

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2017</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2017 or fiscal plan year beginning <u>01/01/2017</u> and ending <u>12/31/2017</u>	
A	This return/report is for: <div style="display: flex; justify-content: space-between;"> <div> ☐ a multiemployer plan </div> <div> ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) </div> </div>
	☒ a single-employer plan <div style="margin-left: 150px;">☐ a DFE (specify) _____</div>
B	This return/report is: <div style="display: flex; justify-content: space-between;"> <div> ☐ the first return/report ☐ an amended return/report </div> <div> ☐ the final return/report ☐ a short plan year return/report (less than 12 months) </div> </div>
C	If the plan is a collectively-bargained plan, check here. ☐
D	Check box if filing under: <div style="display: flex; justify-content: space-between;"> <div> ☒ Form 5558 ☐ special extension (enter description) </div> <div> ☐ automatic extension </div> <div> ☐ the DFVC program </div> </div>

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>HENKEL OF AMERICA RETIREMENT PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>002</u>
		1c	Effective date of plan <u>09/01/1977</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>HENKEL OF AMERICA, INC.</u> <u>ONE HENKEL WAY</u> <u>ROCKY HILL, CT 06067</u>	2b	Employer Identification Number (EIN) <u>41-1372525</u>
		2c	Plan Sponsor's telephone number <u>475-210-0230</u>
		2d	Business code (see instructions) <u>325100</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2018	BARBARA MOLLOY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2017)
v. 170203

3a Plan administrator's name and address ☐ Same as Plan Sponsor BENEFITS ADMINISTRATIVE COMMITTEE C/O HENKEL OF AMERICA, INC. ONE HENKEL WAY ROCKY HILL, CT 06067	3b Administrator's EIN 41-1403610 3c Administrator's telephone number 860-571-5100
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 3259
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) 794
a(2) Total number of active participants at the end of the plan year	6a(2) 743
b Retired or separated participants receiving benefits	6b 1496
c Other retired or separated participants entitled to future benefits	6c 797
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 3036
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 148
f Total. Add lines 6d and 6e	6f 3184
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g
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: 1A 3H	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
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For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017	
A Name of plan HENKEL OF AMERICA RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 HENKEL OF AMERICA, INC.	D Employer Identification Number (EIN) 41-1372525

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.
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1 Coverage Information:

(a) Name of insurance carrier THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

(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
22-1211670	68241	000594	6	01/01/2017	12/31/2017

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

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

(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	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

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. Specify nature of costs ▶	6d	

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 ▶

b Balance at the end of the previous year	7b	1511505
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	71797
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions	7c(6)	71797
d Total of balance and additions (add lines 7b and 7c(6))	7d	1583302
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1583302

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)	0
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)	0
(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)	0
(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. ▶

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2017</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

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

A Name of plan HENKEL OF AMERICA RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF HENKEL OF AMERICA, INC.	D Employer Identification Number (EIN) 41-1372525

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500
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Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2017			
2 Assets:			
a Market value	2a	445417157	
b Actuarial value	2b	451380737	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1627	166134868	166134868
b For terminated vested participants	840	45186914	45186914
c For active participants	794	141434207	150704731
d Total	3261	352755989	362026513
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	5.90 %	
6 Target normal cost	6	5109284	

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

SIGN HERE		
	Signature of actuary	10/15/2018
MARCY SIMON		Date
	Type or print name of actuary	17-05311
MERCER		Most recent enrollment number
	Firm name	215-982-4600
THREE LOGAN SQUARE 1717 ARCH STREET, SUITE 1100 PHILADELPHIA, PA 19103		Telephone number (including area code)
	Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	125449742
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		15441253
9 Amount remaining (line 7 minus line 8)	0	110008489
10 Interest on line 9 using prior year's actual return of <u>6.41</u> %	0	7051544
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		18710335
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.09</u> %		199087
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		989784
c Total available at beginning of current plan year to add to prefunding balance		19899206
d Portion of (c) to be added to prefunding balance		19899206
12 Other reductions in balances due to elections or deemed elections		
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	136959239

Part III Funding Percentages

14 Funding target attainment percentage	14	86.85%
15 Adjusted funding target attainment percentage	15	124.68%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	87.87%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
08/29/2018	58370000	0			
Totals ►			18(b)	58370000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	53079129

20 Quarterly contributions and liquidity shortfalls:

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

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.16 %	2nd segment: 5.72 %	3rd segment: 6.48 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 61
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	5109284	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	47605015		12068209
b Waiver amortization installment			
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	17177493	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	17177493	17177493
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	53079129	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	53079129	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	17177493	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42		
43 Excess installment acceleration amount to be carried over to future plan years	43		

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection.
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For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan <u>HENKEL OF AMERICA RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>HENKEL OF AMERICA, INC.</u>	D Employer Identification Number (EIN) <u>41-1372525</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: HENKEL CORP RETIREMENT MASTER TRUST

b Name of sponsor of entity listed in (a): HENKEL OF AMERICA, INC.

c EIN-PN <u>41-1372525-100</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>464088336</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
For calendar plan year 2017 or fiscal plan year beginning <u>01/01/2017</u> and ending <u>12/31/2017</u>		
A Name of plan <u>HENKEL OF AMERICA RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>HENKEL OF AMERICA, INC.</u>	D Employer Identification Number (EIN) <u>41-1372525</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	20500000	58370000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	427280518	464088336
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	1511505	1583302
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	449292023	524041638

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	2459673	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2459673	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	446832350	524041638
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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)	58370000	
(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)		58370000
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)	71797	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		71797
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		44802091
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		103243888

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	26034600	
(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)		26034600
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		26034600

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		77209288
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

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

(1) Name: **BAKER TILLY VIRCHOW KRAUSE, LLP**

(2) EIN: **39-0859910**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	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		10000000
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			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☒ Yes ☐ No ☐ Not determined
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4088721. (See instructions.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2017</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017		
A Name of plan HENKEL OF AMERICA RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 HENKEL OF AMERICA, INC.		D Employer Identification Number (EIN) 41-1372525
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): 04-3581074		
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 53
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A		
If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month Day Year		
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? Yes No N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? Yes No N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. Increase Decrease Both No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? Yes No		
11 a Does the ESOP hold any preferred stock? Yes No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) Yes No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? Yes No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2017 v. 170203		

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: 0.0% Investment-Grade Debt: 93.0% High-Yield Debt: 0.0% Real Estate: 0.0% Other: 7.0%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☒ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate line 19(b)?

☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

Henkel of America Retirement Plan

Financial Statements and
Supplementary Information

December 31, 2017 and 2016



BAKER TILLY

Candor. Insight. Results.

Henkel of America Retirement Plan

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December 31, 2017 and 2016

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Independent Auditors' Report

Participants and Administrator
Henkel of America Retirement Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Henkel of America Retirement Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2017 and 2016, and the related statement of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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 conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for 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 ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the plan administrator instructed us not to perform and we did not perform, any auditing procedures with respect to the information summarized in Note 9, which was certified by State Street Bank and Trust Company, N.A. and Prudential Insurance Company of America, the trustees 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 trustees hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained a certification from the trustees as of December 31, 2017 and 2016 and for the years then ended, that the information provided to the plan administrator by the trustees is complete and accurate.

Disclaimer of Opinion

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

Other Matters

The supplemental schedule, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2017, is required by the DOL's Rules and Regulations for Reporting and Disclosures under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

The supplemental schedule, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2017 that accompanies the Plan's financial statements does not disclose the historical cost of certain nonparticipant directed plan assets held by the Plan custodian. Disclosure of this information is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

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 trustees, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, except for the omission of the information discussed in the Other Matters paragraph, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Baker Tilly Virchow Krause, LLP

Philadelphia, Pennsylvania
October 15, 2018

Henkel of America Retirement Plan

Statement of Net Assets Available for Benefits

December 31, 2017 and 2016

	<u>2017</u>	<u>2016</u>
Assets		
Investments at fair value:		
Plan interest in the Henkel of America Master Trust	\$ 464,088,336	\$ 427,280,518
Investment in group annuity contract	<u>1,583,302</u>	<u>1,511,505</u>
Total investments	465,671,638	428,792,023
Employer contribution receivable	<u>58,370,000</u>	<u>20,500,000</u>
Total assets	<u>524,041,638</u>	<u>449,292,023</u>
Liabilities		
Payable to Henkel Corporation Defined Contribution Retirement Plan	-	2,459,673
Accrued expenses	<u>545,964</u>	<u>768,877</u>
Total liabilities	<u>545,964</u>	<u>3,228,550</u>
Net assets available for benefits	<u>\$ 523,495,674</u>	<u>\$ 446,063,473</u>

See notes to financial statements

Henkel of America Retirement Plan

Statement of Changes in Net Assets Available for Benefits

Years Ended December 31, 2017 and 2016

	<u>2017</u>	<u>2016</u>
Additions		
Investment income:		
Plan interest in the Henkel of America Master Trust investment income	\$ 46,080,381	\$ 28,218,077
Interest and dividends	<u>71,797</u>	<u>72,359</u>
Net investment income	46,152,178	28,290,436
Employer contribution	<u>58,370,000</u>	<u>20,500,000</u>
Total additions	<u>104,522,178</u>	<u>48,790,436</u>
Deductions		
Benefits paid to participants	26,950,130	34,647,694
Administrative fees and expenses	<u>48,569</u>	<u>584,294</u>
Total deductions	<u>26,998,699</u>	<u>35,231,988</u>
Net Transfers Out (Note 1)	<u>(91,278)</u>	<u>(2,194,185)</u>
Net increase	77,432,201	11,364,263
Net Assets Available for Benefits		
Beginning of year	<u>446,063,473</u>	<u>434,699,210</u>
End of year	<u><u>\$ 523,495,674</u></u>	<u><u>\$ 446,063,473</u></u>

See notes to financial statements

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

1. Description of Plan

The following description of the Henkel of America Retirement Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined benefit pension plan established in 1977 and restated as of January 1, 2015, covering non-union employees of Henkel of America, Inc. (the "Company") who were hired prior to January 1, 2003. The Henkel of America, Inc. Benefits Administrative Committee (the "Committee") and the plan administrator control and manage the operation and administration of the Plan. State Street Bank and Trust Company, N.A. ("State Street") and Prudential Insurance Company of America ("Prudential") (collectively, the "Trustees") serve as the trustees of the Plan. The Plan's investments are held primarily in the Henkel of America Master Trust (the "Master Trust"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective January 1, 2003, the Plan was frozen to participation.

Effective September 2, 2013, the Plan was amended to allow for certain terminated vested participants to receive a distribution of their vested benefits if certain requirements were met for a period of time as defined.

The Company purchased GCP Applied Technologies Inc.'s Darex Packaging Technologies business ("GCP") on July 3, 2017, and the Plan was subsequently amended to include certain GCP employees who became employees of Henkel Technology Corporation ("HTC") at the Cambridge, Massachusetts location who are represented by a union, as Plan participants under employment of HTC. HTC adopted the Plan as of July 3, 2017.

Pension Benefits

Eligible participants with five or more years of service are fully vested and entitled to pension benefits (beginning at normal retirement age, which is 65) equal to 1.15 percent of their average monthly compensation for the 35 year period ending with the calendar year in which the participant attains their Social Security Retirement Age, plus 0.4 percent of that portion of the participant's average monthly compensation, if any, that exceeds covered compensation as defined by the Plan (maximum 30 years). Reduced early retirement benefits may be elected by a participant based upon the qualifications of the predecessor plan to which they participated. Former participants of certain predecessor plans shall have their benefit calculated under this Plan offset by their benefit under the predecessor plan, as defined.

Generally, payment of benefits will be in the form of a single life annuity for unmarried participants and a joint and survivor annuity for married participants, unless the participant, with spousal consent, elects another form of benefit permitted by the Plan. Other forms of pension benefit payments are available at the participant's option. The distribution of a benefit to any participant entitled to receive a benefit will commence no later than April 1 of the following calendar year in which the participant (1) attains age 70½ or (2) the calendar year in which the participant retires.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

Death and Disability Benefits

If a married vested participant dies prior to retirement, then a monthly survivor annuity is payable to the surviving spouse. If the participant dies after their earliest retirement age, then the surviving spouse would receive the same benefit that would have been payable to the spouse had the participant retired on the day before his or her death. If the participant dies before their earliest retirement age, then the surviving spouse would receive the same benefit that would have been payable to the spouse had the participant survived to their earliest retirement age. If an active employee with five or more years of service dies after their earliest retirement age, then the surviving spouse is eligible to receive an additional supplemental death benefit, as defined in the plan document.

A participant who becomes disabled while an employee of the Company is eligible to receive a benefit commencing at normal retirement based on continuous service, determined as though the participant had continued in active employment to age 65.

Net Transfers Out

Transfers in of \$238,737 and transfers out of \$330,015 as of December 31, 2017 represent reallocations of assets within the Master Trust between the Plan and any affiliated plan of the Company. Transfers in of \$265,488 and transfers out of \$2,459,673 as of December 31, 2016 represent reallocations of assets within the Master Trust between the Plan and any affiliated plan of the Company.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance 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, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the plan document. Expenses that are paid directly by the Company, including actuarial fees, insurance premiums, legal fees, and accounting fees, are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. Accrued expenses include investment and administrative expenses. Certain investment related expenses are included in the plan interest in the Master Trust investment income presented in the accompanying Statement of Changes in Net Assets Available for Benefits.

Investment Valuation and Income Recognition

Investments in the Master Trust and the group annuity contract are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Committee determines the Plan's valuation policies utilizing information provided by the Trustees. See Note 6 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on the trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Investment income includes the Plan's interest in the Master Trust's and the group annuity contract gains and losses on investments bought and sold as well as held during the year.

Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits presented below is based on an actuarial valuation as of January 1, 2017, prepared by the Plan's actuary, Mercer, using the present value of accrued benefits.

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits earned under the Plan are based on employees' compensation and years of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment are included, to the extent they are attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary, and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The actuarial present values of accumulated plan benefits as of January 1, 2017 is as follows:

Vested benefits:	
Retired participants and beneficiaries currently receiving benefit payments	\$ 181,929,108
Other participants	<u>213,693,346</u>
Total vested benefits	395,622,454
Nonvested benefits	<u>9,620,963</u>
Actuarial present value of accumulated plan benefits	<u>\$ 405,243,417</u>

The changes in actuarial present value of accumulated plan benefits for the year ended December 31, 2016 are as follows:

Actuarial present value of accumulated plan benefits, at beginning of year	\$ 407,197,384
Increase (decrease) during the year attributable to:	
Benefits accumulated and experience gains or losses	7,611,602
Increase for interest due to decrease in discount period	20,204,983
Benefits paid	(34,412,328)
Change in actuarial assumptions	<u>4,641,776</u>
Actuarial present value of accumulated plan benefits, at end of year	<u>\$ 405,243,417</u>

Significant assumptions underlying the actuarial computations for the year ended December 31, 2016 are as follows:

Interest rate	5.10 percent in 2016 and 5.20 percent in 2015
Mortality	RP-2014 Mortality Tables adjusted to remove post-2007 projection factors
Retirement age	Age 65

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

The assumed rate of interest used to value the present value of accumulated plan benefits changed to 5.10 percent from 5.20 percent for the year ended December 31, 2016, resulting in an increase of \$4,641,776 in the actuarial present value of accumulated benefits for the year ended December 31, 2016. The Plan's actuary evaluated the actuarial present value of accumulated plan benefits using the MP-2017 improvement scale and determined its impact is not material.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

Recent Accounting Pronouncements

During February 2017, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2017-06, *Plan Accounting: Defined Benefit Pension Plans (Topic 960); Defined Contribution Pension Plans (Topic 962); Health and Welfare Benefit Plans (Topic 965): Employee Master Trust Reporting*. ASU 2017-06 clarifies presentation requirements for a plan's interest in a master trust. The amendments also eliminate redundancy relating to 401(h) account disclosures. ASU 2017-06 is effective for fiscal years beginning after December 15, 2018. Early adoption is permitted. The amendment should be applied retroactively to each period for which financial statements are presented.

Subsequent Events

The Plan has evaluated subsequent events for recognition or disclosure through October 15, 2018, the date the financial statements were available to be issued.

3. Related Party Transactions and Party In Interest Transactions

The Plan's investments are administered under a contract with State Street Bank and Trust Company, N.A. and Prudential Insurance Company of America, the trustees of the Plan. Contributions are held and managed by the Trustees, who invest cash received, interest, and dividend income and make distributions to participants. These transactions qualify as party in interest transactions which are exempt from the prohibited transactions rules of ERISA.

Certain expenses of the Trustees are paid by the Plan related to plan operations and investment activity described in Note 2. Additionally, certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

4. Funding Policy

The Plan's funding policy is for the Company to make annual contributions to the Plan as determined by the Plan's independent actuary in amounts necessary to provide the Plan with assets sufficient to fund participants' benefits by the time they retire. No participant contributions are permitted. The minimum funding requirements of ERISA were met for 2017 and 2016.

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

5. Plan Termination

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

1. Annuity benefits former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. government agency) up to the applicable limitations (discussed subsequently).
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at the time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

6. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

Level 2 - Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observables and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value by the Plan and in the Master Trust. There have been no changes in the methodologies used at December 31, 2017 and 2016.

Short-term investments consist of cash and cash equivalents, foreign currencies, the State Street Short Term Investment Fund and U.S. Treasury Bills. The State Street Short Term Investment Fund is valued at net asset value ("NAV") of shares held at year end. Foreign currencies and U.S. Treasury Bills are valued based on quoted market prices in the active markets on which the individual securities are traded.

Common stocks are valued based on quoted market prices in the active markets on which the individual securities are traded.

Corporate debt obligations are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The collective trusts and commingled funds are valued at the NAV of units of a bank collective trust. The collective trusts and commingled funds are valued at the NAV of the unit values of such funds held by the Plan at year end. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the collective trusts and commingled funds, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

U.S. government agency securities are valued using pricing models maximizing the use of observable inputs for similar securities.

The private equity limited partnerships are valued at NAV in a manner consistent with fair value guidance. The values assigned are based upon the general partners estimates and assessment of each underlying investment, incorporating valuation techniques that consider the evaluation of financing and sale transactions with third parties, EBITDA (earnings before interest, taxes, depreciation, and amortization) multiples, expected cash flows and market-based information, including comparable transactions, and performance multiples, among other factors. The Committee considers fair value measurements based on valuations provided by the general partners. The private equity limited partnerships have unfunded commitments and redemption restrictions and are classified as Level 3 in the fair value hierarchy. The redemption restrictions do not have a material impact on the stated NAV's of the limited partnerships, which represent fair value, as of December 31, 2017 and 2016.

The group annuity contract is valued at contract value which approximates fair value based on unobservable inputs, as observable inputs are not available, using valuation methodologies to determine fair value to include discounted cash flow and other similar techniques.

Other investments include options on equity securities, valued based on other observable inputs directly or indirectly through corroboration with observable market data.

The following table sets forth by level, within the fair value hierarchy, the Plan's fair value measurements at December 31, 2017:

	Assets at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Prudential group annuity contract	\$ -	\$ -	\$ 1,583,302	\$ 1,583,302
Total assets, excluding Plan interest in Master Trust, at fair value	\$ -	\$ -	\$ 1,583,302	\$ 1,583,302

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table sets forth by level, within the fair value hierarchy, the Plan's fair value measurements at December 31, 2016:

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Prudential group annuity contract	\$ -	\$ -	\$ 1,511,505	\$ 1,511,505
Total assets, excluding Plan interest in Master Trust, at fair value	\$ -	\$ -	\$ 1,511,505	\$ 1,511,505

Investments Measured Using NAV per Share Practical Expedient

The following table summarizes investments measured at fair value based on NAV per share as of December 31, 2017 and 2016, respectively.

	December 31, 2017			
	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Collective trusts and commingled funds	\$ 191,014,706	\$ -	Daily	N/A
	December 31, 2016			
	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Collective trusts and commingled funds	\$ 263,516,227	\$ -	Daily	N/A

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of that financial instrument, and the significant unobservable inputs and the ranges of values for those inputs.

Instrument	Fair Value December 31, 2017	Fair Value December 31, 2016	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Prudential group annuity contract	\$ 1,583,302	\$ 1,511,505	Discounted Cash Flow	Risk-adjusted discount rate	4.75%

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2017 and 2016:

	Group Annuity Contract
Balance, December 31, 2015	\$ 1,439,146
Interest	<u>72,359</u>
Balance, December 31, 2016	1,511,505
Interest	<u>71,797</u>
Balance, December 31, 2017	<u>\$ 1,583,302</u>

7. Contract with Insurance Company

In 2017 and 2016, the Plan was invested in an unallocated group annuity contract with Prudential. The group annuity contract represents coverage for a small number of employees under a predecessor plan. The crediting interest rate and average yield was 4.75 percent for the years ended December 31, 2017 and 2016.

8. Interest in Master Trust

The Master Trust was established for the investment of the Plan's assets and other sponsored employee benefit plans of the Company. As of December 31, 2017 and 2016, the Plan's undivided interest in the net assets of the Master Trust was approximately 47 percent.

The value of the Plan's interest in the Master Trust is based on the beginning of year value of the Plan's interest plus actual contributions and allocated investment income less actual distributions and allocated administrative expenses. Investment income and administrative expenses of the Master Trust are allocated to the participating plans based on the plans' proportionate beneficial interest in the Master Trust during the year.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table presents the net assets of the Master Trust as of December 31, 2017 and 2016:

	2017	2016
Investments:		
Short-term investments	\$ 82,881,823	\$ 41,285,269
Common stocks	4,718	99,353,090
Corporate debt obligations	687,312,812	485,008,244
Collective trusts and commingled funds	191,014,706	263,516,227
U.S. government agency securities	12,037,875	9,655,464
Private equity limited partnerships	7,732,396	10,239,716
Other	-	406,342
Total investments	980,984,330	909,464,352
Cash	4,300,339	-
Foreign currency translation adjustment, net	-	(301,684)
Receivable (payable) on foreign currency contracts, net	116,621	(1,940,734)
Receivables for interest, dividends and securities sold	7,748,725	6,015,757
Total net assets	<u>\$ 993,150,015</u>	<u>\$ 913,237,691</u>

During 2017 and 2016, the Master Trust's investments (including investments bought and sold, as well as held during the year) appreciated (depreciated) as follows:

	2017	2016
Net appreciation (depreciation) in fair value of investments:		
Corporate debt obligations	\$ 29,779,651	\$ 18,060,429
Short term investments	-	10,686
Private equity limited partnerships	511,558	(1,398,345)
Collective trusts and commingled funds	29,985,630	16,612,376
U.S. government agency securities	371,673	311,754
Other	506,910	-
Common stock	15,237,395	1,067,907
Net appreciation in fair value	<u>\$ 76,392,817</u>	<u>\$ 34,664,807</u>

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following are the changes in net assets for the Master Trust for the years ended December 31, 2017 and 2016.

	<u>2017</u>	<u>2016</u>
Net appreciation in fair value	\$ 76,392,817	\$ 34,664,807
Interest, dividends, and other income	26,051,115	25,072,135
(Loss)/gain on foreign exchange contracts	<u>(504,474)</u>	<u>3,850,347</u>
Total investment income	101,939,458	63,587,289
Less investment fee	<u>(2,793,872)</u>	<u>(2,993,114)</u>
Net investment income	99,145,586	60,594,175
Contributions	43,150,000	30,000,000
Transfer in	6,712,349	-
Benefit payments	(68,516,431)	(78,836,537)
Administrative expenses	<u>(579,180)</u>	<u>(478,076)</u>
Increase in net assets	79,912,324	11,279,562
Net assets:		
Beginning of year	<u>913,237,691</u>	<u>901,958,129</u>
End of year	<u>\$ 993,150,015</u>	<u>\$ 913,237,691</u>

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following is a summary of the allocation of net assets of the Henkel of America Master Trust between the plans as of December 31, 2017 and 2016:

	2017		2016	
	Amount	Percentage	Amount	Percentage
Henkel of America Retirement Plan	\$ 464,088,336	47 %	\$ 427,280,518	47 %
Dial Corporation Future Security Plan	248,527,780	25	244,298,659	27
National Starch Consolidated Pension Plan	201,972,431	20	175,308,717	19
Dial Labor Pension Program	66,048,913	7	64,573,451	7
Retirement Plan of GCP Applied Technologies Inc. Chemical Group	8,096,211	1	-	-
Henkel Corporation Defined Contribution Retirement Plan	4,200,304	*	1,577,681	*
Other plans	216,040	*	198,665	*
Total	<u>\$ 993,150,015</u>	<u>100 %</u>	<u>\$ 913,237,691</u>	<u>100 %</u>

* Plan represents less than 1 percent of the Henkel of America Master Trust.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table summarizes the assets measured by level, within the fair value hierarchy at fair value on a recurring basis for the Master Trust as of December 31, 2017:

	Master Trust Investments at Fair Value as of December 31, 2017			
	Level 1	Level 2	Level 3	Total
Short-term investments	\$ 82,881,823	\$ -	\$ -	\$ 82,881,823
Common stocks	4,718	-	-	4,718
Corporate debt obligations	-	687,312,812	-	687,312,812
U.S. government agency securities	-	12,037,875	-	12,037,875
Private equity limited partnerships	-	-	7,732,396	7,732,396
Master Trust investments in the fair value hierarchy	<u>\$ 82,886,541</u>	<u>\$ 699,350,687</u>	<u>\$ 7,732,396</u>	789,969,624
Investments measured at net asset value (a)				<u>191,014,706</u>
Master Trust investments at fair value				<u>\$ 980,984,330</u>

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table summarizes the assets measured by level, within the fair value hierarchy at fair value on a recurring basis for the Master Trust as of December 31, 2016:

Master Trust Investments at Fair Value as of December 31, 2016				
	Level 1	Level 2	Level 3	Total
Short-term investments	\$ 41,285,269	\$ -	\$ -	\$ 41,285,269
Common stocks	99,353,090	-	-	99,353,090
Corporate debt obligations	-	485,008,244	-	485,008,244
U.S. government agency securities	-	9,655,464	-	9,655,464
Private equity limited partnerships	-	-	10,239,716	10,239,716
Other	-	406,342	-	406,342
Master Trust investments in the fair value hierarchy	<u>\$ 140,638,359</u>	<u>\$ 495,070,050</u>	<u>\$ 10,239,716</u>	645,948,125
Investments measured at net asset value (a)				<u>263,516,227</u>
Master Trust investments at fair value				<u>\$ 909,464,352</u>

(a) In accordance with Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the Statement of Net Assets Available for Benefits.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

The following table sets forth a summary of changes in the fair value of the Master Trust's Level 3 assets for the years ended December 31, 2017 and 2016:

	Private Equity Limited Partnerships
Balance, December 31, 2015	\$ 14,124,460
Contributions	19,453
Distributions	(2,786,852)
Realized gains and losses	906,967
Interest and dividends	3,318
Expenses	(74,042)
Unrealized gains and losses	<u>(1,953,588)</u>
Balance, December 31, 2016	10,239,716
Contributions	69,240
Distributions	(2,425,409)
Realized gains and losses	1,256,607
Interest and dividends	81,687
Expenses	(62,896)
Unrealized gains and losses	<u>(1,426,549)</u>
Balance, December 31, 2017	<u>\$ 7,732,396</u>

The amount of total gains or losses for the years ended December 31, 2017 and 2016 attributable to the change in unrealized gains or losses relating to assets still held at the reporting date were \$(1,426,549) and \$(1,953,588), respectively.

9. Information Certified by Trustees

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2017 and 2016. Accordingly, State Street Bank and Trust Company, N.A., a trustee of the Plan, has certified to the completeness and accuracy of those investments held by the Master Trust reported in the accompanying Statement of Net Assets Available for Benefits as of December 31, 2017 and 2016 and the related investment activity of the Master Trust reported in the Statement of Changes in Net Assets Available for Benefits for the years then ended.

Prudential Insurance Company of America, a trustee of the Plan, has certified to the completeness and accuracy of the group annuity contract reported in the accompanying Statement of Net Assets Available for Benefits as of December 31, 2017 and 2016, the supplemental Schedule of Assets (Held at End of Year) as of December 31, 2017, and the related investment activity reported in the Statement of Changes in Net Assets Available for Benefits of the income of the group annuity contract for the years ended December 31, 2017 and 2016.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

10. Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated August 3, 2012, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

11. Risks and Uncertainties

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

In addition, the Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statement of Net Assets Available for Benefits.

As of December 31, 2017 and 2016, the Master Trust had investments of \$101,345,961 and \$193,620,689, respectively, that were concentrated in one fund in 2017 and two funds in 2016.

Henkel of America Retirement Plan

Notes to Financial Statements
December 31, 2017 and 2016

12. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits on the financial statements to Form 5500 at December 31, 2017 and 2016:

	<u>2017</u>	<u>2016</u>
Net assets available for benefits on financial statements	\$ 523,495,674	\$ 446,063,473
Accrued administrative fees and expenses	<u>545,964</u>	<u>768,877</u>
Net assets available for benefits per Form 5500	<u><u>\$ 524,041,638</u></u>	<u><u>\$ 446,832,350</u></u>

The following is a reconciliation of the changes in net assets available for benefits on the financial statements to Form 5500 for the year ended December 31, 2017

Total net increase on the financial statements	\$ 77,432,201
Plus: current year accrued administrative fees and expenses	545,964
Less: prior year accrued administrative fees and expenses	<u>(768,877)</u>
Total net increase on Form 5500	<u><u>\$ 77,209,288</u></u>

Henkel of America Retirement Plan

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

EIN: 41-1372525 Plan No: 002

December 31, 2017

(a)	Identity of Issue (b)	Description of Investment (c)	Cost (d)	Current Value (e)
*	Prudential Insurance Company of America	Group annuity contract (4.75% interest rate)	**	<u>\$ 1,583,302</u>

* A party in interest as defined by ERISA

** Cost information is not available from this custodian. This information is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

Schedule SB, line 26 — Schedule of Active Participant Data

ATTAINED AGE	YEARS OF CREDITED SERVICE										
	UNDER 1	1 – 4	5 – 9	10 – 14	15 – 19	20 – 24	25 – 29	30 – 34	35 – 39	40 & UP	TOTAL
Under 25											
25–29				1							1
30–34				5							5
35–39				24	1						25
40–44				24	21	3					48
45–49				16	17	13	16				62
50–54				25	19	10	12	6			72
55–59				22	23	9	10	8	4		76
60–64				5	5	7	6	4	3	2	32
65–69				2		2	2				6
70 & up				1							1
Total				125	86	44	46	18	7	2	328

In each cell, the number shown is the count of active participants for each age/service combination. Average pay and average account balance are not shown for plans with less than 1,000 active participants.

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

ACTUARIAL ASSUMPTIONS FOR JANUARY 1, 2017 FUNDING VALUATION

ECONOMIC ASSUMPTIONS	
DISCOUNT RATE SPONSOR ELECTIONS	
• Segment rates or full yield curve	Segment
• Look-back months	4
	<u>Stabilized</u> <u>Nonstabilized</u>
• First 5 years	4.16% 1.52%
• Next 15 years	5.72% 3.80%
• Over 20 years	6.48% 4.79%
MORTALITY SPONSOR ELECTIONS	
• Healthy and disabled participants	Section 430(h)(3) prescribed separate static annuitant and nonannuitant mortality tables. These tables are based on the RP-2000 mortality tables projected with mortality improvement to the valuation year plus 7 and 15 years based on Scale AA.
417(e) LUMP SUMS	Liabilities are determined based on the underlying annuity used by the plan to determine the lump sum amount, rather than valuing the lump sum payment. This annuity is valued based on funding interest rates rather than 417(e) rates and current year 417(e) unisex mortality.
CASH BALANCE PLANS	
• Interest accumulation rate	5.10%
• Whipsaw calculations	Not applicable
• Annuity conversion	
– Mortality table	2017 IRC Section 417(e) unisex mortality
– Interest rate basis	Funding segment rates

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

OTHER ECONOMIC ASSUMPTIONS																							
<ul style="list-style-type: none">Salary increases	<table><tr><th>ATTAINED AGE</th><th>PERCENTAGE</th></tr><tr><td>37 and below</td><td>7.50%</td></tr><tr><td>38 – 42</td><td>6.00%</td></tr><tr><td>43 – 49</td><td>4.00%</td></tr><tr><td>50 – 56</td><td>2.75%</td></tr><tr><td>57 and up</td><td>2.50%</td></tr></table>	ATTAINED AGE	PERCENTAGE	37 and below	7.50%	38 – 42	6.00%	43 – 49	4.00%	50 – 56	2.75%	57 and up	2.50%										
	ATTAINED AGE	PERCENTAGE																					
	37 and below	7.50%																					
	38 – 42	6.00%																					
	43 – 49	4.00%																					
	50 – 56	2.75%																					
57 and up	2.50%																						
<ul style="list-style-type: none">Social Security wage base	3.75% per year																						
<ul style="list-style-type: none">Inflation	2.25% per year																						
<ul style="list-style-type: none">Expected investment return	5.40% for 2015 and 2016, 5.00% for 2017																						
<ul style="list-style-type: none">Expenses	\$0 added to current year normal cost; expenses are not paid from the trust																						
DEMOGRAPHIC ASSUMPTIONS																							
<ul style="list-style-type: none">Withdrawal	See table of sample rates.																						
<ul style="list-style-type: none">Disability incidence	82% of the 1985 Pension Disability Study of the Conference of Consulting Actuaries Class 1 table (sex-distinct)																						
<ul style="list-style-type: none">Retirement age	<table><tr><th>ATTAINED AGE</th><th>PERCENTAGE</th></tr><tr><td>55 – 56</td><td>8%</td></tr><tr><td>57 – 58</td><td>9%</td></tr><tr><td>59</td><td>10%</td></tr><tr><td>60 – 61</td><td>15%</td></tr><tr><td>62</td><td>20%</td></tr><tr><td>63 – 64</td><td>30%</td></tr><tr><td>65 – 66</td><td>40%</td></tr><tr><td>67</td><td>45%</td></tr><tr><td>68 – 69</td><td>50%</td></tr><tr><td>70</td><td>100%</td></tr></table>	ATTAINED AGE	PERCENTAGE	55 – 56	8%	57 – 58	9%	59	10%	60 – 61	15%	62	20%	63 – 64	30%	65 – 66	40%	67	45%	68 – 69	50%	70	100%
	ATTAINED AGE	PERCENTAGE																					
	55 – 56	8%																					
	57 – 58	9%																					
	59	10%																					
	60 – 61	15%																					
	62	20%																					
	63 – 64	30%																					
	65 – 66	40%																					
	67	45%																					
68 – 69	50%																						
70	100%																						
<ul style="list-style-type: none">Benefit commencement age for																							
<ul style="list-style-type: none">– Future vested deferred	62																						
<ul style="list-style-type: none">– Current vested deferred	62																						

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

• Spouse assumptions	<u>MALE PARTICIPANTS</u>		<u>FEMALE PARTICIPANTS</u>
– Percentage married	80%		80%
– Spouse age difference	3 years younger		3 years older
FORM OF PAYMENT – MARRIED	<u>LUMP SUM</u>	<u>SINGLE LIFE</u>	<u>50% J&S</u>
• Active retirements	70%	30%	0%
• Future vested deferred	50%	25%	25%
• Future disabilities	70%	30%	0%
• Future deaths	70%	30%	0%
• Current vested deferred	50%	25%	25%
FORM OF PAYMENT – SINGLES	<u>LUMP SUM</u>	<u>SINGLE LIFE</u>	
• Active retirements	70%	30%	
• Future vested deferred	50%	50%	
• Future disabilities	70%	30%	
• Future deaths	70%	30%	
• Current vested deferred	50%	50%	
UNPREDICTABLE CONTINGENT EVENT ASSUMPTIONS	Not applicable.		

Table of Sample Rates
Sample withdrawal rates

ATTAINED AGE	RATE
25	18.00%
30	12.00%
35	9.00%
40	7.00%
45	7.00%
50	7.00%
55	7.00%
62	7.00%

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

RATIONALE FOR ECONOMIC ASSUMPTIONS

- **Discount rate** – The discount rate assumption for funding purposes is prescribed by the plan sponsor through an election from allowable alternatives under IRS regulations.
- **417(e) lump sums** – The 417(e) lump sum assumptions for funding purposes are prescribed by IRS Section 430 and relevant regulations.
- **Cash balance interest accumulation rate** – The plan's interest crediting rate is the greater of the yield on thirty-year Treasury bonds, or 5%. We have assumed that the average yield on the thirty-year Treasury bonds over the typical accumulation period will be less than 5%, based on Mercer Investment Consulting's Capital Market Outlook.
- **Salary increases** – The age-graded salary increases are based on an experience study undertaken in 2015 using data from plan years 2010 to 2014. The plan sponsor believes that this age-graded structure is representative of anticipated future experience.
- **Social Security wage base** – This assumption is equal to 75 basis points higher than inflation based on historical experience of national real wage growth.
- **Inflation** – The inflation assumption is based on the inflation assumption periodically published by Mercer Investment Consulting in their Capital Markets Outlook.
- **Expected investment return** – The expected rate of return on plan assets for funding purposes is the median rate based on the hypothetical past performance of the plan's target asset mix, adjusted for current market conditions. The expected return on assets assumption is net of an adjustment for investment expenses assumed to be paid from plan assets.
- **Expenses** – Administrative expenses are not paid from the plan trust and are therefore assumed to be \$0.

RATIONALE FOR DEMOGRAPHIC ASSUMPTIONS

- **Withdrawal** – Withdrawal rates are based on an experience study undertaken in 2015 using data from the plan years ending in 2010 to 2014. The plan sponsor believes that this period will be representative of anticipated future experience.
- **Disability Incidence** – The disability incidence table is based on the Conference of Consulting Actuaries 1985 Pension Disability Study Class 1 rates multiplied by 82% because the plan's disability requirements are more stringent than Social Security Disability, which was the basis of the 1985 study.
- **Retirement rates** – The retirement rates are based on a blend of the prior assumed retirement rates and those produced by an experience study undertaken in 2015 using data from the plan years ending in 2010 to 2014, which was given 50% credibility. The plan sponsor's expectation is that actual experience during the review period was lower than would reasonably be expected to continue into the future.

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

- **Vested terminated benefit commencement age** – Benefit commencement age for vested terminated participants is based on an experience study undertaken in 2015 using data from plan years 2010 to 2014. The plan sponsor believes that this period will be representative of anticipated future experience.
- **Percentage married/spouse age difference** – The assumptions regarding percent married/spouse age difference at benefit commencement are based on the actuary's experience with many plans and discussions with employer representatives.
- **Form of payment** – The form of payment assumptions were changed in 2013 for all actives, future vested deferreds, future disabilities and future deaths following the plan's amendment to allow for lump sum payments for all participants upon termination. This assumption places more emphasis on participants taking lump sums to reflect the availability of this optional form and the plan sponsor's corresponding view on anticipated future experience.
- **Mortality for Funding** – The mortality assumption for funding purposes is prescribed by the plan sponsor through an election from allowable alternatives under IRS regulations.

ACTUARIAL METHODS**Asset Methods**

The asset valuation method is an average of the adjusted market value for each year during the last 24 months preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110% and no less than 90% of the fair market value, as defined in IRC Section 430.

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant Methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** Only those employees who have completed the plan's eligibility requirement are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.

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

- **Insurance contracts:** Certain retirees are excluded because they are covered under annuity contracts that are not part of the plan. However, their surviving beneficiaries (if applicable) are included in the valuation as deferred contingent liabilities because they are not covered under the annuity contracts.

Minimum Funding Methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual is the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- This plan provides disability benefits that are only partially based on a participant's accrued benefit or years of service. This benefit is allocated to funding target based on the accrued benefit on the valuation date plus a portion of the excess of the benefit over the accrued benefit multiplied by the ratio of the participant's service at the beginning of the plan year to their service at each decrement age. This benefit is allocated to target normal cost based on the proportionate benefit attributable to the increase in the participant's service and compensation during the plan year.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
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For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

▶ Round off amounts to nearest dollar.

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

A Name of plan HENKEL OF AMERICA RETIREMENT PLAN	B Three-digit plan number (PN) ▶	002
--	---	-----

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF HENKEL OF AMERICA, INC.	D Employer Identification Number (EIN) 41-1372525
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E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500
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Part I	Basic Information
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1 Enter the valuation date: Month 01 Day 01 Year 2017

2 Assets:		
a Market value.....	2a	445,417,157
b Actuarial value	2b	451,380,737

3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1,627	166,134,868	166,134,868
b For terminated vested participants	840	45,186,914	45,186,914
c For active participants	794	141,434,207	150,704,731
d Total	3,261	352,755,989	362,026,513

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐		
a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	

5 Effective interest rate.....	5	5.90%
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6 Target normal cost	6	5,109,284
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Statement by Enrolled Actuary

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

SIGN HERE		
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Signature of actuary	Date 10/12/18
----------------------	------------------

MARCY SIMON

1705311

Type or print name of actuary

Most recent enrollment number

MERCER

215-982-4600

Firm name

Telephone number (including area code)

THREE LOGAN SQUARE
 1717 ARCH STREET, SUITE 1100
 PHILADELPHIA PA 19103

Address of the firm

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

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

Schedule SB (Form 5500) 2017

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	0	125,449,742
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		15,441,253
9 Amount remaining (line 7 minus line 8).....	0	110,008,489
10 Interest on line 9 using prior year's actual return of <u>6.41%</u>	0	7,051,544
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		18,710,335
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.09%</u>		199,087
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return.....		989,784
c Total available at beginning of current plan year to add to prefunding balance.....		19,899,206
d Portion of (c) to be added to prefunding balance.....		19,899,206
12 Other reductions in balances due to elections or deemed elections		
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	136,959,239

Part III Funding Percentages

14 Funding target attainment percentage	14	86.85%
15 Adjusted funding target attainment percentage.....	15	124.68%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	87.87%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
08/29/2018	58,370,000				
Totals ▶			18(b)	58,370,000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	53,079,129

20 Quarterly contributions and liquidity shortfalls:

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

Liquidity shortfall as of end of quarter of this plan year

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

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost		
21	Discount rate:		
	a Segment rates:	1st segment: 4.16 %	2nd segment: 5.72 %
		3rd segment: 6.48 %	☐ N/A, full yield curve used
	b Applicable month (enter code).....	21b	0
22	Weighted average retirement age	22	61
23	Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute		
Part VI	Miscellaneous Items		
24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No		
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
26	Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No		
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	
Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years		
28	Unpaid minimum required contributions for all prior years	28	0
29	Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30	Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0
Part VIII	Minimum Required Contribution For Current Year		
31	Target normal cost and excess assets (see instructions):		
	a Target normal cost (line 6)	31a	5,109,284
	b Excess assets, if applicable, but not greater than line 31a	31b	0
32	Amortization installments:	Outstanding Balance	Installment
	a Net shortfall amortization installment.....	47,605,015	12,068,209
	b Waiver amortization installment		
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	17,177,493
		Carryover balance	Prefunding balance
35	Balances elected for use to offset funding requirement.....	0	17,177,493
36	Additional cash requirement (line 34 minus line 35).....	36	0
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	53,079,129
38	Present value of excess contributions for current year (see instructions)		
	a Total (excess, if any, of line 37 over line 36)	38a	53,079,129
	b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	17,177,493
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0
40	Unpaid minimum required contributions for all years	40	0
Part IX	Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)		
41	If an election was made to use PRA 2010 funding relief for this plan:		
	a Schedule elected	☐ 2 plus 7 years ☐ 15 years	
	b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011	
42	Amount of acceleration adjustment	42	
43	Excess installment acceleration amount to be carried over to future plan years	43	

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

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown below. The average retirement age is 61.

(A)	(B)	(C)	(D)	(E)
Retirement age	Retirement Percent	Lx	Number of employees expected to retire (B) x (C)	(A) x (D)
55	8.0%	1,000.00	80.00	4,400.00
56	8.0%	920.00	73.60	4,121.60
57	9.0%	846.40	76.18	4,342.03
58	9.0%	770.22	69.32	4,020.57
59	10.0%	700.90	70.09	4,135.33
60	15.0%	630.81	94.62	5,677.32
61	15.0%	536.19	80.43	4,906.15
62	20.0%	455.76	91.15	5,651.46
63	30.0%	364.61	109.38	6,891.13
64	30.0%	255.23	76.57	4,900.36
65	40.0%	178.66	71.46	4,645.13
66	40.0%	107.20	42.88	2,829.96
67	45.0%	64.32	28.94	1,939.16
68	50.0%	35.37	17.69	1,202.73
69	50.0%	17.69	8.84	610.21
70	100.0%	8.84	8.84	619.05
Total			1,000.00	60,892.21
Average				60.89

*Schedule SB, Part V — Summary of Plan Provisions***SUMMARY OF MAJOR PLAN PROVISIONS**

Effective date and plan year	Original plan: July 31, 1996 Restated plan: January 1, 2010 Plan year: Calendar Year
Status of the plan	Plan is closed to new entrants as of January 1, 2007. As of January 1, 2007, only grandfathered actives continue to accrue benefits.
Significant events that occurred during the year	None
DEFINITIONS	
• Covered employees	All participants spun off from Dial Companies Retirement Income Plan (DCRIP) immediately became participants in the Future Security Plan.
• Participation	<p>Employees hired after August 1, 1996 and prior to January 1, 2007</p> <ul style="list-style-type: none"> – For period on or prior to December 31, 2000, became participant the January 1 or July 1 following attainment of Age 21 and 1,000 hours of service. – For period on and after January 1, 2001, became participant the first of the month following attainment of Age 21 and 1,000 hours of service. <p>Effective 1/1/2007, plan is closed to new entrants.</p>
• Grandfathered actives	<p>Actives who meet one of the following conditions will continue to accrue benefits after January 1, 2007:</p> <ol style="list-style-type: none"> 1. Disabled as of December 31, 2006, or 2. Age plus service as of December 31, 2006 is at least 50, UNLESS <ol style="list-style-type: none"> a. Under age 50 as of December 31, 2006 with at least 12 years of service, or b. Under age 50 as of December 31, 2006 and the annual DCA credit would be greater than the annual retirement credit under the FSP. <p>Effective January 1, 2012, grandfathered actives who are promoted to Management Circle Level 3b or higher will not accrue additional Benefit Service beginning with the first pay period on or after the first day of the month following sixty days after the participant's promotion.</p>

Schedule SB, Part V — Summary of Plan Provisions

• Employee contributions	None														
• Vesting service	Elapsed time from date of hire														
• Compensation	The sum of regular basic earnings, overtime, bonuses, and commissions, as limited by IRC Section 401(a)(17).														
• Retirement Account	<p>An individual account is established for each participant starting from the later of date of participation or January 1, 2001. The account will grow with retirement credits and interest credits over time. Retirement credits are based on age as follows:</p> <table> <tr> <th>AGE</th><th>PERCENTAGE OF PAY</th></tr> <tr> <td>Less than 30</td><td>3%</td></tr> <tr> <td>30 – 34</td><td>4</td></tr> <tr> <td>35 – 39</td><td>5</td></tr> <tr> <td>40 – 44</td><td>6</td></tr> <tr> <td>45 – 49</td><td>8</td></tr> <tr> <td>50 or more</td><td>10</td></tr> </table>	AGE	PERCENTAGE OF PAY	Less than 30	3%	30 – 34	4	35 – 39	5	40 – 44	6	45 – 49	8	50 or more	10
AGE	PERCENTAGE OF PAY														
Less than 30	3%														
30 – 34	4														
35 – 39	5														
40 – 44	6														
45 – 49	8														
50 or more	10														
• Interest Credits	30-year treasury rate during the month of October preceding the plan year (subject to 5% minimum and 10% maximum)														
• Prior Formula Benefit	Annuity benefit under the prior average pay formula as of January 1, 2001. Benefit is increased by the ratio of base pay at termination to base pay at January 1, 2001. The base pay used in the ratio is not greater than the five-year average of the IRS-mandated limits on pay.														
NORMAL RETIREMENT															
• Eligibility	Age 65														
• Benefit	Total value of Retirement Account plus Prior Formula Benefit														
EARLY RETIREMENT															
• Eligibility	Age 55 and 10 years of Service														
• Benefit	Total value of Retirement Account plus Prior Formula Benefit, reduced for early commencement by 3% per year between ages 62 and 65, and 5% per year between ages 55 and 62.														

Schedule SB, Part V — Summary of Plan Provisions

DEFERRED VESTED									
<ul style="list-style-type: none"> Eligibility 	<p>A participant with an hour of service on or after January 1, 2008 shall have a right to all or a portion of the accrued benefit as follows:</p> <table> <tr> <th>YEAR OF SERVICE</th><th>VESTED PERCENTAGE</th></tr> <tr> <td>1</td><td>33.33%</td></tr> <tr> <td>2</td><td>66.67%</td></tr> <tr> <td>3</td><td>100.00%</td></tr> </table>	YEAR OF SERVICE	VESTED PERCENTAGE	1	33.33%	2	66.67%	3	100.00%
YEAR OF SERVICE	VESTED PERCENTAGE								
1	33.33%								
2	66.67%								
3	100.00%								
<ul style="list-style-type: none"> Benefit 	<p>Total value of Retirement Account plus Prior Formula Benefit payable at age 65. Prior to normal retirement, Prior Formula Benefit is reduced by 3% per year between ages 62 and 65, 5% per year between ages 55 and 62, and actuarial reduction thereafter. Benefit is only payable prior to early retirement age if the participant does not have a grandfathered non-qualified benefit.</p>								
DISABILITY									
<ul style="list-style-type: none"> Eligibility 	5 years of service								
<ul style="list-style-type: none"> Benefit 	<p>Total value of Retirement Account plus Prior Formula Benefit payable at age 65. Participant continues to receive pay-based credits until normal retirement age (if grandfathered). Compensation during disability period is assumed to be equal to compensation immediately preceding the date of disability.</p>								
PRE-RETIREMENT DEATH (CASH BALANCE)									
<ul style="list-style-type: none"> Eligibility 	Participant or former participant, vested or partially vested								
<ul style="list-style-type: none"> Benefit (spousal) 	Cash Balance or Single Life Annuity payable immediately								
<ul style="list-style-type: none"> Benefit (non-spousal) 	Cash Balance payable immediately to beneficiary or estate								
PRE-RETIREMENT SURVIVING SPOUSE BENEFIT (PRIOR FORMULA BENEFIT)									
<ul style="list-style-type: none"> Eligibility 	Participant or former participant, vested or partially vested								

Schedule SB, Part V — Summary of Plan Provisions

<ul style="list-style-type: none"> Benefit (spousal) (If participant has a grandfathered non-qualified benefit) 	The monthly Prior Formula Benefit is determined as though the employee had retired or terminated the day before his death, survived to his earliest possible commencement date, and elected a reduced benefit in the form of a 50% joint and survivor annuity.
<ul style="list-style-type: none"> Benefit (spousal) (If participant does not have a grandfathered non-qualified benefit) 	The monthly Prior Formula Benefit is determined as though the employee had retired or terminated the day before his death, and elected a reduced benefit in the form of a 50% joint and survivor annuity.
FORM OF BENEFITS	
<ul style="list-style-type: none"> Automatic form for unmarried participants 	Life annuity. Retirement Account may be taken as a lump sum.
<ul style="list-style-type: none"> Automatic form for married participants 	50% joint and survivor annuity, actuarially reduced. Retirement Account may be taken as a lump sum.
<ul style="list-style-type: none"> Optional forms (prior to early retirement eligibility for participants who do not have grandfathered non-qualified benefits) 	<ul style="list-style-type: none"> Life annuity 50%, 75% or 100% Joint and Survivor annuities 10 Year Certain and Life annuity Lump sum – lump sum is based on the age 65 benefit.
<ul style="list-style-type: none"> Optional forms (after early retirement eligibility) 	<ul style="list-style-type: none"> Life, 50%, 75% and 100% Joint and Survivor annuities 10 Year Certain and Life annuity Lump sum - lump sum is based on a benefit as of the later of current age or age 60 (Prior Formula Benefit not available as a lump sum for participants who terminated prior to June 1, 2008 and have a grandfathered non-qualified benefit).
<ul style="list-style-type: none"> Actuarial equivalence 	<ul style="list-style-type: none"> Optional Forms: 7.5% interest, 1971 TPF&C mortality (6 year setback for beneficiaries) Lump Sum conversion: 417(e)(3) assumptions for interest and mortality. Stability Period = one month. Lookback = fifth month prior to the date of distribution.
MISCELLANEOUS	
<ul style="list-style-type: none"> Maximum compensation 	Annual compensation may not exceed the limits in IRC Section 401(a)(17). This limit is indexed annually. For 2017, the limit is \$270,000.

Schedule SB, Part V — Summary of Plan Provisions

• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2017, the limit is \$215,000.
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Benefits Included or Excluded

Unless noted below, all benefits provided by the plan, as restated effective January 1, 2010 and amended through January 1, 2017, are included in this valuation.

- **Most recent plan amendments included:** Amendment #4, adopted August 30, 2013.
- **Plan amendments excluded:** None.
- **Late retirement increases:**
 - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement; therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70½. This valuation includes increases for current participants over age 70.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued including a retroactive lump sum as of the valuation date. The amount of the lump sum is actuarially equivalent to a temporary life annuity of missed payments from age sixty-five to the valuation date.
- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Additional Benefits Included or Excluded

- **IRC Section 436 benefit restrictions:**
 - *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits that occurred before the valuation date but includes contingent event benefits which are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
 - *Plan amendments:* See above.
 - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
 - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.

Schedule SB, Part V — Summary of Plan Provisions

- **Scheduled benefit increases:** Scheduled benefit increases effective after the end of the current plan year are excluded from minimum funding requirements.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.

PLAN PROVISION CHANGES SINCE PRIOR VALUATION

Maximum benefit amounts under IRS rules were updated from 2016 to 2017.

Henkel of America Retirement Plan

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

EIN: 41-1372525 Plan No: 002

December 31, 2017

(a)	Identity of Issue (b)	Description of Investment (c)	Cost (d)	Current Value (e)
*	Prudential Insurance Company of America	Group annuity contract (4.75% interest rate)	**	\$ 1,583,302

* A party in interest as defined by ERISA

** Cost information is not available from this custodian. This information is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

Schedule SB, line 32 — Schedule of Amortization Bases

The total shortfall amortization charge is the sum of the individual shortfall amortization installment for each plan year covered under PPA. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

SHORTFALL BASES					
YEAR ESTABLISHED		OUTSTANDING BALANCE	YEARS REMAINING		2017 INSTALLMENT
2016	\$	931,328	6	\$	173,320
2017		5,514,702	7		905,579
Total	\$	6,446,030		\$	1,078,899

Schedule SB, line 24 — Change in Actuarial Assumptions

ACTUARIAL ASSUMPTION CHANGES SINCE PRIOR VALUATION

- The inflation rate, social security wage base increase and cash balance interest accumulation rate were updated to better reflect expected future plan experience.
- Expected investment return was changed from 5.40% for 2016 to 5.00% for 2017.

Schedule SB, line 26 — Schedule of Active Participant Data

ATTAINED AGE	YEARS OF CREDITED SERVICE										
	UNDER 1	1 – 4	5 – 9	10 – 14	15 – 19	20 – 24	25 – 29	30 – 34	35 – 39	40 & UP	TOTAL
Under 25											
25–29				1							1
30–34				5							5
35–39				24	1						25
40–44				24	21	3					48
45–49				16	17	13	16				62
50–54				25	19	10	12	6			72
55–59				22	23	9	10	8	4		76
60–64				5	5	7	6	4	3	2	32
65–69				2		2	2				6
70 & up				1							1
Total				125	86	44	46	18	7	2	328

In each cell, the number shown is the count of active participants for each age/service combination. Average pay and average account balance are not shown for plans with less than 1,000 active participants.

Schedule SB, line 32 — Schedule of Amortization Bases

The total shortfall amortization charge is the sum of the individual shortfall amortization installment for each plan year covered under PPA. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

SHORTFALL BASES					
YEAR ESTABLISHED		OUTSTANDING BALANCE	YEARS REMAINING		2017 INSTALLMENT
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