

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). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2019 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</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>	
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>		1c Effective date of plan <u>01/01/1965</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.	10/13/2020	BRAD A. JOHNSON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2020	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 (2019)
v. 190130

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 10724
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year		6a(1) 6551
a(2) Total number of active participants at the end of the plan year		6a(2) 6665
b Retired or separated participants receiving benefits.....		6b 158
c Other retired or separated participants entitled to future benefits		6c 3682
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 10505
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 157
f Total. Add lines 6d and 6e		6f 10662
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 9461
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 9
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 2019 Form M-1 annual report. If the plan was not required to file the 2019 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
		2019
		This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
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)
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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

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

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

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 37 38 49 50 52 59 62 64 65	NONE	71397	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 37 38 49 50 52 59 62 64 65	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%

(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 37 38 49 50 52 59 62 64 65	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
T ROWE PRICE RPS INC	15 21 25 28 37 38 49 50 52 59 62 64 65	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%

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 37 38 49 50 52 59 62 64 65	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 37 38 49 50 52 59 62 64 65	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 SMALL-CAP STOCK FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.19%

(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 37 38 49 50 52 59 62 64 65	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%

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 37 38 49 50 52 59 62 64 65	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 37 38 49 50 52 59 62 64 65	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%

(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 <div style="border: 1px solid black; text-align: center; padding: 5px; font-weight: bold; font-size: 1.2em;">2019</div> This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

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)
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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>6714115</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>8580739</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>17201976</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>28779904</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>43832013</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>76156978</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>84626376</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) 69104371
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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) 25466667
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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) 11382540
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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) 9256595
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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) 8070072
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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) 2137594
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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) 109904907
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**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> 2019 This Form is Open to Public Inspection
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
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)	30732996	32485960
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	32646161	39598443
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	338420834	395548339
(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)	16576272	16803866
(9) Value of interest in common/collective trusts	1c(9)	434825857	501214847
(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)	200880118	257657307
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	1054082238	1243308762

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1054082238	1243308762
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	13997234	
(B) Participants	2a(1)(B)	24466458	
(C) Others (including rollovers)	2a(1)(C)	29459435	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		67923127
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)	714908	
(C) Corporate debt instruments	2b(1)(C)	825977	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	896626	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2437511
(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)	9320682	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		9320682
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	97314049	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	83705800	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		13608249
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	86340306	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		86340306

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		70848625
(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)		44280086
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		294758586

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	107842693	
(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)		107842693
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		95391
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)	71397	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		71397
j Total expenses. Add all expense amounts in column (b) and enter total	2j		108009481

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		186749105
l Transfers of assets:			
(1) To this plan	2l(1)		2477419
(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) ☐ Unmodified (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.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....			
4d		X	
e Was this plan covered by a fidelity bond?	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?.....			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	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.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

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 2019 This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

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) 2019
v. 190130

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): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

- a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

- b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

Financial Statements and Report of
Independent Certified Public
Accountants

The Milliken Retirement Plan

December 31, 2019 and 2018

Contents

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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, 2019 and 2018, and the related statement of changes in net assets available for benefits for the years ended December 31, 2019 and 2018, 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 as of December 31, 2019 and 2018, and for the years then ended, stating that 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 H, Line 4i - Schedule of assets (held at end of year) as of December 31, 2019 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, 2020

The Milliken Retirement Plan
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31,

	<u>2019</u>	<u>2018</u>
Assets		
Investments, at fair value:		
Participant-directed investments	<u>\$1,226,504,896</u>	<u>\$1,037,505,966</u>
Total investments, at fair value	<u>1,226,504,896</u>	<u>1,037,505,966</u>
Receivables:		
Notes receivable from participants	<u>16,803,866</u>	<u>16,576,272</u>
Total receivables	<u>16,803,866</u>	<u>16,576,272</u>
Total assets	1,243,308,762	1,054,082,238
Net assets available for benefits	<u>\$1,243,308,762</u>	<u>\$1,054,082,238</u>

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

The Milliken Retirement Plan

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the years ended December 31,

	<u>2019</u>	<u>2018</u>
Additions:		
Investment income (loss), net:		
Net appreciation (depreciation) in fair value of investments	\$ 212,807,732	\$ (50,342,203)
Interest and dividends	13,131,101	10,903,560
	<hr/>	<hr/>
Investment income (loss), net:	225,938,833	(39,438,643)
Contributions:		
Employer	13,997,234	13,281,379
Participant	24,466,458	22,711,750
Rollover	29,459,435	915,414
	<hr/>	<hr/>
Total contributions	67,923,127	36,908,543
Interest income on notes receivable from participants	896,626	854,337
	<hr/>	<hr/>
Total additions	294,758,586	(1,675,763)
	<hr/>	<hr/>
Deductions:		
Benefits paid to participants	107,938,084	100,696,604
Administrative expenses	71,397	82,612
	<hr/>	<hr/>
Total deductions	108,009,481	100,779,216
	<hr/>	<hr/>
Increase (Decrease) in net assets available for benefits	186,749,105	(102,454,979)
Transfer into plan	2,477,419	-
Net assets available for benefits:		
Beginning of year	1,054,082,238	1,156,537,217
	<hr/>	<hr/>
End of year	<u>\$1,243,308,762</u>	<u>\$ 1,054,082,238</u>

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

The Milliken Retirement Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2019 and 2018

NOTE 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.

On December 16, 2019, the Andover Healthcare, Inc. Retirement Savings Plan was merged into the Milliken Retirement Plan. Assets of \$2,442,841 and notes receivable from participants of \$34,578 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. In connection to with the termination of the Milliken Pension Plan, participants were able to elect to rollover their lump sum distribution to the Plan.

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.

The Milliken Retirement Plan

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2019 and 2018

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, 2019 and 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, 2019 and 2018, employer contributions were increased by approximately \$530 in 2019 and decreased by \$90 in 2018 respectively, from forfeited nonvested accounts. Forfeited nonvested accounts totaled approximately \$2,000 and \$17,000 at December 31, 2019 and 2018, respectively.

NOTE 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 appreciation (depreciation) 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.

The Milliken Retirement Plan
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2019 and 2018

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, 2019 or 2018.

NOTE 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, 2019 and 2018.
- Investment income (loss), 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, 2019 and 2018.
- Schedule H, Line 4i - Schedule of assets (held at end of year) as of December 31, 2019.

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.

The Milliken Retirement Plan

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2019 and 2018

NOTE 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.

The Milliken Retirement Plan

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2019 and 2018

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, 2019 and 2018.

December 31, 2019	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	\$ 234,415,834	\$ -	\$ -	\$ 234,415,834
Total mutual funds	234,415,834	-	-	234,415,834
Separately managed funds:				
Common stock	395,548,339	-	-	395,548,339
Mutual funds	23,241,473	-	-	23,241,473
Corporate bonds	-	39,598,443	-	39,598,443
U.S. government securities	-	32,485,960	-	32,485,960
Total separately managed funds	418,789,812	72,084,403	-	490,874,215
Investments at NAV - Collective trust funds:				
Target retirement funds	-	-	-	391,309,940
Money market funds	-	-	-	109,904,907
Total collective trust funds	-	-	-	501,214,847
Total investments	\$ 653,205,646	\$ 72,084,403	\$ -	\$ 1,226,504,896

The Milliken Retirement Plan

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2019 and 2018

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

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 2019 or 2018.

NOTE 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.

NOTE 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.

The Milliken Retirement Plan
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2019 and 2018

NOTE 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, 2019 and 2018, 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.

NOTE 8 - SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through October 7, 2020, 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.

The 2019 novel coronavirus (or COVID-19) has adversely affected, and may continue to adversely affect economic activity globally, nationally, and locally. Following the COVID-19 outbreak in January 2020, the values of investment securities have declined. These economic and market conditions and other effects of the COVID-19 outbreak may continue to adversely affect the Plan. The extent of the adverse impact of the COVID-19 outbreak on the Plan's participant account balances and the amounts reported in the statements of net assets available for benefits cannot be predicted at this time.

On March 27, 2020, in response to COVID-19, the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") was signed into law. The CARES Act permits qualified Plan participants to withdraw penalty free distributions of up to \$100,000 during 2020 and waives required minimum distributions for 2020. The Plan administrator has elected to adopt these provisions of the CARES Act and will amend the Plan pursuant to the regulations.

On January 28, 2020, the Company acquired a company. As part of the acquisition, the acquired company's defined contribution plan will be terminated and the employees will join the Plan. Additionally, in December 2020, the acquired company's plan assets will be merged into the Plan.

SUPPLEMENTAL SCHEDULE

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	AMERICAN FUNDS EUROPACIFIC GROWTH FUND	Mutual fund	**	\$ 27,442,700
	BRANDES INSTITUTIONAL INTERNATIONAL EQUITY	Mutual fund	**	3,042,671
	DODGE & COX INCOME	Mutual fund	**	34,740,921
	VANGUARD INSTITUTIONAL INDEX	Mutual fund	**	30,239,064
	VANGUARD EXTENDED MARKETS INDEX INST FUND	Mutual fund	**	10,361,963
	VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND	Mutual fund	**	10,905,011
	VANGUARD TOTAL STOCK MARKET INDEX FUND	Mutual fund	**	74,492,651
*	T. ROWE PRICE SMALL CAP STOCK FUND	Mutual fund	**	43,190,853
*	T ROWE PR MID CAP GROW-I	Mutual fund	**	10,916,645
*	T ROWE PR MID-CAP VALUE-I	Mutual fund	**	10,998,892
*	T ROWE PRICE GOV RES FUND	Mutual fund	**	1,325,936
	Total mutual funds			257,657,308
	ABBOTT LABORATORIES	Common stock	**	124,905
	ABBVIE INC	Common stock	**	1,354,662
	ADVANCED MICRO DEVICES	Common stock	**	610,763
	AGILENT TECHNOLOGIES INC	Common stock	**	44,447
	AIR PRODUCTS & CHEMICALS	Common stock	**	169,898
	AKZO NOBEL NV-SPON ADR	Common stock	**	259,529
	ALASKA AIR GROUP INC	Common stock	**	1,296,938
	ALEXION PHARMACEUTICALS I	Common stock	**	809,611
	ALIBABA GROUP HOLDING - SP	Common stock	**	9,973,155
	ALLERGAN PLC	Common stock	**	1,510,243
	ALPHABET INC-CL C	Common stock	**	12,085,324
	ALPHABET INC-CLL A	Common stock	**	2,810,040
	AMAZON.COM INC.	Common stock	**	20,050,912
	AMERICAN INTERNATIONAL GR	Common stock	**	3,080,365
	AMERICAN TOWER CORP	Common stock	**	12,870
	AMGEN INC	Common stock	**	13,982
	ANTHEM INC	Common stock	**	4,716,803
	APPLE INC	Common stock	**	5,907,944
	APPLIED MATERIALS INC	Common stock	**	2,248,653
	APTIV PLC	Common stock	**	1,300,329
	AQUA AMERICAN INC	Common stock	**	273,904
	AT&T INC	Common stock	**	412,646
	ATLASSIAN CORP PLC-CLASS	Common stock	**	187,971
	AUTOMATIC DATA PROCESSING	Common stock	**	319,006
	AXA EQUITABLE HOLDINGS IN	Common stock	**	1,323,450
	BANK OF AMERICAN CORP	Common stock	**	90,692
	BANK OF NEW YORK MELLON C	Common stock	**	503,300
	BECTON DICKINSON AND CO	Common stock	**	5,236,445
	BEOEING CO/THE	Common stock	**	5,009,537
	BOEING CO/THE	Common stock	**	2,736,384
	BOOKING HOLDING INC	Common stock	**	3,407,138
	BOSTON SCIENTIFIC CORP	Common stock	**	38,437
	BRISTOL-MYERS SQUIBB CO	Common stock	**	740,624
	BROADCOM INC	Common stock	**	43,611
	BUNGE LTD	Common stock	**	798,506
	CANADIAN PACIFIC RAILWAY	Common stock	**	533,865
	CENTENE CORP	Common stock	**	1,023,524
	CENTERPOINT ENERGY INC	Common stock	**	763,560
	CENTURYLINK INC	Common stock	**	200,264
	CF INDUSTRIES HOLDING IN	Common stock	**	1,646,744
	CHEVRON CORP	Common stock	**	562,541

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	CHIPOTLE MEXICAN GRILL IN	Common stock	**	\$ 175,793
	CHUBB LTD	Common stock	**	3,700,972
	CIGNA CORP	Common stock	**	4,011,480
	CINTAS CORP	Common stock	**	234,907
	CISCO SYSTEMS INC	Common stock	**	1,977,199
	CITIGROUP INC	Common stock	**	508,580
	COGNIZANT TECH SOLUTIONS	Common stock	**	896,809
	COMCAST CORP - CLASS A	Common stock	**	1,961,187
	CONAGRA BRANDS INC	Common stock	**	2,375,777
	CONCHO RESOURCES INC	Common stock	**	256,493
	CONSTELLATION BRANDS INC.	Common stock	**	16,888
	CORTEVA INC	Common stock	**	646,122
	COSTAR GROUP INC	Common stock	**	924,972
	CVS HEALTH CROP	Common stock	**	2,791,224
	DANAHER CORP	Common stock	**	2,651,214
	DELTA AIR LINES INC	Common stock	**	651,350
	DOCUSIGN INC	Common stock	**	432,951
	DOLLAR GENERAL CORP	Common stock	**	2,669,754
	DOLLAR TREE INC	Common stock	**	472,883
	DOW INC	Common stock	**	1,375,091
	DUPONT DE NEMOURS INC	Common stock	**	1,600,570
	EDISON INTERNATIONAL	Common stock	**	2,236,585
	ELECTRONIC ARTS INC	Common stock	**	540,130
	EMERSON ELECTRIC CO	Common stock	**	991,380
	ENERGY INC	Common stock	**	67,433
	EQUIFAX INC	Common stock	**	399,622
	EQUITRANS MIDSTREAM CORP	Common stock	**	176,031
	EQUITY RESIDENTIAL	Common stock	**	1,540,798
	EXACT SCIENCES CORP	Common stock	**	259,221
	EXXON MOBIL CORP	Common stock	**	2,952,322
	FACEBOOK INC. - CLASS A	Common stock	**	14,726,482
	FERRARI NV	Common stock	**	234,405
	FIDELITY NATIONAL INFO SE	Common stock	**	3,773,094
	FIFTH THIRD BANCORP	Common stock	**	2,575,397
	FISERV INC	Common stock	**	3,681,890
	FLEETCOR TECHNOLOGIES INC	Common stock	**	1,162,101
	FLOWSERVE CORP	Common stock	**	106,806
	FORTIVE CORP	Common stock	**	80,286
	FOX CORP - CLASS B	Common stock	**	1,915,768
	FRANKLIN RESOURCES INC	Common stock	**	840,167
	GENERAL ELECTRIC CO	Common stock	**	3,113,261
	GILEAD SCIENCE INC	Common stock	**	1,672,780
	GLAXOSMITHKLINE PLC-SPON	Common stock	**	632,156
	GLOBAL PAYMENTS INC	Common stock	**	4,341,825
	GOLDMAN SACHS GROUP INC	Common stock	**	165,090
	HCA HEALTHCARE INC	Common stock	**	1,076,944
	HESS CORP	Common stock	**	508,625
	HILTON WORLDWIDE HOLDINGS	Common stock	**	1,222,783
	HIS MARKIT LTD	Common stock	**	278,042
	HONEYWELL INTERNATIONAL I	Common stock	**	684,813
	IAC/INTERACTIVECORP	Common stock	**	1,486,938
	INTERCONTINENTAL EXCHANGE	Common stock	**	1,298,199
	INTERNATIONAL PAPER CO	Common stock	**	1,503,533

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	INTUIT INC	Common stock	**	\$ 4,209,477
	INTUITIVE SURGICAL INC	Common stock	**	3,357,141
	JOHNSON & JOHNSON	Common stock	**	3,809,395
	JOHNSON CONTROLS INTERNAT	Common stock	**	1,342,657
	JPMORGAN CHASE & CO	Common stock	**	5,697,278
	KANSAS CITY SOUTHERN	Common stock	**	243,065
	KELLOGG CO	Common stock	**	359,632
	KIMBERLY-CLARK CORP	Common stock	**	2,676,585
	KLA CORP	Common stock	**	648,361
	KOHL'S CORP	Common stock	**	844,038
	L BRANDS INC	Common stock	**	392,679
	L3HARRIS TECHNOLOGIES INC	Common stock	**	3,224,292
	LAM RESEARCH CORP	Common stock	**	637,432
	LAS VEGAS SANDS CORP	Common stock	**	1,735,182
	LINDE PLC	Common stock	**	735,995
	LOEWS CORP	Common stock	**	1,388,623
	LULULEMON ATHLETICA INC	Common stock	**	1,039,503
	MARCH & MCLENNAN COS	Common stock	**	823,320
	MARRIOTT INTERNATIONAL -C	Common stock	**	967,335
	MARSH & MCLENNAN COS	Common stock	**	764,607
	MARVELL TECHNOLOGY GROUP	Common stock	**	963,411
	MASTERCARD INC -A	Common stock	**	7,408,615
	MATCH GROUP INC	Common stock	**	412,603
	MATTEL INC	Common stock	**	798,095
	MAXIM INTEGRATED PRODUCTS	Common stock	**	228,817
	MEDTRONIC PLC	Common stock	**	2,502,026
	METLIFE INC	Common stock	**	2,366,333
	MGM RESORTS INTERNATIONAL	Common stock	**	332,700
	MICROCHIP TECHNOLOGY INC	Common stock	**	136,345
	MICROSOFT CORP	Common stock	**	13,986,413
	MORGAN STANLEY	Common stock	**	4,181,923
	MOTOROLA SOLUTIONS INC	Common stock	**	16,436
	NETFLIX INC	Common stock	**	3,252,849
	NEWS CORP - CLASS A	Common stock	**	1,471,069
	NEXTERA ENERGY INC	Common stock	**	1,771,400
	NICE INC - CL B	Common stock	**	1,364,240
	NIelsen HOLDINGS PLC	Common stock	**	1,246,704
	NISOURCE INC	Common stock	**	2,434,330
	NORFOLK SOUTHERN CORP	Common stock	**	383,795
	NORTHERN TRUST CORP	Common stock	**	520,576
	NORTHROP GRUMMAN CORP	Common stock	**	1,135,445
	NUCOR CORP	Common stock	**	323,835
	NVENT ELECTRIC PLC	Common stock	**	473,895
	NVIDIA CORP	Common stock	**	1,503,096
	NXP SEMICONDUCTORS NV	Common stock	**	442,229
	OCCIDENTAL PETROLEUM CORP	Common stock	**	2,027,532
	PACCAR INC	Common stock	**	585,340
	PAYCOM SOFTWARE INC	Common stock	**	579,560
	PAYPAL HOLDINGS INC	Common stock	**	3,641,543
	PFIZER INC	Common stock	**	2,631,290
	PHILIP MORRIS INTERNATIONAL	Common stock	**	2,959,005
	PIONEER NATURAL RESOURCES	Common stock	**	1,441,799
	PNC FINANCIAL SERVICES GR	Common stock	**	1,946,528
	PPG INDUSTRIES INC	Common stock	**	226,933
	QUALCOMM INC	Common stock	**	4,787,360

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	RAYMOND JAMES FINANCIAL I	Common stock	**	\$ 706,734
	RAYONIER INC	Common stock	**	1,288,647
	RESTAURANT BRANDS INTERN	Common stock	**	382,748
	ROPER TECHNOLOGIES INC	Common stock	**	1,468,992
	ROSS STORES INC	Common stock	**	2,054,231
	ROYAL CARIBBEAN CRUISES L	Common stock	**	532,705
	S&P GLOBAL INC	Common stock	**	1,321,562
	SALESFORCE.COM INC	Common stock	**	4,272,390
	SCHWAB (CHARLES) CORP	Common stock	**	834,012
	SEATTLE GENETICS INC	Common stock	**	120,202
	SEMPRA ENERGY	Common stock	**	2,606,532
	SERVICENOW INC	Common stock	**	4,360,150
	SHERWIN-WILLIAMS CO/THE	Common stock	**	599,879
	SL GREEN REALTY CORP	Common stock	**	1,073,526
	SNAP-ON INC	Common stock	**	745,360
	SOUTHERN CO	Common stock	**	720,427
	SOUTHERN CO/THE	Common stock	**	4,031,955
	SOUTHWEST AIRLINES CO	Common stock	**	361,666
	SPLUNK INC	Common stock	**	1,784,659
	SPOTIFY TECHNOLOGY SA	Common stock	**	563,654
	STATE STREET CORP	Common stock	**	3,048,514
	STERICYCLE INC	Common stock	**	1,186,866
	STRYKER CORP	Common stock	**	4,049,323
	SYNOPSYS INC	Common stock	**	221,189
	TARGA RESOURCES CORP	Common stock	**	481,794
	TC ENERGY CORP	Common stock	**	3,075,401
	TD AMERITRADE HOLDING COR	Common stock	**	1,282,260
	TE CONNECTIVITY LTD	Common stock	**	287,520
	TELEFLEX INC	Common stock	**	50,067
	TELEFONICA SA-SPON ADR	Common stock	**	654,866
	TENCENT HOLDINGS LTD	Common stock	**	1,051,680
	TENCENT HOLDINGS LTD-UNS	Common stock	**	5,161,315
	TEXAS INSTRUMENTS INC	Common stock	**	1,796,830
	THERMO FISHER SCIENTIFIC	Common stock	**	2,690,573
	TJX COMPANIES INC	Common stock	**	335,036
	TOTAL SA-SPON ADR	Common stock	**	4,018,430
	TRIP.COM GROUP LTD-ADR	Common stock	**	348,682
	TYSON FOODS INC-CL A	Common stock	**	3,180,027
	UNION PACIFIC CORP	Common stock	**	713,397
	UNITED AIRLINES HOLDINGS	Common stock	**	1,199,522
	UNITED PARCEL SERVICE-CL	Common stock	**	2,561,975
	UNITED TECHNOLOGIES CORP	Common stock	**	299,520
	UNITEDHEALTH GROUP INC	Common stock	**	4,439,098
	US BANCORP	Common stock	**	1,837,397
	VEEVA SYSTEMS INC-CLASS A	Common stock	**	238,419
	VERIZON COMMUNICATIONS IN	Common stock	**	2,950,086
	VERTEX PHARMACEUTICALS IN	Common stock	**	3,778,639
	VF CORP	Common stock	**	341,037
	VISA INC - CLASS A SHARES	Common stock	**	8,460,949
	VMWARE INC - CLASS A	Common stock	**	1,067,387
	WALMART INC	Common stock	**	1,160,354
	WALT DISNEY CO/THE	Common stock	**	805,011
	WELLCARE HEALTH PLANS INC	Common stock	**	772,031

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

Plan Number: 335

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	WELLS FARGO & CO	Common stock	**	\$ 6,528,684
	WESTERN DIGITAL CORP	Common stock	**	330,044
	WEYERHAEUSER CO	Common stock	**	2,077,941
	WILLIS TOWERS WATSON PLC	Common stock	**	3,034,149
	WORKDAY INC - CLASS A	Common stock	**	2,283,717
	WYNN RESORTS LTD	Common stock	**	659,633
	XILINX INC	Common stock	**	11,244
	YUMI BRANDS INC	Common stock	**	261,394
	ZIMMER BIOMET HOLDINGS IN	Common stock	**	583,752
	ZOETIS INC	Common stock	**	211,249
	Total common stock			395,548,339
	AIA GROUP 3.6 4/29	Bonds	**	226,179
	AIG GLOBAL FUND 2.15 7/20	Bonds	**	59,995
	AIG GLOBAL FUND 2.3 7/22	Bonds	**	65,176
	AON PLC 2.8 3/21	Bonds	**	156,401
	AT&T INC 3.4 5/25	Bonds	**	157,194
	ABBOTT LABS 3.4 11/23	Bonds	**	81,917
	ABBOTT LABS 4.75 11/36	Bonds	**	267,902
	ABBVIE INC 4.5 5/35	Bonds	**	129,269
	ABBVIE INC 2.95 11/26	Bonds	**	96,322
	AGILENT TECH IN 3.2 10/22	Bonds	**	71,614
	AGILENT TECH I 3.875 7/23	Bonds	**	47,168
	AIR LEASE CORP 3.625 4/27	Bonds	**	103,779
	ALABAMA POWER C 3.75 3/45	Bonds	**	120,601
	ALBERTA PROVINCE 3.3 3/28	Bonds	**	113,336
	ABERTA PROVINC 1.75 8/20	Bonds	**	200,025
	ALEXANDRIA REAL 3.95 1/27	Bonds	**	37,416
	ALEXANDRIA REAL 3.45 4/25	Bonds	**	262,050
	ALTRIA GROUP IN 3.49 2/22	Bonds	**	61,730
	AMAZON.COM INC 2.8 8/24	Bonds	**	62,092
	AMAZON.COM INC. 3.875 8/37	Bonds	**	107,929
	AMERICA MOVIL 6.375 3/35	Bonds	**	401,112
	AMN AIRLN 16-2 3.65 6/28	Bonds	**	48,491
	AM ARILN 16-1 B 5.25 1/24	Bonds	**	100,942
	AM AIRLN 19-1AA 3.15 2/32	Bonds	**	142,093
	AMER CAMPUS CO 4.125 7/24	Bonds	**	101,256
	AMER CAMPUS C 3.625 11/27	Bonds	**	280,793
	AMERIPRISE FIN 2.875 9/26	Bonds	**	158,358
	AMGEN INC 5.75 3/40	Bonds	**	158,089
	ANHEUSER-BUSCH 5.55 1/49	Bonds	**	103,692
	ANHEUSER-BUSCH 4.15 1/25	Bonds	**	163,181
	APPLE INC 3.2 5/27	Bonds	**	452,927
	ARCELORMITTAL 4.55 3/26	Bonds	**	68,935
	AUTORIDAD CANAL 4.95 7/35	Bonds	**	233,002
	AUTOZONE INC 3.125 4/26	Bonds	**	41,194
	BAT CAPITAL CO 2.764 8/22	Bonds	**	126,715
	BBVA BANCOMER 4.375 4/24	Bonds	**	159,564
	BPCE 5.7 10/23	Bonds	**	220,742
	BANK OF AMER CRP 4 1/25	Bonds	**	132,879
	BANK OF AMER CRP 3.5 4/26	Bonds	**	116,389
	BANK OF AMER C 3.824 1/28	Bonds	**	337,670

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

Plan Number: 335

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	BANK OF MONTREAL 3.1 4/21	Bonds	**	\$ 192,750
	BANK OF NY MELLO 2.5 4/21	Bonds	**	100,571
	BAY AREA TOLL 6.907 10/50	Bonds	**	161,385
	BIOGEN INC 3.625 9/22	Bonds	**	114,440
	BOSTON SCIENTIF 3.75 3/26	Bonds	**	133,859
	BRISTOL-MYERS 4.624 5/44	Bonds	**	366,918
	BRISTOL-MYERS 2.9 7/24	Bonds	**	211,265
	BRIT COLUMBIA 2 10/22	Bonds	**	100,587
	BRIXMOR OPERAT 3.875 8/22	Bonds	**	46,849
	BRIXMOR OPERAT 4.125 6/26	Bonds	**	58,374
	BRIXMOR OPERAT 3.25 9/23	Bonds	**	108,140
	BRDCOM CRP / FIN 3 1/22	Bonds	**	142,203
	BRDCOM CRP / FIN 2.2 1/21	Bonds	**	104,864
	BURLINGTON NORT 4.15 4/45	Bonds	**	218,347
	CIGNA CORP 3 7/23	Bonds	**	70,969
	CMS ENERGY 4.875 3/44	Bonds	**	148,791
	CNOOC FINANCE 3.5 5/25	Bonds	**	209,080
	CRH AMERICA FIN 3.95 4/28	Bonds	**	215,331
	CSX CORP 4.25 3/29	Bonds	**	140,341
	CVS HEALTH COR 3.875 7/25	Bonds	**	28,762
	CVS HEALTH COR 5.125 7/45	Bonds	**	176,621
	CVS HEALTH CORP 3 8/26	Bonds	**	101,923
	CVS HEALTH CORP 3.25 8/29	Bonds	**	71,053
	CAMDEN PROP TR 2.95 12/22	Bonds	**	66,257
	CAMERON LNG 2.902 7/31	Bonds	**	29,966
	CAMERON LNG 3.701 1/39	Bonds	**	25,526
	CAPITAL ONE FIN 3.45 4/21	Bonds	**	213,666
	CARDINAL HEALTH 3.75 9/25	Bonds	**	52,928
	CARDINAL HEALTH 3.41 6/27	Bonds	**	81,765
	CELUSOSA ARAUCO 4.2 1/30	Bonds	**	200,600
	CHICAGO WTR TX 5.72 12/38	Bonds	**	130,832
	CHICAGO ARPT-B 6.395 1/40	Bonds	**	158,159
	CITIGROUP INC 3.887 1/28	Bonds	**	423,317
	CITIZENS BANK N 2.55 5/21	Bonds	**	251,581
	CITIZENS FIN GR 4.3 12/25	Bonds	**	59,035
	CITIZENS FIN G 2.375 7/21	Bonds	**	25,054
	COLUMBIA PIPELIN 3.3 6/20	Bonds	**	85,317
	COMCAST CORP 3.95 10/25	Bonds	**	245,192
	COMCAST CORP 2.65 2/30	Bonds	**	75,059
	COMMONSPIRIT 2.76 10/24	Bonds	**	45,268
	COOP RAB UA/NY 3.125 4/21	Bonds	**	253,736
	CREDIT SUISSE 2.997 12/23	Bonds	**	253,971
	CROWN CASTLE T 3.222 5/22	Bonds	**	25,288
	CROWN CASTLE T 3.663 5/25	Bonds	**	41,609
	CROWN CASTLE INT 3.7 6/26	Bonds	**	158,546
	DAIMLER FINANCE 2.3 2/21	Bonds	**	150,334
	DANSKE BANK A 3.244 12/25	Bonds	**	272,527
	DEERE & CO 8.1 5/30	Bonds	**	430,420
	DELPHI CORP 4.15 3/24	Bonds	**	58,163
	DAL 2015-1AA P 3.625 7/27	Bonds	**	43,835
	DOMINION RES 2.75 9/22	Bonds	**	101,147
	DOW CHEMICAL CO 3.15 5/24	Bonds	**	46,426
	DR PEPPER SNAPP 2.55 9/26	Bonds	**	104,362
	DUKE ENERGY COR 2.65 9/26	Bonds	**	39,993
	DUKE ENERGY COR 3.75 9/46	Bonds	**	35,750
	EOG RESOURCES 2.625 3/23	Bonds	**	203,485
	ERAC USA FINAN 5.25 10/20	Bonds	**	102,260

The Milliken Retirement Plan

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

Plan Number: 335

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	EATON VANCE CO 3.625 6/23	Bonds	**	\$ 78,456
	ECOLAB INC 3.25 12/27	Bonds	**	78,944
	ENBRIDGE INC 5.5 12/46	Bonds	**	126,534
	ENEL FIN INTL N 2.75 4/23	Bonds	**	251,671
	ENERGY TRANSFER 5.25 4/29	Bonds	**	67,260
	ESSEX PORTFOLIO 4 3/29	Bonds	**	158,152
	EXELON GENERATI 2.95 1/20	Bonds	**	35,005
	EXPERIAN FINANC 2.75 3/30	Bonds	**	196,221
	EXPRESS SCRIPTS 2.6 11/20	Bonds	**	145,605
	FED HOME LN BA 1.375 9/20	Bonds	**	494,094
	FED RLTY INVS T 2.75 6/23	Bonds	**	152,377
	FEDERAL REALITY 2.55 1/21	Bonds	**	160,896
	FHMS K024 A1 2/22	Bonds	**	148,457
	FHMS K027 A1 9/22	Bonds	**	81,964
	FHMS K068 A1 2/27	Bonds	**	75,940
	FIDELITY NATION 4.25 5/28	Bonds	**	144,248
	FIFTH THIRD BANK 4.3 1/24	Bonds	**	134,083
	FISERV INC 3.2 7/26	Bonds	**	72,471
	FLORIDA GAS TRA 4.35 7/25	Bonds	**	80,783
	GATX CORP 2.6 3/20	Bonds	**	20,023
	GATX CORP 3.25 9/26	Bonds	**	202,605
	GE CAPITAL IN 4.418 11/35	Bonds	**	212,454
	G2 8041 FRN 8/20/22	Bonds	**	1,443
	G2 8867 FRN 11/20/21	Bonds	**	189
	GEN ELEC CAP CRP 5.3 2/21	Bonds	**	41,278
	GEN ELEC CAP CRP 3.1 1/23	Bonds	**	132,704
	GEN MOTORS FIN 3.45 1/22	Bonds	**	189,290
	GOLDMAN SACHS 6.75 10/37	Bonds	**	209,021
	GOLDMAN SACHS 4.25 10/25	Bonds	**	260,224
	GOLDMAN SACHS GP 3 4/22	Bonds	**	207,691
	GOLDMAN SACHS GP 3.5 1/25	Bonds	**	78,727
	HSBC HOLDINGS 2.65 1/22	Bonds	**	202,182
	HARRIS CORP 3.832 4/25	Bonds	**	37,232
	HYUNDAI CAP AM 2.85 11/22	Bonds	**	62,622
	ING GOEP NV 3.55 4/24	Bonds	**	219,831
	INTL PAPER CO 4.4 8/47	Bonds	**	243,853
	INTESA SANPAOL 3.375 1/23	Bonds	**	202,432
	ITC HOLDINGS CO 2.7 11/22	Bonds	**	146,765
	JPMORGAN CHASE 3.375 5/23	Bonds	**	477,538
	JPMORGAN CHASE 3.3 4/26	Bonds	**	183,427
	JPMORGAN CHASE 3.882 7/38	Bonds	**	154,809
	KANSAS CITY SOUT 3 5/23	Bonds	**	45,980
	KANSAS CITY S 2.875 11/29	Bonds	**	89,637
	KEYCORP 2.9 9/20	Bonds	**	150,895
	KEYSIGHT TECHN 4.55 10/24	Bonds	**	211,844
	KILROY REALTY 4.375 10/25	Bonds	**	48,799
	KILROY REALTY 3.45 12/24	Bonds	**	83,085
	KIMCO REALTY 3.45 11/22	Bonds	**	36,127
	LIBERTY MUTUAL 4.85 8/44	Bonds	**	239,378
	LIFE STORAGE 4 6/29	Bonds	**	85,202
	LOCKHEED MARTIN 3.6 3/35	Bonds	**	32,848
	LOCKHEED MARTIN 4.7 5/46	Bonds	**	157,813
	L A ARPTS- TXB- 7.053 5/40	Bonds	**	228,533
	MANITOBA (PROV) 2.1 9/22	Bonds	**	100,585
	MARSH & MCLENNAN 3.5 6/24	Bonds	**	131,038

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

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	MASSMUTUAL GLBL 1.95 9/20	Bonds	**	\$ 200,084
	MEMORIAL SLOAN 4.2 7/55	Bonds	**	87,025
	MET TRANS AUT 5.871 11/39	Bonds	**	193,082
	MOHAWK INDUST 3.85 2/23	Bonds	**	182,208
	MORGAN STANLEY 3.971 7/38	Bonds	**	94,267
	MORGAN STANLEY 4.3 1/45	Bonds	**	117,430
	MORGAN STANLEY 3.125 7/26	Bonds	**	180,130
	NATL RURAL UTIL 2.35 6/20	Bonds	**	90,172
	NATL RURAL UTIL 2.9 3/21	Bonds	**	176,987
	NEVADA POWER CO 6.65 4/36	Bonds	**	273,954
	NEW BRUNSWICK 3.625 2/28	Bonds	**	169,332
	NEW YORK LIFE G 3.25 8/21	Bonds	**	112,407
	NYC FIN AUTH 5.508 8/37	Bonds	**	190,295
	NYC WTR-BABS-T 6.011 6/42	Bonds	**	50,716
	NYS DORM-F-BAB 5.628 3/39	Bonds	**	276,791
	NISOURCE INC 3.95 3/48	Bonds	**	141,833
	NORTHERN TRST 3.95 10/25	Bonds	**	107,648
	NORTHROP GRUMMA 3.85 4/45	Bonds	**	133,793
	NORTHWELL HEA 3.979 11/46	Bonds	**	254,534
	NUCOR CORP 3.95 5/28	Bonds	**	140,986
	NUTRIEN LTD 4 12/26	Bonds	**	58,523
	O'REILLY AUTOMOT 3.8 9/22	Bonds	**	46,697
	O'REILLY AUTOMOT 3.85 6/23	Bonds	**	57,492
	O'REILLY AUTOMOT 3.6 9/27	Bonds	**	117,441
	OCCIDENTAL PETE 3.4 3/26	Bonds	**	168,676
	OCCIDENTAL PETE 2.9 8/24	Bonds	**	60,944
	OHIO POWER CO 5.375 10/21	Bonds	**	264,823
	OMNICOM GP/OMN 3.625 5/22	Bonds	**	118,932
	OMNICOM GP/OMN 3.65 11/24	Bonds	**	78,879
	ONTARIO PROVIN 1.875 5/20	Bonds	**	190,009
	ONTARIO PROVIN 2.55 2/21	Bonds	**	146,174
	PPL CAPITAL FDG 3.1 5/26	Bonds	**	152,679
	PACCAR FINL CORP 2 9/22	Bonds	**	175,915
	PACKAGING CORP 4.5 11/23	Bonds	**	37,654
	PANASONIC CORP 2.536 7/22	Bonds	**	201,842
	PARTNERS HEALT 3.443 7/21	Bonds	**	153,387
	PAYPAL HOLDING 2.4 10/24	Bonds	**	217,090
	PENSKE TRUCK LE 3.2 7/20	Bonds	**	150,629
	REP OF POLAND 3.25 4/26	Bonds	**	116,600
	PORT AUTH NY & 5.31 8/46	Bonds	**	105,187
	PRES & FELLOW 3.619 10/37	Bonds	**	79,763
	PRICELINE GROUP 3.65 3/25	Bonds	**	117,374
	PRICELINE GROUP 3.6 6/26	Bonds	**	85,462
	PRINCIPAL FINL 3.3 9/22	Bonds	**	20,596
	PRINCIPAL FINL 3.7 5/29	Bonds	**	54,373
	QUALCOMM INC 3.25 5/27	Bonds	**	59,679
	QUEBEC PROVINCE 2.75 8/21	Bonds	**	152,423
	RELX CAPITAL INC 3.5 3/23	Bonds	**	46,708
	RAYMOND JAMES 3.625 9/26	Bonds	**	36,960
	REPUBLIC SVCS 3.375 11/27	Bonds	**	63,295
	ROCKWELL COLLINS 3.2 3/24	Bonds	**	176,906
	ROGERS COMM INC 3.7 11/49	Bonds	**	150,865
	ROPER TECHNOLOG 3.8 12/26	Bonds	**	75,231
	ROPER TECHNOLOG 2.95 9/29	Bonds	**	35,186
	SBA TOWER TRUS 2.836 1/25	Bonds	**	252,438
	SABINE PASS LIQU 4.2 3/28	Bonds	**	142,938
	SAN DIEGO G & E 6 6/39	Bonds	**	256,198
	SAN JOSE REDEV 3.375 8/34	Bonds	**	61,672

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	SANTANDER UK 2.875 8/21	Bonds	**	\$ 222,125
	SHELL INTL FIN 4.375 5/45	Bonds	**	327,463
	SHIRE ACQ INV 2.875 9/23	Bonds	**	193,422
	SIMON PROP GP LP 3.3 1/26	Bonds	**	151,713
	SC PUB SVC AUT 4.77 12/45	Bonds	**	147,728
	SC PUB SVC AU 2.388 12/23	Bonds	**	50,111
	SOUTHEAST PARTN 4.25 6/24	Bonds	**	101,409
	SPECTRA PRTN 3.375 10/26	Bonds	**	98,302
	STATE GRID OSEA 3.75 5/23	Bonds	**	218,850
	STATE STREET COR 3.1 5/23	Bonds	**	41,075
	TENCENT HOLDIN 2.985 1/23	Bonds	**	202,557
	THERMO FISHER 2.95 9/26	Bonds	**	205,620
	THOMSON REUTERS 3.35 5/26	Bonds	**	35,951
	3M CO 3.25 8/49	Bonds	**	199,439
	TORONTO DOM BA 3.625 9/31	Bonds	**	26,125
	TOTAL CAP INTL 2.434 1/25	Bonds	**	151,678
	TRANS-ALLEGHENY 3.85 6/25	Bonds	**	212,083
	TRANSURBAN FIN 4.125 2/26	Bonds	**	37,095
	TRANSURBAN FIN 3.375 3/27	Bonds	**	40,837
	TRINITY ACQ PLC 3.5 9/21	Bonds	**	66,156
	TRINITY HEALT 4.125 12/45	Bonds	**	137,355
	UBS GROUP FUNDI 2.95 9/20	Bonds	**	201,308
	UNTD AIR 19-1 A 4.15 8/31	Bonds	**	93,082
	UNITED OVERSEAS 3.2 4/21	Bonds	**	202,670
	UNITEDHEALTH GR 4.75 7/45	Bonds	**	146,539
	UNITEDHEALTH GRP 3.5 8/39	Bonds	**	114,971
	REGENTS UNIV 5.77 5/43	Bonds	**	198,798
	UNIV OF CA-J-R 4.131 5/45	Bonds	**	27,490
	VENTAS REALTY 3.25 10/26	Bonds	**	102,132
	VERIZON COMM IN 5.15 9/23	Bonds	**	354,753
	VERIZON COMM I 4.272 1/36	Bonds	**	276,061
	VA ST CMWLTH U 4.956 1/44	Bonds	**	154,170
	VA TRN BRD BABS 5.35 5/35	Bonds	**	128,030
	VA PBA-B2 - BABS 5.9 8/30	Bonds	**	138,486
	VISA INC 4.15 12/35	Bonds	**	159,132
	VISA INC 2.15 9/22	Bonds	**	106,143
	VODAFONE GROUP 3.875 6/49	Bonds	**	166,855
	VOLKSWAGEN GRP 2.7 9/22	Bonds	**	232,536
	WEA FINANCE LL 3.25 10/20	Bonds	**	201,584
	VULCAN MATERIALS 4.5 6/47	Bonds	**	38,330
	WPP FINANCE 20 3.625 9/22	Bonds	**	93,057
	WPP FINANCE 201 3.75 9/24	Bonds	**	120,959
	WP CAREY INC 3.85 7/29	Bonds	**	148,185
	WEINGARTEN RLTY 3.5 4/23	Bonds	**	46,174
	WELLPOINT INC 3.125 5/22	Bonds	**	153,723
	WELLPOINT INC 4.65 1/43	Bonds	**	67,549
	WELLS FARGO CO 2.5 3/21	Bonds	**	201,385
	WELLS FARGO CO 3.069 1/23	Bonds	**	147,486
	WELLS FARGO CO 3.584 5/28	Bonds	**	148,438
	WILLIS NORTH AME 3.6 5/24	Bonds	**	46,974
	WISCONSIN-A-RE 3.954 5/36	Bonds	**	187,093
	WOODSIDE FINANCE 3.7 9/26	Bonds	**	136,127
	WOODSIDE FINANCE 3.7 3/28	Bonds	**	69,205
	WOODSIDE FINANCE 4.5 3/29	Bonds	**	82,105
	DIN 2019-1A A21 6/49	Bonds	**	157,133

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	AESOP 2017-1A B 9/23	Bonds	**	\$ 203,348
	AESOP 2019-3A B 3/26	Bonds	**	133,990
	BFLD 2019 DPLO C 10/34	Bonds	**	109,791
	BX 2019-IMC A 4/34	Bonds	**	160,098
	BACM 2016-UB10 A4 7/49	Bonds	**	155,533
	BBCMS 2019-C4 C 8/52	Bonds	**	159,442
	COMM 2017-COR2 A3 9/50	Bonds	**	158,811
	CNH 20190C B 4/27	Bonds	**	139,357
	COMET 2019-A3 A3 8/28	Bonds	**	152,038
	GFORT 2019-1 C 4/24	Bonds	**	162,334
	GWT 2019-WOLF C 12/29	Bonds	**	54,912
	MVWOT 2019-1A A 11/36	Bonds	**	144,341
	MSC 2019-MEAD D 11/36	Bonds	**	107,877
	NAVSL 2019-FA A2 8/68	Bonds	**	104,759
	NAVSL 2019-CA A2 2/68	Bonds	**	100,457
	NAVSL 2019-GA A 10/68	Bonds	**	99,328
	SRT 2019-C A4 11/23	Bonds	**	173,810
	SDART 2019-3 C 10/25	Bonds	**	165,610
	WFCM 2017-C38 A5 7/50	Bonds	**	158,885
	WOSAT 2019-A B 12/25	Bonds	**	74,483
	Total corporate bonds			39,598,443
	US TREASURY N/B 5.25 2/29	Bonds	**	1,674,753
	US TREASURY N/B 3.5 2/39	Bonds	**	1,288,488
	US TREASURY N/B 3.875 8/40	Bonds	**	548,304
	US TREASURY N/B 3.125 11/41	Bonds	**	209,888
	US TREASURY N/B 2.75 11/42	Bonds	**	186,813
	US TREASURY N/B 3.125 8/44	Bonds	**	341,438
	US TREASURY N/B 2.5 2/45	Bonds	**	260,379
	US TREASURY N/B 2.25 8/46	Bonds	**	505,456
	US TREASURY N/B 3 5/47	Bonds	**	488,695
	US TREASURY N/B 2.75 2/24	Bonds	**	6,166,388
	US TREASURY N/B 2.25 11/24	Bonds	**	61,528
	US TREASURY N/B 2 2/22	Bonds	**	1,612,750
	US TREASURY N/B 2 2/23	Bonds	**	808,875
	US TREASURY N/B 1.625 8/29	Bonds	**	857,175
	US TREASURY N/B 4.5 5/38	Bonds	**	148,638
	US TREASURY N/B 3 11/44	Bonds	**	195,180
	US TREASURY N/B 3 5/45	Bonds	**	234,609
	US TREASURY N/B 2.5 2/46	Bonds	**	102,125
	US TREASURY N/B 2.5 5/46	Bonds	**	607,551
	US TREASURY N/B 3 2/47	Bonds	**	151,706
	US TREASURY N/B 2.75 8/47	Bonds	**	906,263
	US TREASURY N/B 3 2/48	Bonds	**	359,700
	US TREASURY N/B 3 8/48	Bonds	**	799,748
	US TREASURY N/B 2.25 8/49	Bonds	**	1,145,153
	US TREASURY N/B 1.5 8/26	Bonds	**	426,164
	US TREASURY N/B 2.75 8/23	Bonds	**	1,069,752
	US TREASURY N/B 2.5 1/24	Bonds	**	1,827,525
	US TREASURY N 2.125 12/22	Bonds	**	705,208
	US TREASURY N 1.625 11/22	Bonds	**	1,665,520
	US TREASURY N/B 2.25 2/27	Bonds	**	71,903
	US TREASURY N/B 1.75 5/22	Bonds	**	1,124,025
	US TREASURY N/B 2 5/24	Bonds	**	476,169

The Milliken Retirement Plan

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

Plan Number: 335

EIN: 51-0105342

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	US TREASURY N/B 1.75 6/22	Bonds	**	\$ 291,088
	US TREASURY N/B 2.75 7/23	Bonds	**	1,972,141
	US TREASURY N/B 1.5 11/24	Bonds	**	1,323,527
	US GOVT STIF 5 BPS	Money Market securities	**	1,871,337
	Total U.S. government securities			32,485,960
*	TROWEPRICE RET HYB BAL TR T11	Collective trust fund	**	8,070,072
*	TROWEPRICE RET HYB 2005 TR T11	Collective trust fund	**	9,256,595
*	TROWEPRICE RET HYB 2010 TR T11	Collective trust fund	**	11,382,540
*	TROWEPRICE RET HYB 2015 TR T11	Collective trust fund	**	25,466,667
*	TROWEPRICE RET HYB 2020 TR T11	Collective trust fund	**	69,104,371
*	TROWEPRICE RET HYB 2025 TR T11	Collective trust fund	**	84,626,376
*	TROWEPRICE RET HYB 2030 TR T11	Collective trust fund	**	76,156,978
*	TROWEPRICE RET HYB 2035 TR T11	Collective trust fund	**	43,832,013
*	TROWEPRICE RET HYB 2040 TR T11	Collective trust fund	**	28,779,904
*	TROWEPRICE RET HYB 2045 TR T11	Collective trust fund	**	17,201,976
*	TROWEPRICE RET HYB 2050 TR T11	Collective trust fund	**	8,580,739
*	TROWEPRICE RET HYB 2055 TR T11	Collective trust fund	**	6,714,115
*	TROWEPRICE RET HYB 2060 TR T11	Collective trust fund	**	2,137,594
	US TREASURY MM TRUST C	Collective trust fund	**	109,904,907
	Total collective trust funds			501,214,847
	Total investments			1,226,504,896
		Interest rates of 3.25% to		
		7.75%, maturing at various		
*	Notes receivable from participants	dates through February 2043		16,803,866
	Total			\$ 1,243,308,762

* 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, 2019

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, 2019

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
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