

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: 24pt; font-weight: bold;">2018</div> This Form is Open to Public Inspection
---	---	---

Part I	Annual Report Identification Information		
For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</u>			
A	This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)	
	☒ a single-employer plan ☐ a DFE (specify) ____		
B	This return/report is:	☐ the first return/report ☐ the final return/report	
	☐ an amended return/report ☐ a short plan year return/report (less than 12 months)		
C	If the plan is a collectively-bargained plan, check here. ▶ ☐		
D	Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program	
	☐ special extension (enter description)		

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>THE MILLIKEN RETIREMENT PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>335</u>
		1c	Effective date of plan <u>01/01/1965</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>MILLIKEN & COMPANY</u> <u>PO BOX 1926, M-280</u> <u>SPARTANBURG, SC 29304</u>	2b	Employer Identification Number (EIN) <u>51-0105342</u>
		2c	Plan Sponsor's telephone number <u>864-503-1493</u>
		2d	Business code (see instructions) <u>314000</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.	10/11/2019	BRAD A. JOHNSON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/11/2019	BRAD A. JOHNSON
	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 (2018)
v. 171027

3a Plan administrator's name and address ☐ Same as Plan Sponsor MILLIKEN BENEFITS COMMITTEE PO BOX 1926, M-285 SPARTANBURG, SC 29304	3b Administrator's EIN 57-0627192 3c Administrator's telephone number 864-503-6083
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 11305
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 5929 6a(2) 6021 6b 180 6c 3703 6d 9904 6e 147 6f 10051 6g 9111 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: 2E 2F 2G 2J 2S 2T 3F 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
---	---

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **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 2018 Form M-1 annual report. If the plan was not required to file the 2018 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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2018
		This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan THE MILLIKEN RETIREMENT PLAN	B Three-digit plan number (PN) ▶	335
C Plan sponsor's name as shown on line 2a of Form 5500 MILLIKEN & COMPANY	D Employer Identification Number (EIN) 51-0105342	

Part I	Service Provider Information (see instructions)
---------------	--

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

- 1 Information on Persons Receiving Only Eligible Indirect Compensation**
- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
AMERICAN FUNDS	PO BOX 6007 INDIANAPOLIS, IN 46206

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
BRANDES FUNDS	11988 EL CAMINO REAL SUITE 600 PO BOX 919048 SAN DIEGO, CA 92191

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
DODGE AND COX	BOSTON FINANCIAL DATA SERVICES PO BOX 8422 BOSTON, MA 02266

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
VANGUARD MARKETING CORP	100 VANGUARD BLVD MALVERN, PA 19355

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

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

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

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

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

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

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

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

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

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

T ROWE PRICE RPS INC

100 EAST PRATT STREET
BALTIMORE, MD 21202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	NONE	82609	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BRANDES INST INT'L EQUITY, I 11988 EL CAMINO REAL SUITE 600 PO BOX 919048 SAN DIEGO, CA 92191	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DODGE & COX INCOME BOSTON FINANCIAL DATA SERVICES PO BOX 8422 BOSTON, MA 02266	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.08%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP US TREASURY MONEY MARKET TRUST 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.045%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE STK FND-GROWTH 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.07%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE STK FND-VALUE 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.07%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE STOCK FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.07%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 33 37 38 49 50 52 55 59 62 64 65 71	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP INTERMEDIATE BOND INDEX FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.06%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <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 2018 This Form is Open to Public Inspection.
---	--	--

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan <u>THE MILLIKEN RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>335</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>MILLIKEN & COMPANY</u>	D Employer Identification Number (EIN) <u>51-0105342</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)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2055 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-016</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4552657</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2050 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-015</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5802243</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2045 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-014</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>12416640</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2040 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-013</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>20275859</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2035 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-012</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>31843001</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2030 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-011</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>56392505</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE RETIREMENT 2025 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6785642-010</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>70571300</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2020 TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63782672
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2015 TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-008	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26553250
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2010 TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-007	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11253671
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2005 TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8539367
--------------------------------	------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT INC TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-005	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7883585
--------------------------------	------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2060 TRUST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 35-6785642-018	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 981468
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE U.S. TR MONEY MKT TST

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN 52-6559833-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 113977639
--------------------------------	------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: COLLECTIVE TR GOV. SH TM INV. FD

b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON

c EIN-PN 81-6243181-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
--------------------------------	------------------------	---

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

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

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

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

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

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

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.	<small>OMB No. 1210-0110</small> 2018 This Form is Open to Public Inspection
For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan THE MILLIKEN RETIREMENT PLAN	B Three-digit plan number (PN) ►	335
C Plan sponsor's name as shown on line 2a of Form 5500 MILLIKEN & COMPANY	D Employer Identification Number (EIN) 51-0105342	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)	35659393	30732996
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	30015718	32646161
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	2503000	0
(B) Common.....	1c(4)(B)	370224589	338420834
(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)	17818287	16576272
(9) Value of interest in common/collective trusts	1c(9)	463534995	434825857
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	234871843	200880118
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	2158683	0

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	1156786508	1054082238

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	249291	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	249291	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1156537217	1054082238
---	-----------	------------	------------

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)	13281379	
(B) Participants	2a(1)(B)	22711750	
(C) Others (including rollovers)	2a(1)(C)	915414	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		36908543
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)	734565	
(C) Corporate debt instruments	2b(1)(C)	782726	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	854337	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2371628
(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)	7440435	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		7440435
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	92543647	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	88287924	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		4255723
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-14258379	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-14258379

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-16234490
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-22270772
c Other income.....	2c		111549
d Total income. Add all income amounts in column (b) and enter total	2d		-1675763

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	100644587	
(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)		100644587
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		52017
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)	82612	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		82612
j Total expenses. Add all expense amounts in column (b) and enter total	2j		100779216

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-102454979
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: GRANT THORNTON LLP

(2) EIN: 36-6055558

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		25000000
4e	X		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection.
---	---	--

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan <u>THE MILLIKEN RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>335</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MILLIKEN & COMPANY</u>	D Employer Identification Number (EIN) <u>51-0105342</u>

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	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>52-1481931</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

Part III	Amendments
-----------------	-------------------

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) 2018
v. 171027

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

a The current year

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****14c**

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

a The corresponding number for the plan year immediately preceding the current plan year

b The corresponding number for the second preceding plan year

15a**15b**

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

a Enter the number of employers who withdrew during the preceding plan year

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers

16a**16b**

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

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

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

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

- a** Enter the percentage of plan assets held as:

Stock: _____ % Investment-Grade Debt: _____ % High-Yield Debt: _____ % Real Estate: _____ % Other: _____ %

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

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

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

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

Financial Statements and Report of
Independent Certified Public Accountants

The Milliken Retirement Plan

December 31, 2018 and 2017

Table of contents

Report of Independent Certified Public Accountants	1-2
Financial statements:	
Statements of net assets available for benefits	3
Statements of changes in net assets available for benefits	4
Notes to financial statements	5-10
Supplemental schedule:	
Schedule H, Line 4i – Schedule of assets (held at end of year)	11-20

GRANT THORNTON LLP

201 S College Street
Suite 2500
Charlotte, NC 28244-0100

D +1 704 632 3500

F +1 704 334 7701

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Trustees
The Milliken Retirement Plan

Report on the financial statements

We were engaged to audit the accompanying financial statements of The Milliken Retirement Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, the related statements of changes in net assets available for benefits for the years ended December 31, 2018 and 2017, and the related notes to the financial statements.

Management's responsibility for the financial statements

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

Auditor's responsibility

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

Basis for disclaimer of opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the certified information described in Note 3, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the certifying entity meets the requirements of 29 CFR 2520.103-8. The Plan administrator obtained certifications from this entity stating that as of December 31, 2018 and 2017, and for the years then ended, the certified information provided to the Plan administrator 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.

Supplementary information

The supplemental schedule of assets held at the end of year as of December 31, 2018 is presented for purposes of additional analysis and is not a required part of the financial statements, but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Report on form and content in compliance with DOL rules and regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the certified information described in Note 3, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



Charlotte, North Carolina
October 7, 2019

Statements of net assets available for benefits

December 31	2018	2017
	\$	\$
Assets		
Investments, at fair value:		
Participant-directed investments	1,037,505,966	1,138,968,221
Total investments, at fair value	1,037,505,966	1,138,968,221
Receivables:		
Notes receivable from participants	16,576,272	17,818,287
Total receivables	16,576,272	17,818,287
Total assets	1,054,082,238	1,156,786,508
Liabilities		
Payables:		
Payable for unsettled trades	-	249,291
Total liabilities	-	249,291
Net assets available for benefits	1,054,082,238	1,156,537,217

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

Statements of changes in net assets available for benefits

For the years ended December 31	2018	2017
	\$	\$
Additions:		
Investment (loss) income, net:		
Net (depreciation) appreciation in fair value of investments	(50,342,203)	166,237,818
Interest and dividends	10,903,560	9,750,314
Investment (loss) income, net:	(39,438,643)	175,988,132
Contributions:		
Employer	13,281,379	12,952,127
Participant	22,711,750	21,520,352
Rollover	915,414	5,981,409
Total contributions	36,908,543	40,453,888
Interest income on notes receivable from participants	854,337	838,758
Deductions:		
Benefits paid to participants	100,696,604	102,831,285
Administrative expenses	82,612	151,339
Total deductions	100,779,216	102,982,624
(Decrease) Increase in net assets available for benefits	(102,454,979)	114,298,154
Net assets available for benefits:		
Beginning of year	1,156,537,217	1,042,239,063
End of year	1,054,082,238	1,156,537,217

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

Notes to financial statements

1 Description of The Plan

The following description of The Milliken Retirement Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined contribution retirement plan covering associates of Milliken & Company, its participating domestic subsidiaries and certain affiliated companies (collectively, the Company). The Plan currently allows all eligible associates of the Company to participate in the Plan. An associate is eligible to participate in the Plan by making voluntary contributions on the 91st day of service. An associate becomes eligible for employer match on the earlier of the first date on which he or she has attained the age of 21 and completed a year of service or the first date on which he or she has completed two years of service. The Milliken Benefits Administration Committee appointed by the Board of Directors of the Company controls and manages the operations and administration of the Plan. T. Rowe Price Trust Company (the Trustee) serves as the Trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

In January 2012, the Plan was amended to convert to a Safe Harbor Plan. The amendment also included changes to the vesting period. All active participants were 100% vested as of January 1, 2012.

On April 11, 2017, the Keystone Aniline 401(k) and Profit Sharing Plan was merged into the Milliken Retirement Plan. Assets of \$4,819,498 and notes receivable from participants of \$140,031 were transferred into the Plan.

Vesting

Participants are vested immediately in their contributions and any employer contributions. Inactive participants as of January 1, 2012 are fully vested in Company contributions after six years of credited service, based on a graded vesting schedule.

Contributions

Participants may contribute up to 50% of their pretax annual compensation, as defined in the Plan, subject to certain Internal Revenue Code (IRC) limitations. Participants direct the investment of their contributions into various investments offered by the Plan, including mutual funds, separately managed funds and collective trust funds. The Plan matches 100% of the participants' voluntary contributions up to 4% of wages and 50% of the participants' voluntary contributions in excess of 4%, but not exceeding 6% of wages.

Participant Accounts

Individual accounts are maintained for each Plan participant. Each participant's account is credited with the participant's contributions, the Company's contributions and an allocation of Plan earnings and is charged with withdrawals and allocations of Plan losses. Allocations are based on participants' earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Payment of Benefits

Upon termination of service due to death, disability or retirement, a participant or beneficiary may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, a specific amount or installments that can be paid monthly, quarterly, semiannually or annually. For termination of service for other reasons, a participant may receive the value of the vested interest in his or her account in the same manner. Any amount payable under the Plan shall be settled by the payment of one lump sum if the participant's vested account has a balance less than \$1,000.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 and up to a maximum of \$50,000 or 50% of their vested account balance, whichever is less. Loans are secured by an assignment of the participant's vested interest in the Plan and bear interest at a rate commensurate with local prevailing rates at the time funds are borrowed, as determined by the Plan administrator. Principal and interest are paid ratably through payroll deductions. Loan terms shall not exceed five years except for the purchase of a primary residence, in which case, the loan term will be 15 years. Participants may not have more than one loan outstanding at any time. As of December 31, 2018, notes receivable from participants had maturities through 2043 at interest rates ranging from 3.25% to 7.75%.

Forfeited Accounts

During the years ended December 31, 2018 and 2017, employer contributions were reduced by approximately \$90 and \$159,000 respectively, from forfeited nonvested accounts. Forfeited nonvested accounts totaled approximately \$17,000 and \$167,000 at December 31, 2018 and 2017, respectively.

2 Summary of Significant Accounting Policies**Basis of Accounting**

The accompanying financial statements have been prepared on the accrual basis in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are stated at fair value. Fair value of a financial instrument 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. See Note 4 for discussion of fair value measurements.

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

Management fees and operating expenses charged to the Plan for certain types of investments. Consequently, management fees and operating expenses are reflected as a reduction of investment return for certain types of investments.

Risks and Uncertainties

The Plan utilizes various investment instruments. Investment securities, in general, are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, it is 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 financial statements.

Administrative Expenses

Administrative expenses of the Plan are paid by the Plan or the Company, as provided in the Plan document.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded on the accrual basis. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2018 or 2017.

3 Information Certified by Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate:

- Investments, at fair value and notes receivable from participants as shown in the statements of net assets available for benefits as of December 31, 2018 and 2017.
- Investment (loss) income, net and interest income on notes receivable from participants as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2018 and 2017.
- Schedule H, Line 4i – Schedule of assets (held at end of year) as of December 31, 2018.

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

4 Fair Value Measurement of Financial Instruments

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

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

Level 2 – Inputs to the valuation methodology include:

- 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; and
- Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

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

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

The assets' or liabilities' 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 used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

The following is a description of valuation methodologies used for assets recorded at fair value.

Mutual Funds

Shares of registered investment companies (mutual funds) are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Separately Managed Funds

The Plan's investments include separately managed funds, which are separately managed portfolios with varying underlying investments in common stocks, preferred stocks, mutual funds, corporate bonds, U.S. Government securities and municipal bonds. The underlying investments of the separately managed funds are valued as follows:

- Common stocks are valued at the closing price reported in the active market in which the individual security is traded.
- U.S. Government securities and corporate and municipal bonds are valued based on yields currently available on comparable securities of issuers with similar credit ratings. Corporate bonds are highly diversified across various industries in foreign and domestic markets. When quoted prices are not available for identical or similar investments, the investment is valued under a discounted cash flow 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.

Collective Trust Funds

Valued at the NAV of units owned as provided by the Trustee. The Plan is using 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. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor 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.

The following table sets forth by level within the fair value hierarchy a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2018 and 2017.

December 31, 2018	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
	\$	\$	\$	\$
Investments in the fair value hierarchy:				
Mutual funds	182,202,809	-	-	182,202,809
Total mutual funds	182,202,809	-	-	182,202,809
Separately managed funds:				
Common stock	338,420,834	-	-	338,420,834
Mutual funds	18,677,309	-	-	18,677,309
Corporate bonds	-	32,646,161	-	32,646,161
U.S. government securities	-	30,732,996	-	30,732,996
Total separately managed funds	357,098,143	63,379,157	-	420,477,300
Investments at NAV - Collective trust funds:				
Target retirement funds	-	-	-	320,848,218
Money market funds	-	-	-	113,977,639
Total collective trust funds	-	-	-	434,825,857
Total investments	539,300,952	63,379,157	-	1,037,505,966

December 31, 2017	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
	\$	\$	\$	\$
Investments in the fair value hierarchy:				
Mutual funds	211,581,969	-	-	211,581,969
Total mutual funds	211,581,969	-	-	211,581,969
Separately managed funds:				
Common stock	370,224,589	-	-	370,224,589
Preferred stock	2,503,000	-	-	2,503,000
Mutual funds	23,289,874	-	-	23,289,874
Corporate bonds	-	30,015,718	-	30,015,718
U.S. government securities	-	35,659,393	-	35,659,393
Municipal bonds	-	2,158,683	-	2,158,683
Total separately managed funds	396,017,463	67,833,794	-	463,851,257
Investments at NAV - Collective trust funds:				
Target retirement funds	-	-	-	352,043,856
Money market fund	-	-	-	111,491,139
Total collective trust funds	-	-	-	463,534,995
Total investments	607,599,432	67,833,794	-	1,138,968,221

Transfers Between Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

Plan management evaluates the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. There were no transfers during 2018 or 2017.

5 Party-in-interest Transactions

Certain Plan investments are shares of mutual funds and units of collective trust funds and separately managed funds managed by T. Rowe Price Trust Company, the Trustee, as defined by the Plan; therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for investment management services were deducted from income earned on each fund. Notes receivable from participants also qualify as party-in-interest transactions.

6 Plan Termination

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. In the event that the Plan is terminated, affected participants would become 100% vested in their accounts.

7 Federal Income Tax Status

The Plan was restated effective January 1, 2017 using a prototype plan document. On August 2, 2017, the Plan received an opinion letter from the Internal Revenue Service (IRS) pertaining to the acceptability of the form of the Plan under the IRC. Prior to January 1, 2017, the Plan was operated pursuant to a determination letter dated May 20, 2014, in which the IRS stated that the Plan, as then designed, was in compliance with the applicable regulations of the IRC. Although the plan has been amended, the Company and Plan management believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognizes 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. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

8 Subsequent Events

The Plan has evaluated subsequent events through October 7, 2019, the date the financial statements were available to be issued. Except for the matter described below, the Plan is not aware of any subsequent events that would require recognition or disclosure in the financial statements.

On June 14, 2019, the Company acquired two unrelated companies (the Companies). As part of the acquisition, the Companies' defined contribution plans will be terminated and the employees will join the Plan. Additionally, the Company acquired a third unrelated company on May 31, 2019, and in December 2019, the company's plan assets will be merged into the Plan.

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	American Funds EuroPacific Growth Fund	Mutual fund	**	23,724,745
	Brandes Institutional International Equity	Mutual fund	**	2,517,795
	Dodge & Cox Income	Mutual fund	**	24,534,344
	Vanguard Institutional Index	Mutual fund	**	21,913,411
	Vanguard Extended Markets Index Inst Fund	Mutual fund	**	8,521,588
	Vanguard Total International Stock Index Fund	Mutual fund	**	7,370,438
	Vanguard Total Stock Market Index Fund	Mutual fund	**	61,139,744
*	T. Rowe Price Small Cap Stock Fund	Mutual fund	**	32,480,744
*	T ROWE PR MID CAP GROW-I	Mutual fund	**	9,223,140
*	T ROWE PR MID-CAP VALUE-I	Mutual fund	**	9,085,151
*	T ROWE PRICE GOV RES FUND	Mutual fund	**	369,018
	Total mutual funds			200,880,118
	ABBOTT LABORATORIES	Common stock	**	635,202
	ACTIVISION BLIZZARD INC	Common stock	**	311,460
	ADIANT PLC	Common stock	**	169,244
	AGILENT TECHNOLOGIES INC	Common stock	**	128,174
	AIR PRODUCTS & CHEMICALS	Common stock	**	145,325
	AKZO NOBEL NV-SPON ADR	Common stock	**	258,360
	ALASKA AIR GROUP INC	Common stock	**	1,138,564
	ALEXION PHARMACEUTICALS I	Common stock	**	1,138,333
	ALIBABA GROUP HOLDING-SP	Common stock	**	5,720,342
	ALPHABET INC-CL A	Common stock	**	3,150,554
	ALPHABET INC-CL C	Common stock	**	8,544,818
	AMAZON.COM INC	Common stock	**	19,309,326
	AMERICAN AIRLINES GROUP I	Common stock	**	298,591
	AMERICAN INTERNATIONAL GR	Common stock	**	2,119,076
	AMERICAN TOWER CORP	Common stock	**	47,615
	AMERIPRISE FINANCIAL INC	Common stock	**	236,085
	ANTHEM INC	Common stock	**	5,752,385
	APACHE CORP	Common stock	**	603,986
	APPLE INC	Common stock	**	992,816
	APPLIED MATERIALS INC	Common stock	**	742,838
	APTIV PLC	Common stock	**	937,650
	ARCHER-DANIELS-MIDLAND CO	Common stock	**	725,169
	AT&T INC	Common stock	**	686,644
	AUTOMATIC DATA PROCESSING	Common stock	**	186,453
	AXA EQUITABLE HOLDINGS IN	Common stock	**	266,080
	BALL CORP	Common stock	**	327,194
	BANK OF AMERICA CORP	Common stock	**	122,584
	BANK OF NEW YORK MELLON C	Common stock	**	1,040,247
	BECTON DICKINSON AND CO	Common stock	**	5,624,554
	BIOGEN INC	Common stock	**	9,028
	BOEING CO/THE	Common stock	**	10,220,670
	BOOKING HOLDINGS INC	Common stock	**	5,797,666
	BRIGHTHOUSE FINANCIAL INC	Common stock	**	757,215
	BRISTOL-MYERS SQUIBB CO	Common stock	**	956,432
	BROADCOM INC	Common stock	**	152,059
	CANADIAN PACIFIC RAILWAY	Common stock	**	529,663
	CELGENE CORP	Common stock	**	6,665
	CENTENE CORP	Common stock	**	1,075,980
	CENTURYLINK INC	Common stock	**	282,699
	CF INDUSTRIES HOLDINGS IN	Common stock	**	1,409,724
	CHEVRON CORP	Common stock	**	1,383,156

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value	\$
	CHUBB LTD	Common stock	**	2,852,424	
	CIGNA CORP	Common stock	**	3,385,704	
	CINTAS CORP	Common stock	**	195,036	
	CISCO SYSTEMS INC	Common stock	**	2,443,812	
	CITIGROUP INC	Common stock	**	1,125,954	
	COMCAST CORP-CLASS A	Common stock	**	1,624,798	
	CONAGRA BRANDS INC	Common stock	**	717,098	
	CONSTELLATION BRANDS INC-	Common stock	**	68,349	
	CORNING INC	Common stock	**	32,264	
	COSTAR GROUP INC	Common stock	**	138,984	
	COTY INC-CL A	Common stock	**	173,847	
	CSX CORP	Common stock	**	802,782	
	CTRIIP.COM INTERNATIONAL-A	Common stock	**	11,555	
	CVS HEALTH CORP	Common stock	**	1,471,448	
	DANAHER CORP	Common stock	**	1,981,760	
	DELTA AIR LINES INC	Common stock	**	1,496,651	
	DOLLAR GENERAL CORP	Common stock	**	1,967,056	
	DOWDUPONT INC	Common stock	**	3,238,856	
	DTE ENERGY CO	Common stock	**	270,543	
	DUKE ENERGY CORP	Common stock	**	871,630	
	EDISON INTERNATIONAL	Common stock	**	1,033,782	
	ELECTRONIC ARTS INC	Common stock	**	143,064	
	ELI LILLY & CO	Common stock	**	1,499,037	
	EMERSON ELECTRIC CO	Common stock	**	824,550	
	EQT CORP	Common stock	**	74,993	
	EQUITRANS MIDSTREAM CORP	Common stock	**	175,696	
	EQUITY RESIDENTIAL	Common stock	**	1,359,806	
	EVERGY INC	Common stock	**	778,828	
	EXXON MOBIL CORP	Common stock	**	3,608,819	
	FACEBOOK INC-CLASS A	Common stock	**	7,439,882	
	FERRARI NV	Common stock	**	176,009	
	FIDELITY NATIONAL INFO SE	Common stock	**	1,041,498	
	FIFTH THIRD BANCORP	Common stock	**	1,889,459	
	FISERV INC	Common stock	**	1,383,743	
	FLEETCOR TECHNOLOGIES INC	Common stock	**	315,724	
	FLOWSERVE CORP	Common stock	**	81,591	
	FORTIVE CORP	Common stock	**	707,927	
	FRANKLIN RESOURCES INC	Common stock	**	1,336,836	
	GENERAL ELECTRIC CO	Common stock	**	850,156	
	GILEAD SCIENCES INC	Common stock	**	1,801,815	
	GLAXOSMITHKLINE PLC-SPON	Common stock	**	1,574,252	
	GLOBAL PAYMENTS INC	Common stock	**	2,154,076	
	GOLDMAN SACHS GROUP INC	Common stock	**	16,705	
	HARRIS CORP	Common stock	**	2,969,840	
	HCA HEALTHCARE INC	Common stock	**	499,916	
	HESS CORP	Common stock	**	1,198,800	
	HEWLETT PACKARD ENTERPRIS	Common stock	**	269,484	
	HILTON WORLDWIDE HOLDINGS	Common stock	**	719,292	
	HONEYWELL INTERNATIONAL I	Common stock	**	1,128,965	
	HUMANA INC	Common stock	**	1,233,869	
	IAC/INTERACTIVECORP	Common stock	**	466,386	
	IHS MARKIT LTD	Common stock	**	42,166	
	ILLINOIS TOOL WORKS	Common stock	**	197,510	

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	ILLUMINA INC	Common stock	**	204,252
	INTERCONTINENTAL EXCHANGE	Common stock	**	1,456,430
	INTERNATIONAL PAPER CO	Common stock	**	1,350,042
	INTUIT INC	Common stock	**	3,140,151
	INTUITIVE SURGICAL INC	Common stock	**	3,324,184
	JOHNSON & JOHNSON	Common stock	**	3,025,577
	JOHNSON CONTROLS INTERNAT	Common stock	**	2,059,281
	JPMORGAN CHASE & CO	Common stock	**	5,745,620
	KANSAS CITY SOUTHERN	Common stock	**	84,760
	KELLOGG CO	Common stock	**	290,751
	KEYCORP	Common stock	**	505,476
	KIMBERLY-CLARK CORP	Common stock	**	2,459,395
	KOHL'S CORP	Common stock	**	800,458
	L BRANDS INC	Common stock	**	610,176
	L3 TECHNOLOGIES INC	Common stock	**	19,624
	LAM RESEARCH CORP	Common stock	**	30,502
	LAS VEGAS SANDS CORP	Common stock	**	1,369,592
	LOEWS CORP	Common stock	**	1,696,030
	MARRIOTT INTERNATIONAL -C	Common stock	**	1,169,300
	MARSH & MCLENNAN COS	Common stock	**	973,588
	MASTERCARD INC - A	Common stock	**	5,571,400
	MATTEL INC	Common stock	**	631,368
	MAXIM INTEGRATED PRODUCTS	Common stock	**	861,552
	MCDONALD'S CORP	Common stock	**	927,626
	MEDTRONIC PLC	Common stock	**	2,117,458
	MERCK & CO. INC.	Common stock	**	2,838,784
	METLIFE INC	Common stock	**	1,997,117
	MICROCHIP TECHNOLOGY INC	Common stock	**	22,079
	MICROSOFT CORP	Common stock	**	14,044,287
	MORGAN STANLEY	Common stock	**	4,528,466
	MOTOROLA SOLUTIONS INC	Common stock	**	142,074
	NETFLIX INC	Common stock	**	2,443,468
	NEWS CORP - CLASS A	Common stock	**	1,019,900
	NEXTERA ENERGY INC	Common stock	**	1,288,639
	NIELSEN HOLDINGS PLC	Common stock	**	1,389,908
	NISOURCE INC	Common stock	**	2,133,405
	NORFOLK SOUTHERN CORP	Common stock	**	134,586
	NORTHERN TRUST CORP	Common stock	**	459,745
	NORTHROP GRUMMAN CORP	Common stock	**	1,471,359
	NORWEGIAN CRUISE LINE HOL	Common stock	**	184,693
	NUCOR CORP	Common stock	**	438,002
	NVENT ELECTRIC PLC	Common stock	**	271,766
	NVIDIA CORP	Common stock	**	556,829
	NXP SEMICONDUCTORS NV	Common stock	**	263,808
	OCCIDENTAL PETROLEUM CORP	Common stock	**	1,454,706
	P G & E CORP	Common stock	**	604,580
	PACCAR INC	Common stock	**	394,266
	PAYPAL HOLDINGS INC	Common stock	**	3,326,012
	PENTAIR PLC	Common stock	**	358,910
	PEPSICO INC	Common stock	**	718,120
	PFIZER INC	Common stock	**	3,470,830
	PHILIP MORRIS INTERNATION	Common stock	**	1,666,663
	PNC FINANCIAL SERVICES GR	Common stock	**	1,508,139
	PPG INDUSTRIES INC	Common stock	**	184,014
	PROGRESSIVE CORP	Common stock	**	218,515

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	QUALCOMM INC	Common stock	**	2,886,646
	RAYMOND JAMES FINANCIAL I	Common stock	**	199,716
	RAYONIER INC	Common stock	**	851,080
	RED HAT INC	Common stock	**	325,110
	RESTAURANT BRANDS INTERN	Common stock	**	503,858
	ROPER TECHNOLOGIES INC	Common stock	**	1,431,479
	ROSS STORES INC	Common stock	**	1,749,363
	ROYAL CARIBBEAN CRUISES L	Common stock	**	907,393
	S&P GLOBAL INC	Common stock	**	529,193
	SALESFORCE.COM INC	Common stock	**	4,045,546
	SCHWAB (CHARLES) CORP	Common stock	**	1,517,672
	SEMPRA ENERGY	Common stock	**	1,539,253
	SERVICENOW INC	Common stock	**	3,265,793
	SHERWIN-WILLIAMS CO/THE	Common stock	**	428,871
	SL GREEN REALTY CORP	Common stock	**	791,433
	SOUTHERN CO/THE	Common stock	**	3,001,932
	SOUTHWEST AIRLINES CO	Common stock	**	548,464
	SPLUNK INC	Common stock	**	900,242
	STATE STREET CORP	Common stock	**	1,971,316
	STERICYCLE INC	Common stock	**	612,723
	STRYKER CORP	Common stock	**	3,795,545
	TD AMERITRADE HOLDING COR	Common stock	**	2,938,236
	TE CONNECTIVITY LTD	Common stock	**	249,579
	TELEFONICA SA-SPON ADR	Common stock	**	913,299
	TENCENT HOLDINGS LTD-UNS	Common stock	**	4,328,201
	TESLA INC	Common stock	**	2,300,646
	TEXAS INSTRUMENTS INC	Common stock	**	2,096,766
	THERMO FISHER SCIENTIFIC	Common stock	**	2,111,459
	TOTAL SA-SPON ADR	Common stock	**	3,120,886
	TRANSCANADA CORP	Common stock	**	2,088,450
	TWENTY-FIRST CENTURY FOX	Common stock	**	3,662,671
	TYSON FOODS INC-CL A	Common stock	**	1,895,700
	ULTA BEAUTY INC	Common stock	**	114,585
	UNION PACIFIC CORP	Common stock	**	307,700
	UNITED CONTINENTAL HOLDIN	Common stock	**	955,276
	UNITED PARCEL SERVICE-CL	Common stock	**	1,959,183
	UNITEDHEALTH GROUP INC	Common stock	**	6,240,207
	US BANCORP	Common stock	**	2,106,770
	VERIZON COMMUNICATIONS IN	Common stock	**	3,297,978
	VERTEX PHARMACEUTICALS IN	Common stock	**	3,291,663
	VISA INC-CLASS A SHARES	Common stock	**	6,794,514
	VMWARE INC-CLASS A	Common stock	**	890,111
	VULCAN MATERIALS CO	Common stock	**	725,884
	WALMART INC	Common stock	**	1,639,440
	WALT DISNEY CO/THE	Common stock	**	554,500
	WELLCARE HEALTH PLANS INC	Common stock	**	978,829
	WELLS FARGO & CO	Common stock	**	4,903,235
	WESTERN DIGITAL CORP	Common stock	**	232,911
	WEYERHAEUSER CO	Common stock	**	870,487
	WILLIS TOWERS WATSON PLC	Common stock	**	2,373,268
	WORKDAY INC-CLASS A	Common stock	**	2,248,614
	WORLDPAY INC-CLASS A	Common stock	**	968,139
	WYNN RESORTS LTD	Common stock	**	27,596

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	XILINX INC	Common stock	**	415,033
	XYLEM INC	Common stock	**	100,080
	YUM! BRANDS INC	Common stock	**	861,107
	ZIMMER BIOMET HOLDINGS IN	Common stock	**	134,836
	ZOETIS INC	Common stock	**	156,451
	Total common stock			338,420,834
	WELLPOINT INC 3.125 5/22	Bonds	**	58,359
	WELLPOINT INC 4.65 1/43	Bonds	**	196,275
	WELLS FARGO CO 2.5 3/21	Bonds	**	141,191
	WELLS FARGO CO 3.069 1/23	Bonds	**	43,679
	WILLIS NORTH AME 3.6 5/24	Bonds	**	175,109
	WISCONSIN-A-RE 3.954 5/36	Bonds	**	122,000
	WOODSIDE FINANCE 3.7 9/26	Bonds	**	61,164
	UNIV OF CA-J-R 4.131 5/45	Bonds	**	39,401
	UNUM GROUP 3 5/21	Bonds	**	93,390
	VENTAS REALTY	Bonds	**	340,858
	VERIZON COMM IN 5.15 9/23	Bonds	**	229,765
	VERIZON COMM I 4.272 1/36	Bonds	**	136,879
	VA ST CMWLTH U 4.956 1/44	Bonds	**	119,459
	VA TRN BRD-BABS 5.35 5/35	Bonds	**	133,469
	VA PBA-B2 -BABS 5.9 8/30	Bonds	**	139,601
	VISA INC 4.15 12/35	Bonds	**	101,259
	VISA INC 2.15 9/22	Bonds	**	199,760
	WEA FINANCE LL 3.25 10/20	Bonds	**	29,756
	VULCAN MATERIALS 4.5 6/47	Bonds	**	87,159
	WPP FINANCE 20 3.625 9/22	Bonds	**	107,028
	WPP FINANCE 201 3.75 9/24	Bonds	**	44,246
	WEINGARTEN RLTY 3.5 4/23	Bonds	**	147,253
	UNITEDHEALTH GR 4.75 7/45	Bonds	**	180,482
	REGENTS UNIV 5.77 5/43	Bonds	**	25,090
	UNITED MEXICAN 4.75 3/44	Bonds	**	199,954
	UNITED OVERSEAS 3.2 4/21	Bonds	**	1,491,450
	SC PUB SVC AU 2.388 12/23	Bonds	**	99,874
	SOUTHEAST SUPPL 4.25 6/24	Bonds	**	88,720
	SPECTRA PARTN 3.375 10/26	Bonds	**	211,431
	STATE GRID OVER 3.75 5/23	Bonds	**	39,304
	STATE STREET COR 3.1 5/23	Bonds	**	193,750
	TENCENT HOLDIN 2.985 1/23	Bonds	**	184,718
	THERMO FISHER 2.95 9/26	Bonds	**	32,570
	THOMSON REUTERS 3.35 5/26	Bonds	**	23,630
	TORONTO DOM BA FRN 9/31	Bonds	**	199,365
	TRANS-ALLEGHENY 3.85 6/25	Bonds	**	34,183
	TRANSURBAN FIN 4.125 2/26	Bonds	**	36,557
	TRANSURBAN FIN 3.375 3/27	Bonds	**	63,899
	TRINITY ACQ PLC 3.5 9/21	Bonds	**	119,724
	TRINITY HEALT 4.125 12/45	Bonds	**	197,838
	UBS GROUP FUNDI 2.95 9/20	Bonds	**	45,450
	QUEBEC PROVINCE 2.75 8/21	Bonds	**	44,494
	RELX CAPITAL INC 3.5 3/23	Bonds	**	33,117
	RAYMOND JAMES 3.625 9/26	Bonds	**	57,456
	REPUBLIC SVCS 3.375 11/27	Bonds	**	91,467
	REPUBLIC SVCS 5.5 9/19	Bonds	**	161,607
	ROCKWELL COLLINS 3.2 3/24	Bonds	**	67,453
	ROPER TECHNOLOG 3.8 12/26	Bonds	**	128,081
	SABINE PASS LIQU 4.2 3/28	Bonds	**	240,654
	SAN DIEGO G & E 6 6/39	Bonds	**	56,476

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	SAN JOSE REDEV 3.375 8/34	Bonds	**	212,867
	SANTANDER UK G 2.875 8/21	Bonds	**	283,467
	SHELL INTL FIN 4.375 5/45	Bonds	**	180,199
	SHIRE ACQ INV	Bonds	**	139,727
	SIMON PROP GP LP 3.3 1/26	Bonds	**	129,861
	SC PUB SVC AUT 4.77 12/45	Bonds	**	85,404
	PACKAGING CORP 2.45 12/20	Bonds	**	150,656
	PARTNERS HEALT 3.443 7/21	Bonds	**	74,743
	PENSKE TRUCK LE 2.5 6/19	Bonds	**	149,089
	PENSKE TRUCK LE 3.2 7/20	Bonds	**	30,327
	PETROLEOS MEXICA 5.5 6/44	Bonds	**	40,725
	PETROLEOS MEXICA 3.5 1/23	Bonds	**	18,650
	PETROLEOS MEXICA 6.5 1/29	Bonds	**	107,691
	REP OF POLAND 3.25 4/26	Bonds	**	102,565
	PORT AUTH NY &	Bonds	**	74,473
	PRES & FELLOW 3.619 10/37	Bonds	**	106,338
	PRICELINE GROUP 3.65 3/25	Bonds	**	76,692
	PRICELINE GROUP 3.6 6/26	Bonds	**	19,686
	PRINCIPAL FINL 3.3 9/22	Bonds	**	201,601
	PROGRESS ENERGY 7.05 3/19	Bonds	**	172,186
	QUALCOMM INC 3 5/22	Bonds	**	150,039
	NORTHROP GRUMMA 3.85 4/45	Bonds	**	227,816
	NORTHWELL HEA 3.979 11/46	Bonds	**	129,633
	NUCOR CORP 3.95 5/28	Bonds	**	53,224
	NUTRIEN LTD 4 12/26	Bonds	**	45,154
	O'REILLY AUTOMOT 3.8 9/22	Bonds	**	55,093
	O'REILLY AUTOMO 3.85 6/23	Bonds	**	105,121
	O'REILLY AUTOMOT 3.6 9/27	Bonds	**	161,693
	OCCIDENTAL PETE 3.4 4/26	Bonds	**	264,374
	OHIO POWER CO 5.375 10/21	Bonds	**	113,074
	OMNICOM GP/OMN 3.625 5/22	Bonds	**	72,440
	OMNICOM GP/OMN 3.65 11/24	Bonds	**	187,731
	ONTARIO PROVIN 1.875 5/20	Bonds	**	144,393
	ONTARIO PROVINC 2.55 2/21	Bonds	**	140,669
	PPL CAPITAL FDG 3.1 5/26	Bonds	**	35,809
	PACKAGING CORP 4.5 11/23	Bonds	**	29,461
	MEMORIAL SLOAN 4.2 7/55	Bonds	**	178,094
	MET TRANS AUT 5.871 11/39	Bonds	**	174,955
	MOHAWK INDUST 3.85 2/23	Bonds	**	78,101
	MORGAN STANLEY FRN 7/38	Bonds	**	94,203
	MORGAN STANLEY 4.3 1/45	Bonds	**	89,353
	NATL RURAL UTIL 2.35 6/20	Bonds	**	173,892
	NATL RURAL UTIL 2.9 3/21	Bonds	**	260,233
	NEVADA POWER CO 6.65 4/36	Bonds	**	159,486
	NEW BRUNSWICK 3.625 2/28	Bonds	**	110,163
	NEW YORK LIFE G 3.25 8/21	Bonds	**	176,133
	NYC FIN AUTH 5.508 8/37	Bonds	**	45,175
	NYC WTR-BABS-T 6.011 6/42	Bonds	**	267,111
	NYS DORM-F-BAB 5.628 3/39	Bonds	**	202,005
	NIAGARA MOHAWK 4.881 8/19	Bonds	**	101,809
	NORTHERN TRST	Bonds	**	110,417
	KEYSIGHT TECHN 4.55 10/24	Bonds	**	44,969
	KILROY REALTY 4.375 10/25	Bonds	**	77,205
	KILROY REALTY	Bonds	**	34,470
	KIMCO REALTY 3.4 11/22	Bonds	**	118,134
	KFW 2.125 3/22	Bonds	**	111,215
	KFW 2.75 7/20	Bonds	**	203,595

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	LIBERTY MUTUAL 4.85 8/44	Bonds	**	27,857
	LOCKHEED MARTIN 3.6 3/35	Bonds	**	129,433
	LOCKHEED MARTIN 4.7 5/46	Bonds	**	211,317
	L A ARPTS-TXB- 7.053 5/40	Bonds	**	202,884
	MAGELLAN MIDSTR 6.55 7/19	Bonds	**	97,202
	MANITOBA (PROV) 2.1 9/22	Bonds	**	122,475
	MARSH & MCLENNAN 3.5 6/24	Bonds	**	18,814
	MARSH & MCLENNAN 4.35 1/47	Bonds	**	195,947
	MASSMUTUAL GLBL 1.95 9/20	Bonds	**	76,791
	GOLDMAN SACHS GP 3 4/22	Bonds	**	71,071
	GOLDMAN SACHS GP 3.5 1/25	Bonds	**	194,090
	HSBC HOLDINGS 2.65 1/22	Bonds	**	34,146
	HARRIS CORP 3.832 4/25	Bonds	**	69,241
	HP ENTERPRISE 2.1 10/19	Bonds	**	15,000
	JB HUNT TRANSPRT 2.4 3/19	Bonds	**	109,917
	HYUNDAI CAP AME 2.55 2/19	Bonds	**	192,831
	INTL PAPER CO 4.4 8/47	Bonds	**	184,241
	INTESA SANPAOL 3.375 1/23	Bonds	**	139,524
	ITC HOLDINGS CO 2.7 11/22	Bonds	**	450,941
	JPMORGAN CHASE 3.375 5/23	Bonds	**	166,850
	JPMORGAN CHASE 3.3 4/26	Bonds	**	127,584
	JPMORGAN CHASE FRN 7/38	Bonds	**	43,921
	KANSAS CITY SOUT 3 5/23	Bonds	**	148,971
	KEYCORP 2.9 9/20	Bonds	**	199,315
	FHMS K024 A1 2/22	Bonds	**	110,415
	FHMS K027 A1 9/22	Bonds	**	728,713
	FREDDIE MAC 1.375 8/19	Bonds	**	77,328
	FHMS K068 A1 2/27	Bonds	**	128,747
	FIDELITY NATION 4.25 5/28	Bonds	**	126,658
	FIFTH THIRD BANK 4.3 1/24	Bonds	**	76,081
	FLORIDA GAS TRA 4.35 7/25	Bonds	**	19,862
	GATX CORP 2.6 3/20	Bonds	**	183,923
	GATX CORP 3.25 9/26	Bonds	**	2,217
	G2 8041 FRN 8/20/22	Bonds	**	318
	G2 8867 FRN 11/20/21	Bonds	**	40,156
	GEN ELEC CAP CRP 5.3 2/21	Bonds	**	121,480
	GEN ELEC CAP CRP 3.1 1/23	Bonds	**	340,925
	GOLDMAN SACHS	Bonds	**	229,883
	GOLDMAN SACHS	Bonds	**	198,302
	DOMINION RES 2.75 9/22	Bonds	**	199,219
	DR PEPPER SNAPP 2.55 9/26	Bonds	**	36,426
	DUKE ENERGY COR 2.65 9/26	Bonds	**	30,365
	DUKE ENERGY COR 3.75 9/46	Bonds	**	192,473
	EOG RESOURCES	Bonds	**	102,967
	ERAC USA FINAN 5.25 10/20	Bonds	**	75,343
	EATON VANCE CO 3.625 6/23	Bonds	**	72,147
	ECOLAB INC 3.25 12/27	Bonds	**	230,391
	ENEL FINANCE 2.75 04/23	Bonds	**	34,726
	EXELON GENERATI 2.95 1/20	Bonds	**	67,214
	EXPRESS SCRIPTS 3 7/23	Bonds	**	142,215
	EXPRESS SCRIPTS 2.6 11/20	Bonds	**	484,901
	FED HOME LN BA 1.375 9/20	Bonds	**	144,793
	FED RLTY INVS T 2.75 6/23	Bonds	**	158,281
	FEDERAL REALTY	Bonds	**	209,912
	CITIZENS FIN G 2.375 7/21	Bonds	**	84,801

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	COLUMBIA PIPELIN 3.3 6/20	Bonds	**	75,951
	COMCAST CORP 3.95 10/25	Bonds	**	152,287
	COM BK AUSTRALIA 5 10/19	Bonds	**	249,031
	COOPERAT RABO 3.125 4/21	Bonds	**	238,130
	CREDIT SUISSE FRN 12/23	Bonds	**	24,591
	CROWN CASTLE T 3.222 5/22	Bonds	**	39,622
	CROWN CASTLE T 3.663 5/25	Bonds	**	141,962
	CROWN CASTLE INT 3.7 6/26	Bonds	**	59,772
	DXC TECH CO 2.875 3/20	Bonds	**	146,290
	DAIMLER FINANCE 2.3 2/21	Bonds	**	397,216
	DEERE & CO 8.1 5/30	Bonds	**	54,496
	DELPHI CORP 4.15 3/24	Bonds	**	44,019
	DAL 2015-1AA P 3.625 7/27	Bonds	**	90,878
	DOMINION RES 5.2 8/19	Bonds	**	96,445
	BAT CAPITAL CO 2.764 8/22	Bonds	**	147,564
	BBVA BANCOMER	Bonds	**	49,499
	BP CAPITAL PLC 1.768 9/19	Bonds	**	207,643
	BPCE 5.7 10/23	Bonds	**	122,252
	BANK OF AMER CRP 4 1/25	Bonds	**	105,887
	BANK OF AMER CRP 3.5 4/26	Bonds	**	135,357
	BANK OF AMER CRP FRN 1/28	Bonds	**	189,915
	BANK OF MONTREAL 3.1 4/21	Bonds	**	98,735
	BANK OF NY MELLO 2.5 4/21	Bonds	**	19,811
	BAXALTA INC 2.875 6/20	Bonds	**	142,146
	BAY AREA TOLL 6.907 10/50	Bonds	**	110,250
	BIOGEN INC 3.625 9/22	Bonds	**	97,349
	BRIT COLUMBIA 2 10/22	Bonds	**	44,874
	BRIXMOR OPERAT 3.875 8/22	Bonds	**	53,044
	BRIXMOR OPERAT 4.125 6/26	Bonds	**	101,487
	ALIBABA GROUP 4 12/37	Bonds	**	58,323
	AMAZON.COM INC 2.8 8/24	Bonds	**	92,185
	AMAZON.COM INC 3.875 8/37	Bonds	**	352,802
	AMERICA MOVIL	Bonds	**	47,705
	AMN AIRLN 16-2	Bonds	**	108,933
	AM AIRLN 16-1 B 5.25 1/24	Bonds	**	95,079
	AMER CAMPUS CO 4.125 7/24	Bonds	**	252,948
	AMERICAN CAMP 3.625 11/27	Bonds	**	143,966
	AMERIPRISE FIN 2.875 9/26	Bonds	**	140,971
	AMGEN INC 5.75 3/40	Bonds	**	245,727
	ANHEUSER-BUSCH 3.65 2/26	Bonds	**	415,076
	APPLE INC 3.2 5/27	Bonds	**	114,396
	APTIV PLC 3.15 11/20	Bonds	**	35,363
	ATMOS ENERGY 8.5 3/19	Bonds	**	203,502
	AUTORIDAD CANAL 4.95 7/35	Bonds	**	37,090
	AUTOZONE INC 3.125 4/26	Bonds	**	118,156
	BONDS	Bonds	**	201,950
	AGL CAPITAL COR 5.25 8/19	Bonds	**	58,974
	AIG GLOBAL FUND 2.15 7/20	Bonds	**	152,834
	AON PLC 2.8 3/21	Bonds	**	77,553
	ABBOTT LABS 3.4 11/23	Bonds	**	224,693
	ABBOTT LABS 4.75 11/36	Bonds	**	106,510
	ABBVIE INC 4.5 5/35	Bonds	**	68,406
	AGILENT TECH IN 3.2 10/22	Bonds	**	45,236
	AGILENT TECH I 3.875 7/23	Bonds	**	88,578
	AIR LEASE CORP 3.625 4/27	Bonds	**	105,104
	ALABAMA POWER C 3.75 3/45	Bonds	**	106,064
	ALBERTA PROVINCE 3.3 3/28	Bonds	**	196,608
	ALBERTA PROVINC 1.75 8/20	Bonds	**	33,907

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
				\$
	ALEXANDRIA REAL 3.95 1/27	Bonds	**	240,396
	ALEXANDRIA REAL 3.45 4/25	Bonds	**	179,646
	BRIXMOR OPERATI 3.25 9/23	Bonds	**	101,983
	BRDCOM CRP / FIN 2.2 1/21	Bonds	**	183,476
	BURLINGTON NORT 4.15 4/45	Bonds	**	131,026
	CMS ENERGY 4.875 3/44	Bonds	**	192,963
	CNOOC FINANCE 3.5 5/25	Bonds	**	26,207
	CVS HEALTH COR 3.875 7/25	Bonds	**	147,178
	CVS HEALTH COR 5.125 7/45	Bonds	**	63,696
	CAMDEN PROP TR 2.95 12/22	Bonds	**	209,962
	CAPITAL ONE FIN 3.45 4/21	Bonds	**	269,709
	CELGENE CORP 4.625 5/44	Bonds	**	120,211
	CHICAGO WTR TX 5.72 12/38	Bonds	**	140,389
	CHICAGO ARPT-B 6.395 1/40	Bonds	**	211,677
	CITIGROUP INC FRN 1/28	Bonds	**	244,842
	CITIZENS BANK N 2.55 5/21	Bonds	**	54,294
	CITIZENS FIN GR 4.3 12/25	Bonds	**	24,346
	MATTEL INC 6.75 12/25	Bonds	**	550,793
	UNITEDHEALTH GR 4.75 7/45	Bonds	**	127,437
	Total corporate bonds			32,646,161
	US TREASURY N/B 1.25 3/21	Bonds	**	1,012,375
	US TREASURY N/ 1.375 4/21	Bonds	**	1,228,697
	US TREASURY N/ 3.125 5/21	Bonds	**	1,638,973
	US TREASURY N/B 2 2/22	Bonds	**	1,774,969
	US TREASURY N 1.625 11/22	Bonds	**	643,699
	US TREASURY N/B 2 2/23	Bonds	**	784,375
	US TREASURY N/B 2.25 2/27	Bonds	**	262,238
	US TREASURY N/ 1.75 10/20	Bonds	**	764,344
	US TREASURY N/B 1.75 5/22	Bonds	**	1,093,400
	US TREASURY N/B 1.75 6/22	Bonds	**	858,688
	US TREASURY N/ 2.625 7/20	Bonds	**	620,678
	US TREASURY N/B 2.75 7/23	Bonds	**	1,718,063
	US TREASURY N/B 3 2/47	Bonds	**	135,042
	US TREASURY N/B 3 5/47	Bonds	**	434,524
	US TREASURY N/B 2.75 8/47	Bonds	**	1,358,723
	US TREASURY N/B 3 2/48	Bonds	**	319,300
	US TREASURY N/B 3 8/48	Bonds	**	64,929
	US TREASURY N/B 1.5 8/26	Bonds	**	401,288
	US TREASURY N/ 1.125 8/21	Bonds	**	1,259,733
	US TREASURY N/B 2.75 2/28	Bonds	**	1,156,289
	US TREASURY N/ 2.875 8/28	Bonds	**	203,156
	US TREASURY N/B 2.75 8/23	Bonds	**	1,516,875
	US TREASURY N/B 2.75 2/24	Bonds	**	3,149,070
	US TREASURY N/ 2.25 11/24	Bonds	**	58,988
	US TREASURY N/ 1.375 4/20	Bonds	**	600,659
	US TREASURY N/ 2.25 11/25	Bonds	**	166,281
	US TREASURY N 2.125 12/22	Bonds	**	685,227
	US TREASURY N/B 5.25 2/29	Bonds	**	345,073
	US TREASURY N/B 3.5 2/39	Bonds	**	122,828
	US TREASURY N 4.375 11/39	Bonds	**	592,170
	US TREASURY N/ 3.875 8/40	Bonds	**	189,625
	US TREASURY N 3.125 11/41	Bonds	**	167,563
	US TREASURY N/ 2.75 11/42	Bonds	**	306,609

Schedule H, Line 4i – Schedule of assets (held at end of year)

The Milliken Retirement Plan at December 31, 2018

Plan Number: 335 EIN: 51-0105342

US TREASURY N/ 3.125 8/44	Bonds	**	174,945
US TREASURY N/B 3 11/44	Bonds	**	231,373
US TREASURY N/B 2.5 2/45	Bonds	**	210,066
US TREASURY N/B 3 5/45	Bonds	**	131,794
US TREASURY N/ 2.875 8/45	Bonds	**	90,516
US TREASURY N/B 2.5 2/46	Bonds	**	538,289
US TREASURY N/B 2.5 5/46	Bonds	**	445,575
US GOVT STIF 5 BPS	Money Market securities	**	3,275,987
Total U.S. government securities			30,732,996
* TRowePrice Ret Hyb Bal TR T11	Collective trust fund	**	7,883,585
* TRowePrice Ret Hyb 2005 TR T11	Collective trust fund	**	8,539,367
* TRowePrice Ret Hyb 2010 TR T11	Collective trust fund	**	11,253,671
* TRowePrice Ret Hyb 2015 TR T11	Collective trust fund	**	26,553,250
* TRowePrice Ret Hyb 2020 TR T11	Collective trust fund	**	63,782,672
* TRowePrice Ret Hyb 2025 TR T11	Collective trust fund	**	70,571,300
* TRowePrice Ret Hyb 2030 TR T11	Collective trust fund	**	56,392,505
* TRowePrice Ret Hyb 2035 TR T11	Collective trust fund	**	31,843,001
* TRowePrice Ret Hyb 2040 TR T11	Collective trust fund	**	20,275,859
* TRowePrice Ret Hyb 2045 TR T11	Collective trust fund	**	12,416,640
* TRowePrice Ret Hyb 2050 TR T11	Collective trust fund	**	5,802,243
* TRowePrice Ret Hyb 2055 TR T11	Collective trust fund	**	4,552,657
* TRowePrice Ret Hyb 2060 TR T11	Collective trust fund	**	981,468
US Treasury MM Trust C	Collective trust fund	**	113,977,639
Total collective trust funds			434,825,857
Total investments			1,037,505,966
* Notes receivable from participants	interest rates of 3.25% to 7.75%, maturing at various dates through February 2043		16,576,272
Total investments and participant loans			1,054,082,238

* Party-in-interest to the Plan.

** Cost information has been omitted because plan investments are participant directed.

Plan Name	The Milliken Retirement Plan
Plan Sponsor EIN	51-0105342
ERISA Plan #	335
Plan Year Ending	December 31, 2018

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	

Plan Name	The Milliken Retirement Plan
Plan Sponsor EIN	51-0105342
ERISA Plan #	335
Plan Year Ending	December 31, 2018

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	