group<br>Retiring<br>At Age Shown | Fraction<br>Of Those<br>Attaining<br>Earliest<br>Retirement<br>Age Still Not<br>Retired At<br>End of Year | Ages With<br>Non Zero<br>Retirement<br>Probability | (d) x (f)        |
| <u>Age</u>              | <u>Age Shown</u>                                              | <u>Of Year</u>                                                                                                     | <u>At Age Shown</u>                                          | <u>End of Year</u>                                                                                        | <u>Probability</u>                                 | <u>(d) x (f)</u> |
| 55                      | 0.0500                                                        | 1.0000                                                                                                             | 0.0500                                                       | 0.9500                                                                                                    | 55                                                 | 2.7500           |
| 56                      | 0.0500                                                        | 0.9500                                                                                                             | 0.0475                                                       | 0.9025                                                                                                    | 56                                                 | 2.6600           |
| 57                      | 0.0500                                                        | 0.9025                                                                                                             | 0.0451                                                       | 0.8574                                                                                                    | 57                                                 | 2.5707           |
| 58                      | 0.0500                                                        | 0.8574                                                                                                             | 0.0429                                                       | 0.8145                                                                                                    | 58                                                 | 2.4882           |
| 59                      | 0.0500                                                        | 0.8145                                                                                                             | 0.0407                                                       | 0.7738                                                                                                    | 59                                                 | 2.4013           |
| 60                      | 0.0500                                                        | 0.7738                                                                                                             | 0.0387                                                       | 0.7351                                                                                                    | 60                                                 | 2.3220           |
| 61                      | 0.1000                                                        | 0.7351                                                                                                             | 0.0735                                                       | 0.6616                                                                                                    | 61                                                 | 4.4835           |
| 62                      | 0.2500                                                        | 0.6616                                                                                                             | 0.1654                                                       | 0.4962                                                                                                    | 62                                                 | 10.2548          |
| 63                      | 0.2500                                                        | 0.4962                                                                                                             | 0.1240                                                       | 0.3722                                                                                                    | 63                                                 | 7.8120           |
| 64                      | 0.2500                                                        | 0.3722                                                                                                             | 0.0931                                                       | 0.2792                                                                                                    | 64                                                 | 5.9520           |
| 65                      | 0.5000                                                        | 0.2792                                                                                                             | 0.1396                                                       | 0.1396                                                                                                    | 65                                                 | 9.0740           |
| 66                      | 0.5000                                                        | 0.1396                                                                                                             | 0.0698                                                       | 0.0698                                                                                                    | 66                                                 | 4.6068           |
| 67                      | 0.5000                                                        | 0.0698                                                                                                             | 0.0349                                                       | 0.0349                                                                                                    | 67                                                 | 2.3383           |
| 68                      | 0.5000                                                        | 0.0349                                                                                                             | 0.0174                                                       | 0.0175                                                                                                    | 68                                                 | 1.1832           |
| 69                      | 1.0000                                                        | 0.0175                                                                                                             | 0.0175                                                       | 0.0000                                                                                                    | 69                                                 | 1.2075           |
| <b>Weighted Average</b> |                                                               |                                                                                                                    |                                                              |                                                                                                           |                                                    | <b>62.10</b>     |

Plan Name: Stanley Black & Decker Pension Plan  
 EIN / PN: 52-1127357 / 013  
 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Retirement Plan for Hourly-Rated Employees of Porter-Cable Corporation**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)<br>Age       | (b)<br>Rate | (c)<br>Weight | Product (d)<br>(a) x (b) x (c) |
|------------------|-------------|---------------|--------------------------------|
| 55               | 15.00%      | 1.0000        | 8.250                          |
| 56               | 4.50%       | 0.8500        | 2.142                          |
| 57               | 4.50%       | 0.8118        | 2.082                          |
| 58               | 4.50%       | 0.7752        | 2.023                          |
| 59               | 4.50%       | 0.7403        | 1.966                          |
| 60               | 25.00%      | 0.7070        | 10.605                         |
| 61               | 35.00%      | 0.5303        | 11.321                         |
| 62               | 15.00%      | 0.3447        | 3.205                          |
| 63               | 50.00%      | 0.2930        | 9.229                          |
| 64               | 35.00%      | 0.1465        | 3.281                          |
| 65               | 50.00%      | 0.0952        | 3.095                          |
| 66               | 75.00%      | 0.0476        | 2.357                          |
| 67               | 50.00%      | 0.0119        | 0.399                          |
| 68               | 50.00%      | 0.0060        | 0.202                          |
| 69               | 50.00%      | 0.0030        | 0.103                          |
|                  | 15.00%      | 1.0000        | 8.250                          |
| Weighted Average |             |               | 60.36                          |

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

**Schedule SB, Line 22**  
**Description of Weighted Average Retirement Age**  
**as of January 1, 2013**  
**Stanley Black & Decker Pension Plan**

The average retirement age for this group was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table. All retirements are assumed to occur at the beginning of the year.

| (a)<br>Age       | (b)<br>Rate | (c)<br>Weight | Product (d)<br>(a) x (b) x (c) |
|------------------|-------------|---------------|--------------------------------|
| 55               | 7.50%       | 1.0000        | 4.125                          |
| 56               | 7.50%       | 0.9250        | 3.885                          |
| 57               | 7.50%       | 0.8556        | 3.657                          |
| 58               | 7.50%       | 0.7915        | 3.442                          |
| 59               | 7.50%       | 0.7321        | 3.239                          |
| 60               | 10.00%      | 0.6772        | 4.063                          |
| 61               | 10.00%      | 0.6095        | 3.717                          |
| 62               | 20.00%      | 0.5485        | 6.801                          |
| 63               | 15.00%      | 0.4388        | 4.146                          |
| 64               | 15.00%      | 0.3730        | 3.580                          |
| 65               | 40.00%      | 0.3170        | 8.243                          |
| 66               | 20.00%      | 0.1902        | 2.511                          |
| 67               | 20.00%      | 0.1522        | 2.039                          |
| 68               | 20.00%      | 0.1217        | 165.57                         |
| 69               | 35.00%      | 0.0974        | 2.352                          |
| 70               | 100.00      | 0.0633        | 4.431                          |
| Weighted Average |             |               | 61.90                          |

**Retirement** - Lista, Price Pfister, and True Temper employees and terminated vested participants were assumed to retire at normal retirement age.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

**Schedule SB, Line 26**  
**Schedule of Active Participant Data for Frozen Plans**  
**as of January 1, 2013**

Stanley Black & Decker Pension Plan  
52-1127357 / 013  
Black & Decker (U.S.) Inc.  
January 1, 2013

Plan Name:  
EIN / PN:  
Plan Sponsor:  
Valuation Date:

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2013

| Type of Base | Date Established | Initial Amount | Remaining Amortization Period (Years) | Outstanding Balance | Amortization Payment |
|--------------|------------------|----------------|---------------------------------------|---------------------|----------------------|
| 1 Shortfall  | 01/01/2013       | 31,929,670     | 7                                     | 31,929,670          | 5,328,806            |
| 2 Shortfall  | 01/01/2012       | (104,608,083)  | 6                                     | (94,009,147)        | (17,761,402)         |
| 3 Shortfall  | 01/01/2011       | 56,800,308     | 5                                     | 42,507,549          | 9,340,471            |
| 4 Shortfall  | 01/01/2010       | 40,413,506     | 4                                     | 25,168,165          | 6,754,179            |
| 5 Shortfall  | 01/01/2009       | 97,998,641     | 3                                     | 52,704,085          | 18,421,625           |
| 6 Shortfall  | 01/01/2008       | 968,835        | 2                                     | 359,802             | 184,237              |
| Total        |                  |                |                                       | 58,660,124          | 22,267,916           |

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

#### Interest rate basis:

- |                       |                 |
|-----------------------|-----------------|
| ● Applicable month    | September       |
| ● Interest rate basis | 3-Segment Rates |

#### Interest rates:

- |                           | Reflecting<br>Corridors | Not Reflecting<br>Corridors |
|---------------------------|-------------------------|-----------------------------|
| ● First segment rate      | 4.94%                   | 1.75%                       |
| ● Second segment rate     | 6.15%                   | 4.62%                       |
| ● Third segment rate      | 6.76%                   | 5.72%                       |
| ● Effective interest rate | 6.27%                   |                             |

#### Annual rates of increase

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| ● Compensation:                     | Not Applicable, benefits are frozen |
| ● Future Social Security wage bases | Not Applicable, benefits are frozen |

#### Assumed cost of living adjustment

None.

#### Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

#### Plan-Related Expenses

The amount included this year for administrative expenses is \$4,356,276, which is the prior year actual administrative expenses with a \$0 adjustment to reflect expected changes in PBGC variable premiums.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## SCHEDULE SB ATTACHMENTS

### Mortality

For all participants: The prescribed mortality assumption under IRC §430(h)(3)(A) using static tables with separate mortality rates for annuitants and non-annuitants was used for all participants.

### Retirement

For purposes of determining the Funding Target (disregarding at-risk assumptions), the rates at which active participants are assumed to retire by age and gender are shown below.

#### Retirement – Black & Decker Pension Plan

The rates at which participants are assumed to retire by age and gender are shown below:

| Age     | Males and Females |
|---------|-------------------|
| 55 - 59 | 7.50%             |
| 60 - 61 | 10.00%            |
| 62      | 20.00%            |
| 63 - 64 | 15.00%            |
| 65      | 40.00%            |
| 66 - 68 | 20.00%            |
| 69      | 35.00%            |
| 70+     | 100.00%           |

Terminated vested participants are assumed to commence benefits at age 62.

**Retirement - Best Lock, and Sargent & Greenleaf -** The rates at which participants are assumed to retire by age and gender are shown below:

| Percentage retiring during the year |       |         |
|-------------------------------------|-------|---------|
| Age                                 | Males | Females |
| 55 - 59                             | 2%    | 2%      |
| 60                                  | 5%    | 5%      |
| 61                                  | 10%   | 10%     |
| 62                                  | 20%   | 20%     |
| 63                                  | 10%   | 10%     |
| 64                                  | 20%   | 20%     |
| 65 - 66                             | 50%   | 50%     |
| 67+                                 | 100%  | 100%    |

Terminated vested participants are assumed to retire at age 65.

**Retirement - Lista, Price Pfister, and True Temper employees and terminated vested participants** were assumed to retire at normal retirement age.

Plan Name: Stanley Black & Decker Pension Plan  
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Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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**Retirement - National Manufacturing** – The rates at which participants are assumed to retire are shown below:

| Attained Age | Percentage |
|--------------|------------|
| 55-60        | 5%         |
| 61           | 10%        |
| 62-64        | 25%        |
| 65-68        | 50%        |
| 69+          | 100%       |

Terminated vested participants are assumed to retire at age 60.

**Retirement - Porter Cable** – The rates at which participants retire by age are shown below:

| Percentage retiring during the year |         |
|-------------------------------------|---------|
| Age                                 | Rate    |
| 55                                  | 15.00%  |
| 56 - 59                             | 4.50%   |
| 60                                  | 25.00%  |
| 61                                  | 35.00%  |
| 62                                  | 15.00%  |
| 63                                  | 50.00%  |
| 64                                  | 35.00%  |
| 65                                  | 50.00%  |
| 66                                  | 75.00%  |
| 67 - 69                             | 50.00%  |
| 70+                                 | 100.00% |

For terminated vested participants, if vesting service is greater than or equal to 10 years then assumed to retire at age 60, else age 65.

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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### Disability Rates – Black & Decker Pension Plan

The rates at which participants are assumed to become disabled are shown below:

| Age | Males   | Females |
|-----|---------|---------|
| 15  | 0.0225% | 0.0225% |
| 20  | 0.0225% | 0.0225% |
| 25  | 0.0225% | 0.0225% |
| 30  | 0.0225% | 0.0300% |
| 35  | 0.0300% | 0.0525% |
| 40  | 0.0600% | 0.0975% |
| 45  | 0.1200% | 0.1800% |
| 50  | 0.2475% | 0.3000% |
| 55  | 0.5175% | 0.4800% |
| 60  | 0.8625% | 0.6750% |
| 65+ | 0.0000% | 0.0000% |

### Disability Rates - National Manufacturing

The rates at which participants are assumed to become disabled by age and gender are shown below:

| Attained Age | Males | Females |
|--------------|-------|---------|
| 25           | 0.04% | 0.04%   |
| 30           | 0.04% | 0.06%   |
| 35           | 0.05% | 0.10%   |
| 40           | 0.11% | 0.18%   |
| 45           | 0.22% | 0.34%   |
| 50           | 0.46% | 0.56%   |
| 55           | 0.96% | 0.89%   |
| 60           | 1.61% | 1.97%   |
| 64           | 2.29% | 1.02%   |

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

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### Disability Rates - Porter Cable

The rates at which participants become disabled are shown below:

| Percentage becoming disabled during the year |         |
|----------------------------------------------|---------|
| Age                                          | Rate    |
| 15                                           | 0.0602% |
| 20                                           | 0.0602% |
| 25                                           | 0.0901% |
| 30                                           | 0.1159% |
| 35                                           | 0.1583% |
| 40                                           | 0.2658% |
| 45                                           | 0.4260% |
| 50                                           | 0.7453% |
| 55                                           | 1.2267% |
| 60                                           | 1.9490% |
| 63+                                          | 0.0000% |

**Disability Rates** – Best Lock, Lista, Price Pfister, Sargent & Greenleaf, True Temper – Not applicable or none assumed.

### Future Increases in Maximum Benefits and Plan Compensation Limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC §415. Plan compensation is limited to the maximum presently allowed under IRC §401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

Plan Name: Stanley Black & Decker Pension Plan  
EIN / PN: 52-1127357 / 013  
Plan Sponsor: Black & Decker (U.S.) Inc.  
Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

### Representative Termination Rates (not due to disability, retirement, or mortality) – Black & Decker Pension Plan.

The rates at which participants are expected to terminate employment are shown below:

| Age | Years of Service |        |        |        |        |        |
|-----|------------------|--------|--------|--------|--------|--------|
|     | 0                | 1      | 2      | 3      | 4      | 5+     |
| ≤21 | 43.75%           | 43.75% | 43.75% | 43.75% | 43.75% | 43.75% |
| 25  | 35.75%           | 35.75% | 35.75% | 35.75% | 35.75% | 35.75% |
| 30  | 31.75%           | 29.75% | 27.50% | 27.00% | 27.00% | 27.00% |
| 35  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 19.75% |
| 40  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 14.00% |
| 45  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 9.75%  |
| 50  | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 6.75%  |
| 55+ | 31.75%           | 29.75% | 27.50% | 25.50% | 23.75% | 5.50%  |

### Representative Termination Rates - Best Lock

The rates at which participants are assumed to leave the Company by age and gender are shown below:

| Percentage leaving during the year |       |         |
|------------------------------------|-------|---------|
| Attained Age                       | Males | Females |
| 25                                 | 5.2%  | 5.2%    |
| 30                                 | 4.9%  | 4.9%    |
| 35                                 | 4.5%  | 4.5%    |
| 40                                 | 3.8%  | 3.8%    |
| 45                                 | 3.2%  | 3.2%    |
| 50                                 | 1.5%  | 1.5%    |
| 55                                 | 0.3%  | 0.3%    |
| 60                                 | 0.0%  | 0.0%    |
| 65                                 | 0.0%  | 0.0%    |

Plan Name: Stanley Black & Decker Pension Plan  
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 Plan Sponsor: Black & Decker (U.S.) Inc.  
 Valuation Date: January 1, 2013

## SCHEDULE SB ATTACHMENTS

### Representative Termination Rates - National Manufacturing

The rates at which participants are assumed to leave the company by age and gender are shown below:

| Percentage leaving during the year |       |         |
|------------------------------------|-------|---------|
| Attained Age                       | Males | Females |
| 25                                 | 10.4% | 14.1%   |
| 30                                 | 6.4%  | 9.0%    |
| 35                                 | 5.0%  | 7.4%    |
| 40                                 | 3.9%  | 5.9%    |
| 45                                 | 2.8%  | 4.3%    |
| 50                                 | 1.7%  | 2.5%    |
| 55                                 | 0.3%  | 0.4%    |
| 57+                                | 0.0%  | 0.0%    |

### Representative Termination Rates - Sargent & Greenleaf

The rates at which participants are assumed to leave the Company by age and gender are shown below:

| Age | Males   | Females |
|-----|---------|---------|
| 20  | 11.630% | 11.630% |
| 25  | 11.630% | 11.630% |
| 30  | 9.969%  | 9.969%  |
| 35  | 8.307%  | 8.307%  |
| 40  | 6.646%  | 6.646%  |
| 45  | 4.984%  | 4.984%  |
| 50  | 3.323%  | 3.323%  |
| 55  | 1.661%  | 1.661%  |
| 60  | 0.000%  | 0.000%  |

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### Representative Termination Rates – Porter Cable

| Age | Percentage leaving during the year |         |         |        |
|-----|------------------------------------|---------|---------|--------|
|     | Years of Service                   |         |         |        |
|     | 0                                  | 1       | 2       | 3+     |
| 19  | 40.100%                            | 30.075% | 20.050% | 6.700% |
| 20  | 39.800%                            | 29.850% | 19.900% | 6.600% |
| 25  | 35.900%                            | 26.925% | 17.950% | 5.300% |
| 30  | 34.700%                            | 26.025% | 17.350% | 4.900% |
| 35  | 33.800%                            | 25.350% | 16.900% | 4.600% |
| 40  | 32.000%                            | 24.000% | 16.000% | 4.000% |
| 45  | 30.800%                            | 23.100% | 15.400% | 3.600% |
| 50  | 26.600%                            | 19.950% | 13.300% | 2.200% |
| 55  | 24.200%                            | 18.150% | 12.100% | 1.400% |
| 60+ | 0.000%                             | 0.000%  | 0.000%  | 0.000% |

**Termination Rates** – Lista, Price Pfister, and True Temper – Not applicable.

**Form of Payment** - Black & Decker Pension Plan, Lista, National Manufacturing, Porter Cable, and Sargent & Greenleaf

Participants are assumed to elect single life annuities.

**Form of Payment** - Best Lock

Married participants are assumed to elect the unreduced 50% joint and survivor annuity and single participants are assumed to elect the life only annuity.

### Marriage

For purposes of valuing the pre-retirement surviving spouse's benefit, 85% of males and 50% of females are assumed to be married and male spouses are assumed to be 3 years older than female spouses.

### Employees

It was assumed there will be no new or rehired employees.

### Plan Compensation

Not Applicable.

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### Valuation Date

First day of plan year.

### Funding Target

Present value of accrued benefits.

### Target Normal Cost

Since the Plan has no participants accruing benefits, the target normal cost consists entirely of plan-related expenses.

### Asset Method

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2012 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

As of January 1, 2013, the market value of assets for Lista were merged into the consolidated plan assets without any smoothing.

### Participant Data

Census data was supplied by T Rowe Price and Wells Fargo on behalf of Stanley Black & Decker, Inc. as of January 1, 2013.

### Benefits not Included in Valuation

All benefits described in the Plan Provisions section of this report were valued based on discussions with Stanley Black & Decker, Inc. regarding the likelihood that these benefits will be paid. Towers Watson has reviewed the plan provisions with Stanley Black & Decker, Inc. and based on that review, is not aware of any significant benefits required to be valued that were not.

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## **SCHEDULE SB ATTACHMENTS**

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### **Significant Events since Last Actuarial Valuation Report**

- Effective December 31, 2012, the plan name changed from the Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were all merged into the Stanley Black & Decker Pension Plan.
- The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totaling \$125,990,245.
- The sale of the HHI division occurred in December 2012

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### Changes in Assumptions and Methods since Last Actuarial Valuation

The following changes in assumptions were made as part of this valuation:

- The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of September 2011 (January 2012 for Porter Cable) to September 2012, with MAP-21 corridor, as applicable.
- The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.
- For National Manufacturing and Price Pfister there was a change from disabled mortality to healthy mortality.
- For all groups, for purposes of valuing the pre-retirement surviving spouse's benefit, 85% of males and 50% of females are assumed to be married and male spouses are assumed to be 3 years older than female spouses. This assumption varied by group in previous valuations.
- As of January 1, 2013, the market value of assets for Lista were merged into the consolidated plan without any smoothing.

Plan Name: Stanley Black & Decker Pension Plan  
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## Schedule SB, Part V Summary of Plan Provisions

### Effective Date and Most Recent Amendment

The plan was amended and restated January 1, 2007. Most recently amended effective December 31, 2012.

### Eligibility

One year of eligible service is required for participation. All participants under a prior plan before January 1, 1992 are automatically included. Participation closed to new employees hired on or after January 1, 2007.

### Normal Retirement

- |    |                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|----|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. | Eligibility       | Age 65.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| b. | Benefit           | <p>1.0% of Final Average Pay (base percentage) plus 0.425% of Final Average Pay in excess of Covered Compensation (excess percentage), times Benefit Service Credit after December 31, 1991. Service for the excess formula is limited to 35 years, including service under the Prior Plan.</p> <p>plus</p> <p>The benefit calculated under the Prior Plan, as of December 31, 1991 multiplied by Final Average Pay at date of termination divided by Final Average Pay at December 31, 1991, not less than one.</p> |
| c. | Commencement Date | Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.                                                                                                                                                                                                                                                                                                                                                                                     |

|                 |                                     |
|-----------------|-------------------------------------|
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- d. Form of Payment For a single participant the normal form of payment is a monthly pension ceasing at the retired participant's death. For a married participant the normal form of payment is a reduced monthly pension which allows for a continuation of payments equal to one-half of the reduced pension to the surviving spouse after the participant's death. Any participant may elect, by written application, to receive the normal benefit or other optional forms of benefit payment. Optional forms of payment include: life annuity, 50%, 66-2/3%, 75% and 100% joint and survivor annuities, 5-year or 10-year certain and continuous annuity, and Level Income Annuity (with Social Security). If the present value of Accrued Pension is less than or equal to \$1,000, a cash-out payment will be made.

### Early Retirement

- a. Eligibility Age 55 and five years of Vesting Service Credit. Age 55 for employees covered under a prior plan whose early retirement eligibility was age 55 without regard to service.
- b. Benefit Normal Retirement benefit decreased by 1/4% per month for the first 60 months and by 1/3% per month for the next 60 months that commencement precedes age 65.
- For employees meeting the Rule of 90 requirement (age plus Vesting Service Credit equal or exceed 90), no reduction for retirement between ages 62 and 65. Accrued Pension decreased by 1/4% per month for the first 24 months and by 1/3% per month for the next 60 months that commencement precedes age 62.
- c. Commencement Date Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.
- d. Form of Payment Same as for normal retirement.

### Disability Retirement

- a. Eligibility Disability while in employment and before age 65.
- b. Benefit The member may elect to begin receiving any Termination Benefit or Early Retirement Benefit for which he or she may qualify.
- c. Commencement Date Payments commence as soon as practicable following the approval of the application for benefits.
- d. Form of Payment Same as for normal retirement.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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### Death Prior to Retirement

- |                      |                                                                                                                                                                                                                                                                                                         |
|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | On the death of an active, married participant who has completed at least five years of service or a vested terminated married participant.                                                                                                                                                             |
| b. Benefit           | Return of Prior Plan accumulated contributions (if applicable) with credited interest. The spouse will receive a monthly annuity based on the Joint and 50% Survivor Annuity Option.                                                                                                                    |
| c. Commencement Date | The benefit will commence:<br>If the participant had not attained age 55 at death, on the date he would have attained 55 had he lived, or If the participant was eligible for Early Retirement, immediately. The spouse may elect to defer commencement up to the participant's normal retirement date. |
| d. Form of Payment   | The surviving spouse's benefit is paid monthly for the life of the surviving spouse.                                                                                                                                                                                                                    |

### Death After Retirement

- |                      |                                                                                                                            |
|----------------------|----------------------------------------------------------------------------------------------------------------------------|
| a. Benefit           | The beneficiary will be paid in accordance with the form of retirement payment selected by the participant at retirement.  |
| b. Commencement Date | Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs. |

### Termination of Employment

- |                      |                                                                                                                                                                                                                                                                                                                                                                          |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | 100% vested with five or more years of Vesting Service Credit, or at age 65, regardless of service.                                                                                                                                                                                                                                                                      |
| b. Benefit           | Accrued pension based on Benefit Service Credit to termination date. Benefit is payable starting at age 65. Benefits may commence as early as age 55 decreased by 3/4% per month for the first 48 months and 5/12% per month in excess of 48 months prior to age 65. An employee's vested benefit in the Plan cannot be less than his vested benefit under a Prior Plan. |
| c. Commencement Date | Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date, or the participant may elect to have payments commence as early as the first day of the month coinciding with or next following his attainment of age 55, in an amount reduced for early commencement.                                           |
| d. Form of Payment   | The forms of payment available are the same as for normal retirement.                                                                                                                                                                                                                                                                                                    |

|                 |                                     |
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### Change in Plan Provisions Since Last Actuarial Valuation

- Effective December 31, 2012, the plan name changed from The Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National, Porter Cable, Price Pfister, Sargent and Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- As a result of a bulk lump sum offering, there was a settlement charge of \$11,058,613 in December 2012 due to the lump sums paid for The Black & Decker Pension Plan and the Porter Cable pension plan.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
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| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

# SCHEDULE SB ATTACHMENTS

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## Hartford Division Emhart

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**Effective Date** The plan was amended and restated effective January 1, 2007. Most recently amended effective December 31, 2012. Initially effective January 1, 1965.

**Eligibility Requirements** Covered employees are eligible immediately.

### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit 0.75% of Average Compensation multiplied by Years of Benefit Service plus 0.75% of Average Compensation in excess of \$6,000 multiplied by Years of Benefit Service.
- c. Commencement Date Payments commence on the first day of the month coincident with or following the participant's normal or actual retirement date.
- d. Form of Payment
  - Normal Single Life Annuity for unmarried participants, 50% Joint and Survivor Annuity for married participants.
  - Optional Single Life Annuity, 50%, 75%, and 100% Joint and Survivor Annuities. If the present value of the accrued benefit is less than or equal to \$1,000, a cash-out payment will be made.

### Early Retirement

- a. Eligibility Age 55 and ten years of Service.
- b. Benefit Actuarial equivalent of accrued normal retirement pension as of early retirement date or date benefit is to commence, if later.

### Disability Retirement

- a. Eligibility Total and permanent in the opinion of a qualified physician. In addition, participant must be eligible to receive Social Security benefits.
- b. Benefit Participant election of (1) or (2):
  - (1) A benefit equal to Accrued Benefit deferred to Normal Retirement Date or
  - (2) Actuarial Equivalent of accrued benefit computed at the date of disability payable immediately.

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Valuation Date: January 1, 2013

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### Late Retirement

- a. Eligibility No maximum age after age 65.
- b. Benefit Greater of:
  - (1) Accrued Benefit on Late Retirement Date or
  - (2) Accrued Benefit on Normal Retirement Date actuarially increased

### Vesting

- a. Eligibility Five years of Service.
- b. Benefit Starting at age 65, a pension calculated as for normal retirement, based on Benefit Service to date of termination.

### Death Benefit After Retirement

- a. Eligibility Qualified married participant with vested accrued benefit.
- b. Benefit The beneficiary will be paid in accordance with the form of retirement payment selected by the participant at retirement.
- c. Commencement Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs.

|                 |                                     |
|-----------------|-------------------------------------|
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## SCHEDULE SB ATTACHMENTS

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### Death Benefit Before Retirement

- |    |              |                                                                                                                                                                                                                                                                                                                                 |
|----|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. | Eligibility  | Five years of Service.                                                                                                                                                                                                                                                                                                          |
| b. | Benefit      | The spouse will receive a monthly annuity based on the 50% Joint and Survivor annuity option.                                                                                                                                                                                                                                   |
| c. | Commencement | If the spouse elects to receive benefits early, payments will be made no later than the participant's Earliest Retirement age (if the participant dies prior to Earliest Retirement age). Otherwise, payments will commence at the time the participant would have attained the earlier of his Normal Retirement age or age 62. |

### Change in Plan Provisions Since Last Actuarial Valuation

- Effective December 31, 2012, the plan name changed from The Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National, Porter Cable, Price Pfister, Sargent and Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- As a result of a bulk lump sum offering, there was a settlement charge of \$11,058,613 in December 2012 due to the lump sums paid for The Black & Decker Pension Plan and the Porter Cable pension plan.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
|-----------------|-------------------------------------|
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# SCHEDULE SB ATTACHMENTS

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## Former Hartford Participants

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### Effective Date

- a. Original September 1, 1958. The plan was amended and restated January 1, 2007. Most recently amended effective December 31, 2012.
- b. Eligibility Covered employees are eligible immediately.

### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The appropriate amount shown below multiplied by years of Credited Service:

| Date of Retirement       | Monthly Benefit Accrual Rate |
|--------------------------|------------------------------|
| Prior to 09/03/1979      | \$10.00                      |
| 09/13/1979 to 09/12/1980 | \$11.00                      |
| 09/13/1980 to 09/12/1981 | \$12.00                      |
| 09/12/1981 to 07/06/1986 | \$12.50                      |
| 07/07/1986 to 07/06/1987 | \$13.50                      |
| 07/07/1987 to 07/06/1989 | \$14.00                      |
| 07/07/1989 to 07/06/1990 | \$15.00                      |
| 07/07/1990 to 07/06/1991 | \$15.50                      |
| 07/07/1991 to 07/06/1992 | \$16.00                      |
| 07/07/1992 to 07/06/1994 | \$17.50                      |
| 07/07/1994 to 07/06/1995 | \$18.00                      |
| 07/07/1995 to 07/06/1996 | \$18.50                      |
| 07/07/1996 to 07/06/1997 | \$19.00                      |
| 07/07/1997 to 07/06/1998 | \$19.50                      |
| 07/07/1998 to 06/15/1999 | \$20.50                      |
| 06/16/1999 and after     | \$22.50                      |

NOTE: Credited Service for active employees, on the sale date, with service between 3 and 5 years as of December 31, 1999 was set equal to 5.

- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.

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d. Form of Payment

- Normal Life Annuity for unmarried employees, 50% Contingent Annuitant for married employees.
- Optional Single Life Annuity, 50% and 75% Contingent Annuitant option; Social Security option; Life Annuity option, lump sum.

### Early Retirement

- a. Eligibility Age 55 and ten years of Continuous Service.
- b. Benefit Accrued normal retirement pension as of early retirement date commencing at age 62 or reduced if commencing before age 62 by  $\frac{1}{3}$  of 1% for each month that the benefit commences before age 62.  
Note: Active employees, between June 16, 1999 and December 31, 1999, were eligible for early retirement if they were age 54 with ten or more years of continuous service as of December 31, 1999. Benefits were unreduced for employees age 59 with ten or more years of continuous service.

### Disability Retirement

- a. Eligibility Ten years of Continuous Employment.
- b. Benefit If not eligible to receive a social security disability benefit, twice the normal retirement benefit accrued to date of disability is payable to age 65. After age 65, normal retirement benefit accrued to date of disability is payable. If eligible to receive a social security disability benefit the normal retirement benefit accrued to date of disability is payable.

|                 |                                     |
|-----------------|-------------------------------------|
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### Vesting

- a. Eligibility Five years of Continuous Service.
- b. Benefit Starting at age 65, a pension calculated as for normal retirement, based on Credited Service to date of termination. If a former employee had ten years of Continuous Service, a reduced benefit is payable commencing between ages 55 and 65. The following schedule shows, for each whole age, the vested early retirement factors used in calculating the benefit:

| <b>Vested Early Retirement Factors</b> |               |            |               |
|----------------------------------------|---------------|------------|---------------|
| <b>Age</b>                             | <b>Factor</b> | <b>Age</b> | <b>Factor</b> |
| 55                                     | .387693       | 60         | .605340       |
| 56                                     | .422296       | 61         | .665827       |
| 57                                     | .460762       | 62         | .734114       |
| 58                                     | .503640       | 63         | .811485       |
| 59                                     | .551578       | 64         | .899490       |

### Preretirement Surviving Spouse's Benefit

- a. Eligibility Five years of Continuous Service and prior to commencement of retirement benefits. During the periods where a reduction in benefit charge is assessed for such coverage, employee can reject coverage but requires spouse's consent.
- b. Benefit For a vested active employee or former employee who dies after attaining age 55, the benefit is calculated as if the employee had retired on the first of the month in which he died with the automatic form of benefit in effect. For such employee who dies prior to attaining age 55, the benefit commences when the deceased employee would have attained age 55 and is calculated as if the employee had terminated employment on his date of death and commenced receiving a reduced deferred vested benefit at age 55 with the automatic form of benefit in effect. For employees who terminated prior to January 1, 1992, Benefits of employees and their surviving spouses are reduced to reflect the cost of the coverage during the period it is in effect, except that there is no charge while the employee is in active service after age 55 or during the deferral period after an employee retires early and defers commencement of his benefit.

|                 |                                     |
|-----------------|-------------------------------------|
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### Change in Plan Provisions Since Last Actuarial Valuation

- Effective December 31, 2012, the plan name changed from the Black & Decker Pension Plan to the Stanley Black & Decker Pension Plan.
- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.
- The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totalling \$125,990,245.
- The sale of the HHI division occurred in December 2012.

|                 |                                     |
|-----------------|-------------------------------------|
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# SCHEDULE SB ATTACHMENTS

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## Best Lock

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### Effective date and most recent amendment

The plan was originally effective September 1, 1989. The plan was amended and restated January 1, 2011. Most recently amended effective December 31, 2012. The Best Lock plan merged into the Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### Plan year

The twelve-month period ending December 31.

### Eligibility

Employees include persons actively employed by the Company on September 1, 1989 who completed at least one hour of service before September 1, 1989 or persons on an authorized leave of absence on September 1, 1989 or totally disabled on September 1, 1989. Employees are eligible to participate in the plan at the later of the attainment of age twenty-one, completion of one year of service, or September 1, 1989.

### Normal retirement benefit

Eligibility: A participant is eligible for normal retirement on his 65th birthday.

Benefit Formula: The normal retirement benefit for a participant is the product of:

- (i) 1% of participant's base pay
- (ii) The greater of:
  - (a) 2
  - (b) Elapsed time from date of hire to August 31, 1989, measured in years and complete months.

Commencement Date: The first day of the month immediately following the date the participant reaches age 65.

Normal Form of Benefit:

Single employees – Life annuity

Married employees – Unreduced 50% joint and survivor annuity and 75% joint and survivor.

Optional forms of payment are determined using UP-84 mortality table and 8% interest.

Joint and 75% survivor option is available, determined using the mortality table in Revenue Ruling 2001-62 and 5% interest and is actuarially equivalent to the Life Annuity.

|                 |                                     |
|-----------------|-------------------------------------|
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### **Late retirement**

Payment of normal retirement benefits may be deferred beyond the normal retirement date, provided that the participant completes 40 hours of service per month.

### **Early retirement benefit**

Eligibility: After attaining age 55 and 5 more or years of service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit, reduced by 5/12 of 1% for each full calendar month by which benefit commencement precedes the normal retirement date.

Form of payment: Same as for normal retirement.

### **Disability benefit**

None.

### **Vested benefits upon termination of service**

Eligibility: A participant whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit.

Termination Benefit: The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Vested benefits are payable as early as age 55, if the participant had five years of service at termination. Benefits payable prior to normal retirement date are reduced as for early retirement.

Form of payment: Same as for retirement.

### **Death benefits for participants not receiving benefits**

If a vested participant dies after becoming eligible for early retirement, a benefit equal to half of the participant's early retirement benefit is payable to the surviving spouse.

If an active vested participant dies prior to becoming eligible for early retirement, the above benefit is deferred to the date the participant would have become eligible for early retirement.

|                 |                                     |
|-----------------|-------------------------------------|
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### Pension increases

Not applicable.

### Plan participants' contributions

Not applicable.

### Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### Future plan changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

### Change in Plan Provisions Since Last Actuarial Valuation

- Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
|-----------------|-------------------------------------|
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# **SCHEDULE SB ATTACHMENTS**

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## **Lista**

### **Effective date and most recent amendment**

The plan was originally effective January 1, 1979 and the plan was restated January 1, 2011. Most recently amended effective December 31, 2012. The Lista plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### **Plan year**

The twelve-month period ending December 31.

### **Eligibility**

Employees are eligible to participate in the plan upon completion of one year of service, defined as a 12-consecutive-month computation period in which an employee is credited with 1,000 or more hours of service. Computation period commences on employee's date of hire.

Participation in the plan is frozen as of August 1, 2004.

### **Average Annual Earnings**

Average Annual Earnings means the average of the participant's W-2 earnings during the highest five consecutive Plan Years during the participant's career.

### **Final Average Compensation**

Final average compensation is the average of the participant's W-2 earnings over the consecutive three year period ending on December 31 of the Plan Year coinciding with or immediately preceding the participant's termination of employment. Final Average Compensation shall not exceed Covered Compensation as defined under Section 401(l)(5)(E) of the Internal Revenue Code and earnings shall not exceed the Taxable Wage Base in any year.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Normal Retirement Benefit**

Eligibility: A participant is eligible for normal retirement on the first day of the month coinciding with the later of:

- (a) the participant's 65<sup>th</sup> birthday,
- (b) the earlier of either the fifth anniversary of Participation date or the completion of five years of Credited Service

Benefit Formula: The normal retirement benefit for a participant is 1.5% of Average Annual Earnings minus the lesser of:

- (a) 0.65% of Final Average Compensation
- (b) 0.75% of Average Annual Earnings, limited to Final Average Compensation, multiplied by years and months of credited service, to a maximum of 30 years.

Benefits are now frozen for all groups effective August 1, 2004.

Commencement Date: Participants whose employment has terminated shall have distribution of their benefits commence within sixty (60) days following their Normal Retirement Date, unless the Participants elects to defer receipt of his benefits.

The normal form of benefit is a life annuity. Actuarially equivalent optional forms are based upon the UP-84 mortality with a 3-year setback for beneficiaries at 7% interest.

Forms of payment:

Single employees – Life annuity, 10 years certain and life

Married employees – Life annuity, 50%, 66 <sup>2</sup>/<sub>3</sub>%, 75% and 100% joint and survivor annuity, and 10 years certain and life

Lump sums are available for amounts \$5,000 or less

### **Late Retirement**

A Late Retirement Benefit equal to greater of the Accrued Benefit determined at actual retirement date and the benefit available at the participant's Normal Retirement Date actuarially increased to actual retirement date is available for participants who continue employment after their Normal Retirement Date.

|                 |                                     |
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## **SCHEDULE SB ATTACHMENTS**

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### **Early Retirement Benefit**

Eligibility: After attaining age 55 and 5 years of Credited Service an employee is eligible for Early Retirement.

Benefit: The Early Retirement benefit is equal to the Accrued Benefit, reduced actuarially for payment prior to Normal Retirement Date.

Forms of payment: Same as for normal retirement.

### **Disability Benefit**

Not Applicable

### **Vested Benefits Upon Termination of Service**

Eligibility: A participant whose employment is terminated before retirement is eligible for a vested deferred retirement benefit, provided the participant has at least 5 years of credited service.  
Termination Benefit: The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Benefits payable prior to normal retirement date are reduced as for early retirement.

Forms of payment: Same as for normal retirement.

### **Death Benefits for Participants Not Receiving Benefits**

If a vested participant dies after becoming eligible for early retirement or a deferred vested benefit, the surviving spouse is entitled to an amount equal to the benefit the participant would have received had they terminated employment on the date of death and elected to receive benefits as a 50% Joint and Survivor annuity option. Monthly payments commence as of the later of the participant's date of death or age 55.

### **Pension Increases**

Not Applicable.

### **Plan Participants' Contributions**

Not Applicable.

|                 |                                     |
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### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions except as follows Towers Watson is not aware of any future plan changes which are required to be reflected.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
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# **SCHEDULE SB ATTACHMENTS**

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## **National Manufacturing**

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### **Effective date and most recent amendment**

Original: July 1, 1957

Most Recent Amendment: The plan was amended December 31, 2012. The National Manufacturing plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### **Eligibility**

Each participant who was in the plan prior to December 31, 1983 is eligible. Other employees become eligible to participate in the plan at the later of the attainment of age twenty-one and completion of one year of service with at least 1,000 hours of service with the Company.

No employee shall become a member under the plan after December 31, 2006.

### **Normal retirement**

Eligibility: A participant is eligible for normal retirement after attaining age 65 or 5 years of Credited Service.

Regular Benefit: The monthly normal retirement benefit for Regular employees is the sum of:

- (i) 0.825% of Final Average Earnings up to \$12,000 (annual earnings) multiplied by years of Benefit Service
- (ii) 1.5% of Final Average Earnings in excess of \$12,000 (annual earnings) multiplied by years of Benefit Service

Sales Benefit: The monthly normal retirement benefit for salesmen is 0.5% of Final Average Earnings multiplied by years of Benefit Service. Earnings in excess of \$50,000 are not recognized.

For both groups, benefit accruals ceased on December 31, 2006.

Commencement date: The first day of the month immediately coinciding with or following the participant's normal retirement date.

### **Form of payment**

Single employees – Life annuity

Married employees – 50%, 66-2/3%, 75% and 100% joint and survivor annuities.

|                 |                                     |
|-----------------|-------------------------------------|
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The normal form of payment is a life annuity. Actuarially equivalent optional forms are based upon the 1971 Group Annuity Mortality table for males and 7% interest.

### **Deferred retirement**

Payment of monthly retirement benefits may be deferred beyond the normal retirement date if a participant continues in the active employ of the Company beyond normal retirement date. The monthly deferred retirement benefit is calculated in the same manner as the normal retirement benefit, based on Final Average Earnings and benefit service as of the deferred retirement date.

### **Early retirement**

Eligibility: After attaining age 55 and 10 or more years of Credited Service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit actuarially reduced for each month by which benefit commencement precedes the normal retirement date.

Form of payment: Same as for normal retirement.

### **Disability benefit**

Eligibility: After attaining 10 or more years of Credited Service and entitled to disability payments under the Social Security Act or a Company sponsored disability program.

Benefit: The monthly benefit is determined in the same manner as the normal retirement benefit using Final Average Earnings and benefit service as of the disability date.

### **Termination of employment**

Eligibility: A participant with at least 5 years of Credited Service whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit.

Benefit: The participant's accrued benefit as of the termination date under the normal retirement benefit formula is provided.

Commencement date: Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Vested benefits are payable as early as age 55, if the participant had 10 years of service at termination. Benefits payable prior to normal retirement date are reduced in the same manner as early retirement.

Form of payment: Same as for normal retirement.

|                 |                                     |
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### Pre-retirement death benefits

#### Eligibility:

A participant's spouse will be entitled to a spouse's benefit in the event of the participant's death, if the following conditions are met as of the participant's date of death:

- (1) The participant was employed by the Company
- (2i) The participant completed 10 or more years of Credited Service  
or
- (2ii) 5 years of Credited Service.
- (3) The participant had been married to the same spouse for the one-year period ending on his date of death

#### Benefit:

- (i) If the participant meets eligibility requirement (2i), the monthly benefit payable to the spouse is 50% of the participant's accrued benefit determined as if the participant had attained his Normal Retirement Date and retired on the first day of the month following the month in which his death occurred.

If the surviving spouse was more than ten years younger than the participant, the amount of monthly retirement income is reduced to be the Actuarial Equivalent of the monthly benefit that would have been payable to the spouse if the spouse had been exactly ten years younger than the participant.

If the present value of the monthly retirement income payable to the spouse is greater than 100 times the monthly retirement income the participant would have received (under the normal form) at his Normal Retirement Date, had he continued to work until such date, the spouse's monthly retirement income will be reduced by the ratio of:

- (1) 100 times the monthly retirement income in the normal form which would have been payable to the participant at his Normal Retirement Date to
  - (2) the present value of the monthly retirement income otherwise payable to the spouse.
- (ii) If the participant meets eligibility requirement (2ii), the spouse is entitled to a benefit equal to the benefit that would have been payable to the spouse if the Participant had elected to receive his benefits in the 50% joint and survivor form.

#### Commencement date:

- (i) If the participant meets eligibility requirement (2i), the spouse's benefit is payable on the first of the month following the participant's death. A later commencement date can be selected provided that such date will not be later than the date the participant would have reached his Earliest Retirement Age.
- (ii) If the participant meets eligibility requirement (2ii) then the spouse's benefit is payable on the date on which the participant would have reached his Earliest Retirement Age.

|                 |                                     |
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### **Death After Retirement**

Benefit: A lump sum payment of \$1,000, less proceeds under any group life insurance program financed by the company, is payable to the designated beneficiary or estate.

In addition, the spouse will continue to get any death benefit payable in accordance with the terms of the form of benefit payments elected by the participant.

Commencement date: Payments, if any, will commence on the first day of the month following the month in which the participant's death occurs.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

The sale of the HHI division occurred in December 2012.

|                 |                                     |
|-----------------|-------------------------------------|
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## Porter Cable

### Effective Date and Most Recent Amendment

The plan was originally effective January 1, 1970. Amended and restated effective January 1, 2007. Most recently amended effective December 31, 2012. The Porter Cable plan merged into the Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### Eligibility

All covered employees are eligible immediately. Participation closed to new employees hired on or after January 1, 2007. Benefit accruals were frozen effective December 31, 2010.

### Normal Retirement

- a. Eligibility Later of Age 65 and the fifth anniversary of participation.
- b. Benefit

| Date of Termination      | Monthly Benefit Accrual Rate |
|--------------------------|------------------------------|
| 12/01/1984 to 12/31/1986 | \$9.00                       |
| 01/01/1987 to 12/31/1988 | \$10.00                      |
| 01/01/1988 to 01/31/1990 | \$11.00                      |
| 02/01/1990 to 12/31/1991 | \$12.00                      |
| 01/01/1991 to 01/31/1992 | \$13.00                      |
| 02/01/1992 to 01/31/1994 | \$14.00                      |
| 02/01/1994 to 01/31/1995 | \$15.00                      |
| 02/01/1995 to 12/31/1996 | \$16.00                      |
| 01/01/1997 to 01/31/2002 | \$17.00                      |
| On or after 02/01/2002   | \$18.00                      |

Monthly unit from above times years of Credited Service. For the period 12/1/1984 to 12/31/1995, a 30-year cap on Credited Service applies.

- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.
- d. Form of Payment
- Normal: Single Life Annuity for unmarried participants, 50% Joint and Survivor Annuity for married participants.
  - Optional: Single Life Annuity. 50%, 75%, and 100% Joint and Survivor Annuity.
  - Lump Sum: A participant whose Actuarial Equivalent lump sum is \$1,000 or less shall receive an automatic lump sum

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### Early Retirement

- a. Eligibility Age 55 and ten years of Vesting Service.
- b. Benefit Accrued normal retirement pension reduced by 1/2% per month for the first 60 months and by 1/3% per month for the next 60 months that commencement precedes normal retirement date.
- c. Commencement Date Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.
- d. Form of Payment Same as for normal retirement.

### Death Prior to Retirement

- a. Eligibility Five years of Vesting Service and at least one year of marriage.
- b. Benefit Pension is equal to what the spouse would have received had the employee terminated at date of death, survived to earliest retirement age, and retired on his early retirement date with the 50% Joint and Survivor Annuity form of payment.
- c. Commencement Date Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.
- d. Form of Payment The surviving spouse's benefit is paid monthly for the life of the surviving spouse.

|                 |                                     |
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## SCHEDULE SB ATTACHMENTS

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### Termination of Employment

- |                      |                                                                                                                                                                                                                                                                                                                                     |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Five years of Vesting Service, or Age 55 regardless of service.                                                                                                                                                                                                                                                                     |
| b. Benefit           | Starting at age 65, a pension calculated as for normal retirement, based on Credited Service to date of termination. Participants with 10 years or more of Vesting Service at termination may commence benefits under the same provisions as Early Retirement.                                                                      |
| c. Commencement Date | Payments commence on the first day of the month coinciding with, or next following the participant's normal retirement date, or the participant may elect to have payments commence as early as the first day of the month coinciding with or next following his attainment of age 55, in an amount reduced for early commencement. |
| d. Form of Payment   | Same as for normal retirement.                                                                                                                                                                                                                                                                                                      |

### Maximum on Benefits and Pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### Future Plan Change

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

### Change in Plan Provisions Since Last Actuarial Valuation

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

The Black & Decker Pension Plan and the Porter Cable Pension Plan provided a bulk lump sum offering in December 2012 resulting in single sum distributions totaling \$125,990,245.

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## SCHEDULE SB ATTACHMENTS

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### Price Pfister

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#### Effective Date and Most Recent Amendment

Amended and restated effective January 1, 2007, initially effective June 27, 1983. Most recently amended effective December 31, 2012. The Price Pfister plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

#### Eligibility

Covered employees are eligible immediately. There are no longer any active participants.

#### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The monthly benefit is equal to:
  - 1. For members of the International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America.

| Year of Benefit Service                                                                                                                                                 | Monthly Retirement Benefit for Each Year of Benefit Service |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| Prior to 04/01/1982                                                                                                                                                     | \$10.00                                                     |
| 04/01/1982 to 03/31/1983                                                                                                                                                | \$11.00                                                     |
| 04/01/1983 to 06/26/1983                                                                                                                                                | \$12.00                                                     |
| 06/27/1983 to 10/31/1990                                                                                                                                                | \$15.00                                                     |
| November 1, 1990 and<br>Thereafter; other than<br>Employees who are laid<br>Off as a result of the<br>Closing of the Employer's<br>Pacoima, California plant            | \$20.00                                                     |
| November 1, 1990 and<br>Thereafter for Employees<br>Laid off as a result of the<br>Closing of the Employer's<br>Pacoima, California plant,<br>And who retire thereafter | \$21.00                                                     |

where only the most recent 35 years of Benefit Service Credit are counted.

|                 |                                     |
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or

2. For member in Package and General Utility Drivers Local 396

| Year of Benefit Service   | Monthly Retirement Benefit for Each Year of Benefit Service |
|---------------------------|-------------------------------------------------------------|
| 04/03/1978 to 04/30/1981  | \$7.50                                                      |
| 05/01/1981 to 04/03/1990  | \$10.00                                                     |
| 04/04/1990 to 04/03/1991  | \$11.00                                                     |
| 04/04/1991 to 04/03/1992  | \$12.00                                                     |
| 04/04/1992 and thereafter | \$13.00                                                     |

where only the most recent 30 years of Benefit Service Credit are counted.

less

3. Benefit attributable to service with Norris Industries, Inc.

- c. Commencement Date

Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.

- d. Form of Payment

Single Life Annuity and 50% and 75% Joint and Survivor Annuity.

A participant whose present value of benefits is \$1,000 or less will receive an automatic cash out.

### Early Retirement

- a. Eligibility

Age 60 and ten years of Vesting Service Credit.

- b. Benefit

Accrued normal benefit based on years of service at termination date. Benefits payable either at normal retirement date or if earlier, the benefit is reduced by 4/10% for each month that payments begin prior to normal retirement date.

- c. Commencement Date

Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.

- d. Form of Payment

Same as for normal retirement.

### Disability Retirement

- a. Eligibility

Age 50 with 15 years of Vesting Service Credit and eligible for Social Security disability benefits.

- b. Benefit

Accrued benefit at disability without any reduction for early payment.

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c. Commencement Date                      Payments commence as soon as practicable following the approval of the application for benefits.

d. Form of Payment                      Same as for normal retirement.

### **Death Prior to Retirement**

a. Eligibility                      Age 65 or five Years of Vesting Service Credit.

b. Benefit                      One half of benefit that would have been payable to the member if he had retired or terminated immediately prior to death with payment in the form of a Spouse's Joint and 50% Survivor annuity.

c. Commencement Date                      Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.

d. Form of Payment                      The surviving spouse's benefit is paid monthly for the life of the surviving spouse.

### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
|-----------------|-------------------------------------|
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# **SCHEDULE SB ATTACHMENTS**

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## **Sargent & Greenleaf**

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### **Effective Date and Most Recent Amendment**

The plan was originally effective December 28, 1961. The plan was amended and restated January 1, 2011. Most recently amended effective December 31, 2012. The Sargent & Greenleaf plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### **Plan Year**

The twelve-month period ending December 31.

### **Eligibility**

Employees are eligible to participate in the plan at the attainment of age twenty-one. This includes employees who are members of a unit covered by a collective bargaining agreement. Participation in the plan is frozen.

### **Final Average Compensation**

Plan compensation is base pay. Average compensation is the highest average compensation over a consecutive five year period.

### **Normal Retirement Benefit**

Eligibility: A participant is eligible for normal retirement on the first day of the month following his 65th birthday.

Benefit Formula: The normal retirement benefit for a participant is the greater of:

- (i) 50% of Average Annual Earnings minus 50% of Primary Social Security Benefit – reduced one-fifteenth for each year of Credited Service less than 15 years. Certain employees have maximum Social Security offset provision in accordance with Code Section 401(l) and certain location groups have additional benefit of \$3/month for each year of Credited Service.
- (ii) Pension Trust Benefit
- (iii) \$600; reduced one-fifteenth for each year of Credited Service less than 15 years.

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Benefits are now frozen for all groups.

Commencement Date: The first day of the month immediately following the date the participant reaches age 65.

The normal form of benefit is a life annuity. Actuarially equivalent optional forms are based upon 1994 Uninsured Pensioner Mortality Table and 5% interest.

Optional forms of payment:

Single employees – Life annuity, 10 years certain and life

Married employees – Life annuity, 50% and 75% joint and survivor annuity, and 10 years certain and life

Lump sums are available for employees of Safemasters grandfathered group.

### **Late Retirement**

Payment of normal retirement benefits may be deferred beyond the normal retirement date up to five years. The late retirement benefit is the same as the normal retirement benefit taking into account Credited Service and Average Annual Earnings up to the late retirement date.

### **Early Retirement Benefit**

Eligibility: After attaining age 55 and 10 more or years of service, an employee is eligible for early retirement.

Benefit: The early retirement benefit is equal to the normal retirement benefit, reduced by 5/9 of 1% for each full calendar month for the first 60 months and 5/18 of 1% for each additional month by which the early retirement date precedes the normal retirement date.

Forms of payment: Same as for normal retirement.

### **Disability Benefit**

Eligibility: Totally and permanently disabled for at least 6 months prior to severance from employment. Also the participant is not covered by the employer's LTD plan.

Benefit: The monthly benefit is determined in the same manner as the normal retirement benefit. The benefit is unreduced for early commencement and payable upon eligibility.

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### **Vested Benefits Upon Termination of Service**

**Eligibility:** A participant whose employment is terminated before death or retirement is eligible for a vested deferred retirement benefit, provided the participant has at least 5 years (4 years for Safemasters) of credited service.

**Termination Benefit:** The participant's accrued benefit under the normal retirement benefit formula is provided. Payments commence on the first day of the month coinciding with, or following the participant's normal retirement date. Benefits payable prior to normal retirement date are reduced as for early retirement.

**Forms of payment:** Same as for normal retirement.

### **Death Benefits for Participants Not Receiving Benefits**

If a vested participant dies after becoming eligible for early retirement, a benefit equal to half of the participant's early retirement benefit under the 50% Joint and Survivor annuity option is payable to the surviving spouse.

If an active vested participant dies prior to becoming eligible for early retirement, the above benefit is deferred to the date the participant would have become eligible for early retirement.

### **Pension Increases**

Not Applicable.

### **Plan Participants' Contributions**

Not Applicable.

### **Maximum on Benefits and Pay**

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

### **Future Plan Changes**

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

Towers Watson is not aware of any future plan changes which are required to be reflected.

|                 |                                     |
|-----------------|-------------------------------------|
| Plan Name:      | Stanley Black & Decker Pension Plan |
| EIN / PN:       | 52-1127357 / 013                    |
| Plan Sponsor:   | Black & Decker (U.S.) Inc.          |
| Valuation Date: | January 1, 2013                     |

## **SCHEDULE SB ATTACHMENTS**

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### **Change in Plan Provisions Since Last Actuarial Valuation**

Effective December 31, 2012, the Retirement Plans for Best Lock, Lista, National Manufacturing, Porter Cable, Price Pfister, Sargent & Greenleaf, and True Temper were merged into the Stanley Black & Decker Pension Plan.

|                 |                                     |
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# SCHEDULE SB ATTACHMENTS

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## True Temper

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### Effective Date and Most Recent Amendment

Amended and restated August 1, 2007. The plan was most recently amended effective December 31, 2012. The True Temper plan merged into the Stanley Black & Decker Pension Plan effective on the close of business December 31, 2012. Eligibility and benefits are frozen.

### Eligibility

Covered employees are eligible immediately. There are no longer any active employees covered under this plan.

### Normal Retirement

- a. Eligibility Age 65.
- b. Benefit The Benefit Rate shown below multiplied by years of Continuous Service.
- | Date of Retirement       | Monthly Benefit<br>Accrual Rate |
|--------------------------|---------------------------------|
| Prior to 07/01/1987      | \$15.00                         |
| 07/01/1987 to 06/30/1988 | \$16.00                         |
| 07/01/1988 to 06/30/1989 | \$17.00                         |
| 07/01/1989 to 06/30/1990 | \$18.00                         |
| 07/01/1990 to 06/30/1991 | \$20.00                         |
| 07/01/1991 and after     | \$22.00                         |
- c. Commencement Date Payments commence on the first day of the month coinciding with or following the participant's normal or actual retirement date.
- d. Form of Payment Single Life Annuity, 50%, 75%, and 100% Joint and Survivor Annuities.
- A participant whose present value of benefits is \$1,000 or less will receive an automatic cash out.

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### Early Retirement

- a. Eligibility                      Age 62 and 15 years of Continuous Service.
- Less than age 62 with 30 or more years of Continuous Service.
- Age 50, 15 years of Continuous Service and Age Plus Continuous Service equals 70 or more, or 15 years of Continuous Service and age plus Continuous Service equals 80 or more and Continuous Service is broken by reason of plant shutdown, layoff or disabilities.
- At least 15 years but less than 30 years of Continuous Service and age 60.
- b. Benefit                         Accrued pension payable at age 62 or reduced by 1/2 of 1% for each month that commencement precedes age 62. Reductions apply only to participants who are eligible with 15 years of Continuous Service and age 60.
- c. Commencement Date        Payments commence on the first day of the month coinciding with or following the month the participant retires and elects benefit commencement.
- d. Form of Payment            Same as for normal retirement.

### Disability Retirement (Permanent Incapacity Retirement)

- a. Eligibility                      Fifteen years of Continuous Service and permanently disabled for at least six months.
- b. Benefit                         The accrued pension plus \$230 supplement payable until social security benefits commence or age 62, if earlier; the accrued pension is payable thereafter.
- c. Commencement Date        Payments commence as soon as practicable following the approval of the application for benefits.
- d. Form of Payment            Same as for normal retirement.

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## SCHEDULE SB ATTACHMENTS

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### Death Prior to Retirement

- |                      |                                                                                                                                                                                                                                                                      |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility       | Death in active service after 15 years of Continuous Service or eligible for an immediate pension.                                                                                                                                                                   |
| b. Benefit           | Spouse receives 50% of accrued monthly pension (\$100 minimum); such benefit is reduced by 50% of the widow's social security benefit when first payable (\$50 minimum net benefit). The above 50% rate is reduced by 1/2% for each year the spouse is under age 50. |
| c. Commencement Date | Payments commence on the date that the member would have been eligible to receive benefits or date of death, if later.                                                                                                                                               |
| d. Form of Payment   | The surviving spouse's benefit is paid monthly for the life of the surviving spouse.                                                                                                                                                                                 |

### Pre-pension Spouse's Benefit

- |                             |                                                                                                                                                                                                                                                                                                                                                                                               |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility              | Employee can elect pre-pension coverage if he is age 55 or older and has 15 years of Continuous Service or 10 years of Continuous Service and age 60, or age 65 or older.                                                                                                                                                                                                                     |
| b. Monthly Spouse's Pension | The spouse's pension is calculated as if the employee had terminated employment on his date of death with the automatic form of pension in effect. For participants with a break in Continuous Service prior to January 1, 1992, pensions of the employees and their surviving spouses are reduced 7/10% per year the coverage is in effect, to reflect the cost of the pre-pension coverage. |

### Vested Spouse's Benefit

- |                |                                                                                                                                                                            |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility | Death after permanent incapacity prior to Age 62 or after 5 years of Continuous Service and not eligible for pre-pension spouse's benefit.                                 |
| b. Benefit     | 50% of the accrued monthly pension at earlier of death or termination assuming participant lived to date benefits were payable and elected 50% Joint and Survivor Annuity. |

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## SCHEDULE SB ATTACHMENTS

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### Special Payment

- |                |                                                                                                                                                                                                                                                             |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a. Eligibility | Eligible for normal or early retirement                                                                                                                                                                                                                     |
| b. Benefit     | Thirteen weeks vacation pay (14 weeks if participant currently receives more than 4 weeks of vacation per year) reduced by any vacation taken in the year of retirement. If participant receives special payment, monthly pension is deferred three months. |

### Maximum on Benefits and Pay

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