Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ **Complete all entries in accordance with the instructions to the Form 5500.**	**2017** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 024

1c Effective date of plan 04/01/1999

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PREMIER FARNELL CORPORATION

4180 HIGHLANDER PARKWAY
RICHFIELD, OH 44286

2b Employer Identification Number (EIN) 51-0373145

2c Plan Sponsor's telephone number 330-523-4273

2d Business code (see instructions) 454110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2018	WAYNE PLANMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2018	WAYNE PLANMAN
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	1448
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	841
a(2) Total number of active participants at the end of the plan year	**6a(2)**	0
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	0
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	0
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	0
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2J 2F 2G 2E 2S 2T 3D 3H 2K

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

9a Plan funding arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [X] 1 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .....…… ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ……..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2017 Form M-1 annual report. If the plan was not required to file the 2017 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A (Form 5500)	Insurance Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.** ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	**2017** **This Form is Open to Public Inspection**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A Name of plan	**B** Three-digit plan number (PN) ▶
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN	024
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
PREMIER FARNELL CORPORATION	51-0373145

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year **(f)** From	**(g)** To
06-1050034	93629	038235	0	01/01/2018	01/03/2018

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	**(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	0
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GUARANTEED GENERAL ACCOUNT CONTRACT

b	Balance at the end of the previous year		7b	19458793
c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	2461	
	(4) Transferred from separate account	7c(4)		
	(5) Other (specify below) ▶	7c(5)		
	(6) Total additions		7c(6)	2461
d	Total of balance and additions (add lines **7b** and **7c(6)**).		7d	19461254
e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	19442093	
	(2) Administration charge made by carrier	7e(2)		
	(3) Transferred to separate account	7e(3)		
	(4) Other (specify below) ▶ FORFEITURES DEBITS	7e(4)	19161	
	(5) Total deductions		7e(5)	19461254
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)		7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	9a(1)			
(2) Increase (decrease) in amount due but unpaid	9a(2)			
(3) Increase (decrease) in unearned premium reserve	9a(3)			
(4) Earned (**(1)** + **(2)** - **(3)**)			9a(4)	
b Benefit charges (1) Claims paid	9b(1)			
(2) Increase (decrease) in claim reserves	9b(2)			
(3) Incurred claims (add **(1)** and **(2)**)			9b(3)	
(4) Claims charged			9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	9c(1)(A)			
(B) Administrative service or other fees	9c(1)(B)			
(C) Other specific acquisition costs	9c(1)(C)			
(D) Other expenses	9c(1)(D)			
(E) Taxes	9c(1)(E)			
(F) Charges for risks or other contingencies	9c(1)(F)			
(G) Other retention charges	9c(1)(G)			
(H) Total retention			9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			9d(1)	
(2) Claim reserves			9d(2)	
(3) Other reserves			9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			9e	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).	2017
Department of Labor Employee Benefits Security Administration	▶ **File as an attachment to Form 5500.**	**This Form is Open to Public Inspection.**
Pension Benefit Guaranty Corporation		

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(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)

INDEPENDENT FINANCIAL PARTNERS

59-3331424

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	16250	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 50 64	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND	15 64	0

(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.
PRUDENTIAL RETIREMENT INSURANCE AND 06-1050034	40.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2017 TO 12/31/2017 GUARANTEED INCOME FUND

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	0

(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.
PRUDENTIAL INVESTMENTS, LLC 22-3468527	22.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2017 TO 12/31/2017 PRU JENN MID-CAP GRW Z

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**2017** **This Form is Open to Public Inspection.**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE: CORE PLUS BOND / PGIM FUN

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-299 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: DRYDEN S&P 500 INDEX FUND

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-123 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO SCG STGY

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-293 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

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a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

SCHEDULE H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2017** **This Form is Open to Public Inspection**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	2766560	0
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	20408025	0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	38879511	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	19458793	0
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	81512889	0
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	81512889	0

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	2461	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2461
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		185858
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		509050
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		697369

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		0

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		697369
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		82210258

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: MALONEY NOVOTNY LLC **(2)** EIN: 34-0677006

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k	X		
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
AVNET 401(K) PLAN	11-1890605	102

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

SCHEDULE R (Form 5500)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2017** **This Form is Open to Public Inspection.**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2018 and ending 01/03/2018

A Name of plan
PREMIER FARNELL CORPORATION 401K RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 024

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER FARNELL CORPORATION

D Employer Identification Number (EIN)
51-0373145

Part I Distributions

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

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

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

EIN(s): 22-1211670 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

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

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

a Name of contributing employer

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

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

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

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

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

a Name of contributing employer

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

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

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

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

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

a Name of contributing employer

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

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

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

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

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

a Name of contributing employer

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

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

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

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

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

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

PREMIER FARNELL CORPORATION
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL REPORT

JANUARY 3, 2018, DECEMBER 31, 2017
and DECEMBER 31, 2016

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

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maloney
maloney + novotny LLC

Independent Auditors' Report

The Plan Administrator and Participants
Premier Farnell Corporation 401(k) Retirement Savings Plan
Richfield, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of January 3, 2018, December 31, 2017 and December 31, 2016, and the related statements of changes in net assets available for benefits for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of 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.

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Prudential Retirement Insurance & Annuity Company, the Trustee of the Plan, and Prudential Bank & Trust FSB Company, Custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the Trustee and Custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the Trustee and Custodian as of January 3, 2018, December 31, 2017 and December 31, 2016, and for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, that the information provided to the plan administrator by the Trustee and Custodian is complete and accurate.

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Disclaimer of Opinion

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

Report on Supplementary Information

The supplemental schedule of assets (held at end of year) as of December 31, 2017 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

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

Maloney + Novotny LLC

Cleveland, Ohio
October 4, 2018

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

January 3, 2018, December 31, 2017 and December 31, 2016

	2018	2017	2016
ASSETS			
Cash	$ -	$ -	$ 30
Investments at Fair Value:			
Pooled Separate Accounts:			
Dryden S&P 500 Index Fund	-	8,787,505	7,500,499
Core Plus Bond/PGIM Fund	-	7,901,973	7,152,926
Sa/Inv Sm Cap Grow Strat	-	3,718,547	3,187,418
Registered Investment Companies:			
American Europacific Grow R4	-	11,302,716	9,168,594
American Beacon Small Cp Plan	-	3,958,593	6,651,229
Inv Diversified Dividend	-	6,252,573	5,517,143
JP Morgan Large CP GW SEL	-	6,357,174	5,077,190
American Balanced Fund R4	-	6,904,876	3,528,529
RidgeWorth Cer Mid Cap	-	2,824,681	2,839,856
Dreyfus Small Cap Stock Index	-	645,436	683,172
Pru Jenn Md Cp Grw	-	633,462	619,702
Total investments at fair value	-	59,287,536	51,926,258
Investments at Contract Value:			
Guaranteed Income Fund	-	19,458,793	19,638,003
Total investments	-	78,746,329	71,564,261
Receivables:			
Employee contributions	-	-	18,851
Employer contributions	-	-	10,432
Notes receivable from participants	-	2,766,560	2,404,163
Total receivables	-	2,766,560	2,433,446
NET ASSETS AVAILABLE FOR BENEFITS	$ -	$ 81,512,889	$ 73,997,737

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

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Period From January 1, 2018 to January 3, 2018
and Year Ended December 31, 2017

	January 3, 2018	December 31, 2017
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 694,908	$ 9,374,999
Interest and dividends	2,461	660,123
Total investment income	697,369	10,035,122
Interest income on notes receivable from participants	-	113,216
Other income	-	164,899
Contributions:		
Employee	-	4,690,856
Employer	-	2,157,756
Rollovers	-	1,504,171
Total contributions	-	8,352,783
Total additions	697,369	18,666,020
DEDUCTIONS		
Plan benefits paid to participants	-	11,021,687
Administrative fees	-	129,181
Total deductions	-	11,150,868
NET INCREASE BEFORE TRANSFERS	697,369	7,515,152
NET TRANSFERS TO OTHER PLAN	(82,210,258)	-
NET (DECREASE) INCREASE	(81,512,889)	7,515,152
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING OF YEAR	81,512,889	73,997,737
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	$ -	$ 81,512,889

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

Note 1. Description of Plan

The following description of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan began April 1, 1999 and is a defined contribution plan covering significantly all employees of Premier Farnell Corp. (the "Company") who have completed at least 30 days of eligible service other than the following employees to whom coverage has not been extended: certain union employees (excluding those of Weldon division until the sale of this division during March 2016) and leased employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. During 2016, the Company's parent company was acquired and on January 3, 2018, the Plan merged into another existing plan of the acquirer.

Contributions:

Participants may make pre-tax contributions in any amount between 1% and 75% of their eligible compensation, subject to certain limits imposed by the Internal Revenue Service ("IRS"). Unless employees elect otherwise upon becoming eligible to participate in the Plan, they are automatically enrolled to contribute 3% of compensation. Each year thereafter, unless they elect otherwise, participants contributing less than 10% will have their contribution increased by 1%, until 10% is reached. This excludes individuals who have elected not to contribute to the Plan. Terminated participants who maintain an account under the Plan and who receive an eligible rollover distribution from a certain pension plan sponsored by the Company may elect to make a rollover contribution to the Plan of such eligible rollover distribution.

The Company makes safe-harbor matching contributions equal to 100% of the first 3% and 50% of the next 2% of eligible compensation contributed by participants, not exceeding a total match of 4%. Participants covered by certain collective bargaining agreements are not eligible to receive these safe-harbor matching contributions. In addition, the Company, at its discretion, may make qualified non-elective contributions ("QNECs") determined on an annual basis. QNECs in the amount of $-0- and $15,453 were made for 2018 and 2017, respectively.

Participant Accounts:

Each participant's account is credited with the participant's contribution, any Company contribution, and an allocation of Plan earnings, and is charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as applicable. Participants direct their investment fund options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Note 1. Description of Plan (Continued)

Notes Receivable From Participants:

Participants may borrow from their fund accounts to the extent of one-half of their vested account balance under the Plan, not to exceed $50,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10.50%. Principal and interest is paid ratably through monthly payroll deductions.

Vesting:

A participant has a 100% non-forfeitable vested interest in his or her contributions as well as the Company's contributions.

Payment of Benefits:

A participant or his/her beneficiary, upon termination, death, or retirement, receives payment of his/her vested account balance in the form of cash. A participant may also elect to receive distribution of all or a portion of his/her account in a series of monthly cash installments over a period not exceeding ten years or, if less, the life expectancy of the participant, or the participant's beneficiary, if the participant has died. Additionally, the Plan has provisions for an active participant to make hardship withdrawals from his/her cash option account, subject to limitations and restrictions.

Note 2. Summary of Significant Accounting Policies

A. Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

B. Investment Valuation and Income Recognition – Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrative Committee determines the Plan's valuation policies utilizing information provided by the custodian. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Note 2. Summary of Significant Accounting Policies (Continued)

C. Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

D. Administrative Fees – Fees of the Plan are paid by the Company or the Plan at the discretion of the Company. In addition, certain transactions and account maintenance fees are charged to the affected participants. Fees may be offset with funds made available by the Plan custodian from fees it receives from investment fund managers. In addition, excess revenue generated by the Plan through fund revenue or fees that are made available to the Plan may also be allocated to participants as earnings.

E. Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

F. Benefit Payments – Benefits are recorded when paid.

G. Subsequent Events – The Plan has evaluated subsequent events through October 4, 2018, the date the financial statements were available to be issued.

Note 3. Unaudited Information

Prudential Retirement Insurance & Annuity Company ("Prudential") Trustee of the Plan, and Prudential Bank & Trust FSB Company, Custodian of the Plan, hold the Plan's investment assets and execute transactions therein. The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee and Custodian have certified to the completeness and accuracy of all investments and notes receivable from participants reflected in the statements of net assets available for benefits at January 3, 2018, December 31, 2017 and December 31, 2016, the supplemental schedule at December 31, 2017, the related investment and loan interest activity reflected in the statements of changes in net assets available for benefits for the period January 1, 2018 to January 3, 2018 and for the year ended December 31, 2017, and investment related information in the accompanying notes to the financial statements. This information is unaudited by independent accountants.

The Plan estimates the fair value of financial instruments using available market information and other generally accepted valuation methodologies. The inputs used to measure fair value are classified into three levels:

Level 1 – Quoted market prices in active markets for identical assets and liabilities

Level 2 – Observable market-based inputs or unobservable inputs that are corroborated by market data

Level 3 – Unobservable inputs in which little or no market data exists

Note 4. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for plan assets measured at fair value:

- The investments in the Pooled Separate Accounts are held and managed by Prudential. The fair value of investments held in the Pooled Separate Accounts is based on their reported net asset value ("NAV"). The NAV is based primarily on observable inputs and the market value of the underlying investments, and classified as Level 2.

- The fair value of investments held in the Registered Investment Companies is determined based on their quoted closing market prices in active markets for identical investments, and is classified as Level 1.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. There have been no changes in the methodologies used from 2016 to 2017. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level the Plan's assets at fair value as of December 31, 2017 and 2016:

	Assets at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ -	$20,408,025	$ -	$20,408,025
Registered Investment Companies	38,879,511	-	-	38,879,511
Total	$38,879,511	$20,408,025	$ -	$59,287,536

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ -	$17,840,843	$ -	$17,840,843
Registered Investment Companies	34,085,415	-	-	34,085,415
Total	$34,085,415	$17,840,843	$ -	$51,926,258

Note 5. Guaranteed Income Fund

The Plan holds an investment contract which meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan.

Note 5. Guaranteed Income Fund (Continued)

Investments in the Prudential Guaranteed Income Fund are reported at contract value as determined by Prudential, which represents contributions plus interest at a specified rate, less participant withdrawals and fees. Prudential maintains the investments in a general account which is not backed by any specific securities. All transactions within this contract were executed at contract value. Prudential was contractually obligated to repay the principal and a specified rate guaranteed to the Plan. The guaranteed interest rates were reset periodically.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on several factors, including current economic and market conditions, the general interest rate environment, and both the expected and actual experience of a reference portfolio within the issuer's general account. These rates were established without the use of a specific formula and were subject to minimum crediting rates under the contract.

Note 6. Income Tax Status

The Plan adopted a prototype plan document. This plan document obtained a determination letter dated April 29, 2014 from the IRS in which the IRS stated that the document, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the plan administrator and the Plan's tax counsel believe that the Plan was designed and in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

Note 7. Party-in-Interest Transactions

Certain Plan investments are held in a Guaranteed Income Fund, Pooled Separate Accounts, and Registered Investment Companies of either Prudential or Prudential Bank & Trust FSB Company, Trustee and Custodian of the Plan, respectively, or their affiliates. Administrative expenses are paid to the Trustee and Custodian of the Plan; therefore, these transactions qualify as party-in-interest. Total asset-based and transaction-based fees paid to Prudential were $-0- and $53,229 in 2018 and 2017, respectively.

As part of the Plan's fee structure, Prudential reduces its fee revenue received out of the Plan's investment income and uses these fees instead to pay the cost of the Plan's third party investment advisor. These advisor fees amounted to $-0- and $65,000 in 2018 and 2017, respectively, and are included in administrative fees on the statements of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan holds 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 changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

SUPPLEMENTAL SCHEDULE

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2017

(a)	(b) Identity of Party	(c) Description of Investment	Current (e) Value
*	Prudential Retirement Insurance & Annuity Company	Group Annuity Contract: Guaranteed Income Fund	$19,458,793
*	Prudential Retirement Insurance & Annuity Company	Pooled Separate Accounts:	
		Dryden S&P 500 Index Fund	8,787,505
		Core Plus Bond/PGIM Fund	7,901,973
		Sa/Inv Sm Cap Grow Strat	3,718,547
		Registered Investment Companies:	
	American Funds	American Europacific Grow R4	11,302,716
	American Beacon	American Beacon Small Cp Plan	3,958,593
	Invesco	Inv Diversified Dividend	6,252,573
	JPMorgan	JP Morgan Large CP GW SEL	6,357,174
	American Funds	American Balanced Fund R4	6,904,876
	RidgeWorth	RidgeWorth Cer Mid Cap	2,824,681
	Dreyfus	Dreyfus Small Cap Stock Index	645,436
*	Prudential Investments	Pru Jenn Md Cp Grw	633,462
*	Participant Loans	Interest rates from 4.25% - 10.50%	2,766,560
			$81,512,889

* Represents a party-in-interest.

PREMIER FARNELL CORPORATION
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL REPORT

JANUARY 3, 2018, DECEMBER 31, 2017
and DECEMBER 31, 2016

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

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maloney
maloney + novotny LLC

Independent Auditors' Report

The Plan Administrator and Participants
Premier Farnell Corporation 401(k) Retirement Savings Plan
Richfield, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of January 3, 2018, December 31, 2017 and December 31, 2016, and the related statements of changes in net assets available for benefits for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of 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.

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Prudential Retirement Insurance & Annuity Company, the Trustee of the Plan, and Prudential Bank & Trust FSB Company, Custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the Trustee and Custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the Trustee and Custodian as of January 3, 2018, December 31, 2017 and December 31, 2016, and for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, that the information provided to the plan administrator by the Trustee and Custodian is complete and accurate.

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Disclaimer of Opinion

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

Report on Supplementary Information

The supplemental schedule of assets (held at end of year) as of December 31, 2017 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

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

Maloney + Novotny LLC

Cleveland, Ohio
October 4, 2018

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

January 3, 2018, December 31, 2017 and December 31, 2016

	2018	2017	2016
ASSETS			
Cash	$ -	$ -	$ 30
Investments at Fair Value:			
Pooled Separate Accounts:			
Dryden S&P 500 Index Fund	-	8,787,505	7,500,499
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Guaranteed Income Fund	-	19,458,793	19,638,003
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Total receivables	-	2,766,560	2,433,446
NET ASSETS AVAILABLE FOR BENEFITS	$ -	$ 81,512,889	$ 73,997,737

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

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Period From January 1, 2018 to January 3, 2018
and Year Ended December 31, 2017

	January 3, 2018	December 31, 2017
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 694,908	$ 9,374,999
Interest and dividends	2,461	660,123
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Administrative fees	-	129,181
Total deductions	-	11,150,868
NET INCREASE BEFORE TRANSFERS	697,369	7,515,152
NET TRANSFERS TO OTHER PLAN	(82,210,258)	-
NET (DECREASE) INCREASE	(81,512,889)	7,515,152
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING OF YEAR	81,512,889	73,997,737
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	$ -	$ 81,512,889

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

Note 1. Description of Plan

The following description of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan began April 1, 1999 and is a defined contribution plan covering significantly all employees of Premier Farnell Corp. (the "Company") who have completed at least 30 days of eligible service other than the following employees to whom coverage has not been extended: certain union employees (excluding those of Weldon division until the sale of this division during March 2016) and leased employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. During 2016, the Company's parent company was acquired and on January 3, 2018, the Plan merged into another existing plan of the acquirer.

Contributions:

Participants may make pre-tax contributions in any amount between 1% and 75% of their eligible compensation, subject to certain limits imposed by the Internal Revenue Service ("IRS"). Unless employees elect otherwise upon becoming eligible to participate in the Plan, they are automatically enrolled to contribute 3% of compensation. Each year thereafter, unless they elect otherwise, participants contributing less than 10% will have their contribution increased by 1%, until 10% is reached. This excludes individuals who have elected not to contribute to the Plan. Terminated participants who maintain an account under the Plan and who receive an eligible rollover distribution from a certain pension plan sponsored by the Company may elect to make a rollover contribution to the Plan of such eligible rollover distribution.

The Company makes safe-harbor matching contributions equal to 100% of the first 3% and 50% of the next 2% of eligible compensation contributed by participants, not exceeding a total match of 4%. Participants covered by certain collective bargaining agreements are not eligible to receive these safe-harbor matching contributions. In addition, the Company, at its discretion, may make qualified non-elective contributions ("QNECs") determined on an annual basis. QNECs in the amount of $-0- and $15,453 were made for 2018 and 2017, respectively.

Participant Accounts:

Each participant's account is credited with the participant's contribution, any Company contribution, and an allocation of Plan earnings, and is charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as applicable. Participants direct their investment fund options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Note 1. Description of Plan (Continued)

Notes Receivable From Participants:

Participants may borrow from their fund accounts to the extent of one-half of their vested account balance under the Plan, not to exceed $50,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10.50%. Principal and interest is paid ratably through monthly payroll deductions.

Vesting:

A participant has a 100% non-forfeitable vested interest in his or her contributions as well as the Company's contributions.

Payment of Benefits:

A participant or his/her beneficiary, upon termination, death, or retirement, receives payment of his/her vested account balance in the form of cash. A participant may also elect to receive distribution of all or a portion of his/her account in a series of monthly cash installments over a period not exceeding ten years or, if less, the life expectancy of the participant, or the participant's beneficiary, if the participant has died. Additionally, the Plan has provisions for an active participant to make hardship withdrawals from his/her cash option account, subject to limitations and restrictions.

Note 2. Summary of Significant Accounting Policies

A. Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

B. Investment Valuation and Income Recognition – Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrative Committee determines the Plan's valuation policies utilizing information provided by the custodian. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Note 2. Summary of Significant Accounting Policies (Continued)

C. Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

D. Administrative Fees – Fees of the Plan are paid by the Company or the Plan at the discretion of the Company. In addition, certain transactions and account maintenance fees are charged to the affected participants. Fees may be offset with funds made available by the Plan custodian from fees it receives from investment fund managers. In addition, excess revenue generated by the Plan through fund revenue or fees that are made available to the Plan may also be allocated to participants as earnings.

E. Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

F. Benefit Payments – Benefits are recorded when paid.

G. Subsequent Events – The Plan has evaluated subsequent events through October 4, 2018, the date the financial statements were available to be issued.

Note 3. Unaudited Information

Prudential Retirement Insurance & Annuity Company ("Prudential") Trustee of the Plan, and Prudential Bank & Trust FSB Company, Custodian of the Plan, hold the Plan's investment assets and execute transactions therein. The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee and Custodian have certified to the completeness and accuracy of all investments and notes receivable from participants reflected in the statements of net assets available for benefits at January 3, 2018, December 31, 2017 and December 31, 2016, the supplemental schedule at December 31, 2017, the related investment and loan interest activity reflected in the statements of changes in net assets available for benefits for the period January 1, 2018 to January 3, 2018 and for the year ended December 31, 2017, and investment related information in the accompanying notes to the financial statements. This information is unaudited by independent accountants.

The Plan estimates the fair value of financial instruments using available market information and other generally accepted valuation methodologies. The inputs used to measure fair value are classified into three levels:

Level 1 – Quoted market prices in active markets for identical assets and liabilities

Level 2 – Observable market-based inputs or unobservable inputs that are corroborated by market data

Level 3 – Unobservable inputs in which little or no market data exists

Note 4. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for plan assets measured at fair value:

- The investments in the Pooled Separate Accounts are held and managed by Prudential. The fair value of investments held in the Pooled Separate Accounts is based on their reported net asset value ("NAV"). The NAV is based primarily on observable inputs and the market value of the underlying investments, and classified as Level 2.

- The fair value of investments held in the Registered Investment Companies is determined based on their quoted closing market prices in active markets for identical investments, and is classified as Level 1.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. There have been no changes in the methodologies used from 2016 to 2017. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level the Plan's assets at fair value as of December 31, 2017 and 2016:

	Assets at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ -	$20,408,025	$ -	$20,408,025
Registered Investment Companies	38,879,511	-	-	38,879,511
Total	$38,879,511	$20,408,025	$ -	$59,287,536

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ -	$17,840,843	$ -	$17,840,843
Registered Investment Companies	34,085,415	-	-	34,085,415
Total	$34,085,415	$17,840,843	$ -	$51,926,258

Note 5. Guaranteed Income Fund

The Plan holds an investment contract which meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan.

Note 5. Guaranteed Income Fund (Continued)

Investments in the Prudential Guaranteed Income Fund are reported at contract value as determined by Prudential, which represents contributions plus interest at a specified rate, less participant withdrawals and fees. Prudential maintains the investments in a general account which is not backed by any specific securities. All transactions within this contract were executed at contract value. Prudential was contractually obligated to repay the principal and a specified rate guaranteed to the Plan. The guaranteed interest rates were reset periodically.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on several factors, including current economic and market conditions, the general interest rate environment, and both the expected and actual experience of a reference portfolio within the issuer's general account. These rates were established without the use of a specific formula and were subject to minimum crediting rates under the contract.

Note 6. Income Tax Status

The Plan adopted a prototype plan document. This plan document obtained a determination letter dated April 29, 2014 from the IRS in which the IRS stated that the document, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the plan administrator and the Plan's tax counsel believe that the Plan was designed and in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

Note 7. Party-in-Interest Transactions

Certain Plan investments are held in a Guaranteed Income Fund, Pooled Separate Accounts, and Registered Investment Companies of either Prudential or Prudential Bank & Trust FSB Company, Trustee and Custodian of the Plan, respectively, or their affiliates. Administrative expenses are paid to the Trustee and Custodian of the Plan; therefore, these transactions qualify as party-in-interest. Total asset-based and transaction-based fees paid to Prudential were $-0- and $53,229 in 2018 and 2017, respectively.

As part of the Plan's fee structure, Prudential reduces its fee revenue received out of the Plan's investment income and uses these fees instead to pay the cost of the Plan's third party investment advisor. These advisor fees amounted to $-0- and $65,000 in 2018 and 2017, respectively, and are included in administrative fees on the statements of changes in net assets available for benefits.

Note 8. Risks and Uncertainties

The Plan holds 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 changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

SUPPLEMENTAL SCHEDULE

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2017

(a)	(b) Identity of Party	(c) Description of Investment	Current (e) Value
*	Prudential Retirement Insurance & Annuity Company	Group Annuity Contract: Guaranteed Income Fund	$19,458,793
*	Prudential Retirement Insurance & Annuity Company	Pooled Separate Accounts:	
		Dryden S&P 500 Index Fund	8,787,505
		Core Plus Bond/PGIM Fund	7,901,973
		Sa/Inv Sm Cap Grow Strat	3,718,547
		Registered Investment Companies:	
	American Funds	American Europacific Grow R4	11,302,716
	American Beacon	American Beacon Small Cp Plan	3,958,593
	Invesco	Inv Diversified Dividend	6,252,573
	JPMorgan	JP Morgan Large CP GW SEL	6,357,174
	American Funds	American Balanced Fund R4	6,904,876
	RidgeWorth	RidgeWorth Cer Mid Cap	2,824,681
	Dreyfus	Dreyfus Small Cap Stock Index	645,436
*	Prudential Investments	Pru Jenn Md Cp Grw	633,462
*	Participant Loans	Interest rates from 4.25% - 10.50%	2,766,560
			$81,512,889

* Represents a party-in-interest.

PREMIER FARNELL CORPORATION
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL REPORT

JANUARY 3, 2018, DECEMBER 31, 2017
and DECEMBER 31, 2016

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

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maloney
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Independent Auditors' Report

The Plan Administrator and Participants
Premier Farnell Corporation 401(k) Retirement Savings Plan
Richfield, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan"), which comprise the statements of net assets available for benefits as of January 3, 2018, December 31, 2017 and December 31, 2016, and the related statements of changes in net assets available for benefits for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of 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.

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Prudential Retirement Insurance & Annuity Company, the Trustee of the Plan, and Prudential Bank & Trust FSB Company, Custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the Trustee and Custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the Trustee and Custodian as of January 3, 2018, December 31, 2017 and December 31, 2016, and for the period January 1, 2018 to January 3, 2018 and the year ended December 31, 2017, that the information provided to the plan administrator by the Trustee and Custodian is complete and accurate.

Business Advisors and Certified Public Accountants
Cleveland | Canton | Columbus | Delaware | Elyria | Worthington
A member of Nexia International

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 Supplementary Information

The supplemental schedule of assets (held at end of year) as of December 31, 2017 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

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

Maloney + Novotny LLC

Cleveland, Ohio
October 4, 2018

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

January 3, 2018, December 31, 2017 and December 31, 2016

	2018	2017	2016
ASSETS			
Cash	$ -	$ -	$ 30
Investments at Fair Value:			
Pooled Separate Accounts:			
Dryden S&P 500 Index Fund	-	8,787,505	7,500,499
Core Plus Bond/PGIM Fund	-	7,901,973	7,152,926
Sa/Inv Sm Cap Grow Strat	-	3,718,547	3,187,418
Registered Investment Companies:			
American Europacific Grow R4	-	11,302,716	9,168,594
American Beacon Small Cp Plan	-	3,958,593	6,651,229
Inv Diversified Dividend	-	6,252,573	5,517,143
JP Morgan Large CP GW SEL	-	6,357,174	5,077,190
American Balanced Fund R4	-	6,904,876	3,528,529
RidgeWorth Cer Mid Cap	-	2,824,681	2,839,856
Dreyfus Small Cap Stock Index	-	645,436	683,172
Pru Jenn Md Cp Grw	-	633,462	619,702
Total investments at fair value	-	59,287,536	51,926,258
Investments at Contract Value:			
Guaranteed Income Fund	-	19,458,793	19,638,003
Total investments	-	78,746,329	71,564,261
Receivables:			
Employee contributions	-	-	18,851
Employer contributions	-	-	10,432
Notes receivable from participants	-	2,766,560	2,404,163
Total receivables	-	2,766,560	2,433,446
NET ASSETS AVAILABLE FOR BENEFITS	$ -	$ 81,512,889	$ 73,997,737

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

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Period From January 1, 2018 to January 3, 2018
and Year Ended December 31, 2017

	January 3, 2018	December 31, 2017
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 694,908	$ 9,374,999
Interest and dividends	2,461	660,123
Total investment income	697,369	10,035,122
Interest income on notes receivable from participants	-	113,216
Other income	-	164,899
Contributions:		
Employee	-	4,690,856
Employer	-	2,157,756
Rollovers	-	1,504,171
Total contributions	-	8,352,783
Total additions	697,369	18,666,020
DEDUCTIONS		
Plan benefits paid to participants	-	11,021,687
Administrative fees	-	129,181
Total deductions	-	11,150,868
NET INCREASE BEFORE TRANSFERS	697,369	7,515,152
NET TRANSFERS TO OTHER PLAN	(82,210,258)	-
NET (DECREASE) INCREASE	(81,512,889)	7,515,152
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING OF YEAR	81,512,889	73,997,737
NET ASSETS AVAILABLE FOR BENEFITS – END OF YEAR	$ -	$ 81,512,889

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

Note 1. Description of Plan

The following description of the Premier Farnell Corporation 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan began April 1, 1999 and is a defined contribution plan covering significantly all employees of Premier Farnell Corp. (the "Company") who have completed at least 30 days of eligible service other than the following employees to whom coverage has not been extended: certain union employees (excluding those of Weldon division until the sale of this division during March 2016) and leased employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. During 2016, the Company's parent company was acquired and on January 3, 2018, the Plan merged into another existing plan of the acquirer.

Contributions:

Participants may make pre-tax contributions in any amount between 1% and 75% of their eligible compensation, subject to certain limits imposed by the Internal Revenue Service ("IRS"). Unless employees elect otherwise upon becoming eligible to participate in the Plan, they are automatically enrolled to contribute 3% of compensation. Each year thereafter, unless they elect otherwise, participants contributing less than 10% will have their contribution increased by 1%, until 10% is reached. This excludes individuals who have elected not to contribute to the Plan. Terminated participants who maintain an account under the Plan and who receive an eligible rollover distribution from a certain pension plan sponsored by the Company may elect to make a rollover contribution to the Plan of such eligible rollover distribution.

The Company makes safe-harbor matching contributions equal to 100% of the first 3% and 50% of the next 2% of eligible compensation contributed by participants, not exceeding a total match of 4%. Participants covered by certain collective bargaining agreements are not eligible to receive these safe-harbor matching contributions. In addition, the Company, at its discretion, may make qualified non-elective contributions ("QNECs") determined on an annual basis. QNECs in the amount of $-0- and $15,453 were made for 2018 and 2017, respectively.

Participant Accounts:

Each participant's account is credited with the participant's contribution, any Company contribution, and an allocation of Plan earnings, and is charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as applicable. Participants direct their investment fund options. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Note 1. Description of Plan (Continued)

Notes Receivable From Participants:

Participants may borrow from their fund accounts to the extent of one-half of their vested account balance under the Plan, not to exceed $50,000. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 10.50%. Principal and interest is paid ratably through monthly payroll deductions.

Vesting:

A participant has a 100% non-forfeitable vested interest in his or her contributions as well as the Company's contributions.

Payment of Benefits:

A participant or his/her beneficiary, upon termination, death, or retirement, receives payment of his/her vested account balance in the form of cash. A participant may also elect to receive distribution of all or a portion of his/her account in a series of monthly cash installments over a period not exceeding ten years or, if less, the life expectancy of the participant, or the participant's beneficiary, if the participant has died. Additionally, the Plan has provisions for an active participant to make hardship withdrawals from his/her cash option account, subject to limitations and restrictions.

Note 2. Summary of Significant Accounting Policies

A. Basis of Accounting – The accompanying financial statements have been prepared on the accrual basis of accounting.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

B. Investment Valuation and Income Recognition – Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrative Committee determines the Plan's valuation policies utilizing information provided by the custodian. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Note 2. Summary of Significant Accounting Policies (Continued)

C. Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

D. Administrative Fees – Fees of the Plan are paid by the Company or the Plan at the discretion of the Company. In addition, certain transactions and account maintenance fees are charged to the affected participants. Fees may be offset with funds made available by the Plan custodian from fees it receives from investment fund managers. In addition, excess revenue generated by the Plan through fund revenue or fees that are made available to the Plan may also be allocated to participants as earnings.

E. Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

F. Benefit Payments – Benefits are recorded when paid.

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Note 4. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for plan assets measured at fair value:

- The investments in the Pooled Separate Accounts are held and managed by Prudential. The fair value of investments held in the Pooled Separate Accounts is based on their reported net asset value ("NAV"). The NAV is based primarily on observable inputs and the market value of the underlying investments, and classified as Level 2.

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	Level 1	Level 2	Level 3	Total
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Registered Investment Companies	34,085,415	-	-	34,085,415
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Note 5. Guaranteed Income Fund (Continued)

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There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on several factors, including current economic and market conditions, the general interest rate environment, and both the expected and actual experience of a reference portfolio within the issuer's general account. These rates were established without the use of a specific formula and were subject to minimum crediting rates under the contract.

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Note 8. Risks and Uncertainties

The Plan holds 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 changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

SUPPLEMENTAL SCHEDULE

PREMIER FARNELL CORPORATION 401(k) RETIREMENT SAVINGS PLAN

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Employer No. 51-0373145
Plan No. 024

December 31, 2017

(a)	(b) Identity of Party	(c) Description of Investment	Current (e) Value
*	Prudential Retirement Insurance & Annuity Company	Group Annuity Contract: Guaranteed Income Fund	$19,458,793
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* Represents a party-in-interest.