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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

B This return/report is:
- [ ] the first return/report
- [ ] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
THE MILLIKEN RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 335

1c Effective date of plan 01/01/1965

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)
MILLIKEN & COMPANY

PO BOX 1926, M-280
SPARTANBURG, SC 29304

2b Employer Identification Number (EIN) 51-0105342

2c Plan Sponsor's telephone number 864-503-1493

2d Business code (see instructions) 314000

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.	10/14/2021	BRAD A. JOHNSON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2021	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

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**	10657
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)**	6665
a(2) Total number of active participants at the end of the plan year	**6a(2)**	6063
b Retired or separated participants receiving benefits	**6b**	139
c Other retired or separated participants entitled to future benefits	**6c**	3652
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	9854
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	168
f Total. Add lines **6d** and **6e**	**6f**	10022
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	9455
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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 2020 Form M-1 annual report. If the plan was not required to file the 2020 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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
THE MILLIKEN RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 335

C Plan sponsor's name as shown on line 2a of Form 5500
MILLIKEN & COMPANY

D Employer Identification Number (EIN)
51-0105342

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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	60936	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

FINANCIAL ENGINES

1050 ENTERPRISE WAY
3RD FLOOR
SUNNYVALE, CA 94089

(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?
26 50	NONE	47795	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ELLWOOD ASSOC.

33 WEST MONROE
#1700
CHICAGO, IL 60603

(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?
16 50	NONE	16980	Yes [ ] No [X]	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.
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.
DODGE & COX INCOME BOSTON FINANCIAL DATA SERVICES PO BOX 8422 BOSTON, MA 02266	FEE FOR SHAREHOLDER SERVICING BASED UPON 0.08%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
T ROWE PRICE RPS INC	15 21 25 28 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%

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.
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.
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
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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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(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)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
THE MILLIKEN RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 335

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MILLIKEN & COMPANY

D Employer Identification Number (EIN)
51-0105342

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

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2055 TRUST

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

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)
35-6785642-016	C	7327176

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2050 TRUST

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

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)
35-6785642-015	C	10337650

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2045 TRUST

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

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)
35-6785642-014	C	18419693

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2040 TRUST

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

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)
35-6785642-013	C	35439457

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2035 TRUST

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

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)
35-6785642-012	C	47438733

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2030 TRUST

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

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)
35-6785642-011	C	87301960

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIREMENT 2025 TRUST

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

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)
35-6785642-010	C	83448995

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-009	C	56223073

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-008	C	23199009

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-007	C	11078551

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-006	C	9796509

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-005	C	6022642

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6785642-018	C	3244518

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	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-6559833-004	C	132340483

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

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

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

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

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

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

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

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

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

Part II **Information on Participating Plans (to be completed by DFEs)**
(Complete as many entries as needed to report all participating plans)

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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)		10274391
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	32485960	45903334
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	39598443	54252035
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	395548339	373414833
(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)	16803866	14560054
(9) Value of interest in common/collective trusts	1c(9)	501214847	531618449
(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)	257657307	306126938
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	1243308762	1336150034
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		12502215
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	12502215
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	1243308762	1323647819

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)	20833574	
	(B) Participants	2a(1)(B)	24723716	
	(C) Others (including rollovers)	2a(1)(C)	1963379	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		47520669
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)	642666	
	(C) Corporate debt instruments	2b(1)(C)	1032727	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	124219	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1799612
	(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)	4572306	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		4572306
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	186196417	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	185629825	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		566592
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	65887560	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		65887560

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		48144260
(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)		46432598
c Other income	2c		-95309
d Total income. Add all **income** amounts in column (b) and enter total	2d		214828288
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	156449478	
(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)		156449478
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		219864
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	16980	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	47795	
(4) Other	2i(4)	60936	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		125711
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		156795053
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		58033235
l Transfers of assets:			
(1) To this plan	2l(1)		22305822
(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 Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 **(2)** ☐ DOL Regulation 2520.103-12(d) **(3)** ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	

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

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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 Distributions

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

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

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

EIN(s): 52-1481931

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

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

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

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

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

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

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

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

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

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

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

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, 2020 and 2019

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GRANT THORNTON LLP
1415 Vantage Park Drive, Suite 500
Charlotte, NC 28203

D +1 704 632 3500
F +1 704 334 7701

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Trustees
The Milliken Retirement Plan

Report on the financial statements

We were engaged to audit the accompanying financial statements of The Milliken Retirement Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years ended December 31, 2020 and 2019, 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 a certification from this entity as of December 31, 2020 and 2019, 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.

Grant Thornton LLP is the U.S. member firm of Grant Thornton International Ltd (GTIL). GTIL and each of its member firms are separate legal entities and are not a worldwide partnership.

Supplementary information
The supplemental schedule, Schedule H, Line 4i – Schedule of assets (held at end of year) as of December 31, 2020 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

Grant Thornton LLP

Charlotte, North Carolina
October 13, 2021

The Milliken Retirement Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31,

	2020	2019
Assets		
Investments, at fair value:		
Participant-directed investments	$ 1,311,315,589	$ 1,226,504,896
Total investments, at fair value	1,311,315,589	1,226,504,896
Receivables:		
Due from broker	10,274,391	-
Notes receivable from participants	14,779,918	16,803,866
Total receivables	25,054,309	16,803,866
Payables:		
Due to broker	12,502,215	-
Total payables	12,502,215	-
Total assets	1,323,867,683	1,243,308,762
NET ASSETS AVAILABLE FOR BENEFITS	$ 1,323,867,683	$ 1,243,308,762

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,

	2020	2019
Additions:		
Investment income, net:		
Net appreciation in fair value of investments	$ 160,643,968	$ 212,807,732
Interest and dividends	6,634,741	13,131,101
Investment income, net	167,278,709	225,938,833
Contributions:		
Employer	20,833,574	13,997,234
Participant	24,723,716	24,466,458
Rollover	1,963,379	29,459,435
Total contributions	47,520,669	67,923,127
Interest income on notes receivable from participants	124,219	896,626
Total additions	214,923,597	294,758,586
Deductions:		
Benefits paid to participants	156,449,478	107,938,084
Administrative expenses	221,020	71,397
Total deductions	156,670,498	108,009,481
Increase in net assets available for benefits	58,253,099	186,749,105
Transfer into plan	22,305,822	2,477,419
Net assets available for benefits:		
Beginning of year	1,243,308,762	1,054,082,238
End of year	$ 1,323,867,683	$ 1,243,308,762

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

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.

On December 31, 2020, the Borchers Americas, Inc. 401(k) Plan was merged into the Milliken Retirement Plan. Assets of $22,021,714 and notes receivable from participants of $284,108 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 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.

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 $100,000 or 50% of their vested account balance, whichever is less, following the adoption of the Coronavirus Aid, Relief and Economic Security ("CARES") Act provision. The CARES Act increased the maximum dollar amount available from $50,000 to $100,000 during 2020. 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 2020 and 2019, notes receivable from participants had maturities through 2044 at interest rates ranging from 3.25% to 7.75%.

Forfeited Accounts

During the years ended December 31, 2020 and 2019, employer contributions were increased by approximately $8,167 and $530 in 2020 and 2019 respectively, from forfeited nonvested accounts. Forfeited nonvested accounts totaled approximately $25,222 and $2,000 at December 31, 2020 and 2019, 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 are 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.

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, 2020 or 2019.

New Accounting Pronouncements

In July 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2018-09, *Codification Improvements*, which made changes to a variety of topics, to clarify, correct errors in, or make minor improvements to the Accounting Standards Codification ("ASC"). The amendments in the ASU were effective for the Plan's fiscal year beginning after December 15, 2019, with early adoption permitted. Entities are required to adopt the guidance retrospectively to all periods presented. The Plan adopted the updated provisions in these financial statements. The adoption of such provisions did not have a material impact on the financial statements and related disclosures.

In August 2018, FASB issued ASU 2018-13, *Fair Value Measurement - Disclosure Framework (Topic 820).* The updated guidance improves the disclosure requirements for fair value measurements. The updated guidance was effective for fiscal years, and interim periods within those fiscal years, beginning after December 15, 2019. The Plan adopted the updated provisions in these financial statements. The adoption of such provisions did not have a material impact on the financial statements and related disclosures.

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, 2020 and 2019.

- Investment income, net and interest income on notes receivable from participants as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2020 and 2019.

- Schedule H, Line 4i - Schedule of assets (held at end of year) as of December 31, 2020.

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.

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 marker data by correlation or other means.

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

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

The assets' or liabilities' fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

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

Mutual Funds

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

Separately Managed Funds

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

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 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, 2020 and 2019.

December 31, 2020	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	$ 63,687,180	$ -	$ -	$ 63,687,180
Total mutual funds	63,687,180	-	-	63,687,180
Separately managed funds:				
Common stock	373,414,833	-	-	373,414,833
Mutual funds	242,439,758	-	-	242,439,758
Corporate bonds	-	54,252,035	-	54,252,035
U.S. government securities	-	45,903,334	-	45,903,334
Total separately managed funds	615,854,591	100,155,369	-	716,009,960
Investments at NAV - Collective trust funds:				
Target retirement funds *	-	-	-	399,277,966
Money market funds *	-	-	-	132,340,483
Total collective trust funds	-	-	-	531,618,449
Total investments	$ 679,541,771	$ 100,155,369	$ -	$ 1,311,315,589

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

* Investments measured using NAV are not classified in the fair value hierarchy in accordance with ASU 2015-07.

NOTE 5 - RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds and units of collective trust funds and separately managed funds managed by 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.

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 (the “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, 2020 and 2019, 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 - 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.

On March 11, 2020, the World Health Organization declared a pandemic in relation to the outbreak of the COVID-19 virus. The outbreak is having a broad impact on commerce and financial markets throughout the world. Due to the current economic volatility, it is impractical to quantify the estimated impact on the fair value of the Plan's investments and the amounts reported in the financial statements.

NOTE 9 - SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through October 13, 2021, the date the financial statements were available to be issued. The Plan is not aware of any subsequent events that would require recognition or disclosure in the financial statements.

NOTE 10 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits at December 31, 2020 and 2019, and for the year ended December 31, 2020, per the financial statements to Form 5500:

	Net Increase in Net Assets Available for Benefits for the Year Ended December 31, 2020	Net Assets Available for Benefits	
		December 31, 2020	December 31, 2019
Per financial statements	$ 80,558,921	$ 1,323,867,683	$ 1,243,308,762
Deemed distributions, December 31, 2020	(219,864)	(219,864)	-
Per Form 5500	$ 80,339,057	$ 1,323,647,819	$ 1,243,308,762

SUPPLEMENTAL SCHEDULE

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, 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	**	$ 30,286,003
	BRANDES INSTITUTIONAL INTERNATIONAL EQUITY	Mutual fund	**	2,594,818
	DODGE & COX INCOME	Mutual fund	**	41,399,991
	VANGUARD INSTITUTIONAL INDEX	Mutual fund	**	43,108,554
	VANGUARD EXTENDED MARKETS INDEX INST FUND	Mutual fund	**	17,623,190
	VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND	Mutual fund	**	25,847,327
	VANGUARD TOTAL STOCK MARKET INDEX FUND	Mutual fund	**	81,579,875
*	T. ROWE PRICE SMALL CAP STOCK FUND	Mutual fund	**	41,781,057
*	T ROWE PR MID CAP GROW-I	Mutual fund	**	10,515,728
*	T ROWE PR MID-CAP VALUE-I	Mutual fund	**	10,850,576
*	T ROWE PRICE GOV RES FUND	Mutual fund	**	539,818
	Total mutual funds			306,126,937
	ABBVIE INC	Common stock	**	2,700,609
	ADOBE INC	Common stock	**	25,006
	ADVANCED MICRO DEVICES	Common stock	**	2,247,262
	AGILENT TECHNOLOGIES INC	Common stock	**	15,167
	AIRBNB INC-CLASS A	Common stock	**	142,983
	AKZO NOBEL NV-SPON ADR	Common stock	**	321,691
	ALASKA AIR GROUP INC	Common stock	**	496,236
	ALIBABA GROUP HOLDING - SP	Common stock	**	6,745,679
	ALIGN TECHNOLOGY INC	Common stock	**	159,780
	ALPHABET INC-CL C	Common stock	**	11,749,859
	ALPHABET INC-CLL A	Common stock	**	2,621,949
	ALTRIA GROUP INC	Common stock	**	225,500
	AMAZON.COM INC.	Common stock	**	24,759,182
	AMEREN CORPORATION	Common stock	**	914,785
	AMERICAN INTERNATIONAL GR	Common stock	**	2,804,177
	ANTHEM INC	Common stock	**	3,642,766
	APPLE INC	Common stock	**	11,157,902
	APPLIED MATERIALS INC	Common stock	**	2,421,147
	APTIV PLC	Common stock	**	170,159
	AT&T INC	Common stock	**	464,416
	ATLASSIAN CORP PLC-CLASS	Common stock	**	488,087
	BANK OF AMERICAN CORP	Common stock	**	484,899
	BECTON DICKINSON AND CO	Common stock	**	2,658,767
	BIOGEN INC	Common stock	**	342,804
	BOEING CO/THE	Common stock	**	1,852,475
	BOOKING HOLDING INC	Common stock	**	1,824,134
	BUNGE LTD	Common stock	**	437,747
	CANADIAN PACIFIC RAILWAY	Common stock	**	50,270
	CARVANA CO	Common stock	**	617,295
	CATERPILLAR INC	Common stock	**	867,871
	CENTENE CORP	Common stock	**	864,192
	CF INDUSTRIES HOLDING IN	Common stock	**	2,365,529
	CHARTER COMMUNICATIONS IN	Common stock	**	21,170
	CHEVRON CORP	Common stock	**	309,763
	CHIPOTLE MEXICAN GRILL IN	Common stock	**	1,411,671
	CHUBB LTD	Common stock	**	3,809,828
	CIGNA CORP	Common stock	**	2,737,775
	CINTAS CORP	Common stock	**	794,578
	CISCO SYSTEMS INC	Common stock	**	2,359,757
	CITRIX SYSTEMS INC	Common stock	**	520,400
	CLARIVATE PLC	Common stock	**	109,927
	COCA-COLA CO/THE	Common stock	**	960,852
	COMCAST CORP - CLASS A	Common stock	**	2,640,803
	CONAGRA BRANDS INC	Common stock	**	1,949,990
	CONOCOPHILLIPS	Common stock	**	171,957
	COSTAR GROUP INC	Common stock	**	1,408,603
	COUPA SOFTWARE INC	Common stock	**	168,438
	CROWDSTRIKE HOLDINGS INC	Common stock	**	105,910
	CUMMINS INC	Common stock	**	194,398
	CVS HEALTH CROP	Common stock	**	1,884,260
	DANAHER CORP	Common stock	**	2,372,677

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	DOCUSIGN INC	Common stock	**	$ 777,161
	DOLLAR GENERAL CORP	Common stock	**	2,544,420
	DOLLAR TREE INC	Common stock	**	24,417
	DOMINO'S PIZZA INC	Common stock	**	151,467
	DOORDASH INC - A	Common stock	**	112,773
	DUKE ENERGY CORP	Common stock	**	219,744
	DUPONT DE NEMOURS INC	Common stock	**	3,673,969
	EDISON INTERNATIONAL	Common stock	**	1,400,132
	EMERSON ELECTRIC CO	Common stock	**	442,196
	ENBRIDGE INC	Common stock	**	715,392
	EOG RESOURCES INC	Common stock	**	1,127,810
	EQUIFAX INC	Common stock	**	192,454
	EQUITABLE HOLDINGS INC	Common stock	**	1,577,470
	EQUITY RESIDENTIAL	Common stock	**	1,739,038
	ETSY INC	Common stock	**	469,860
	EXACT SCIENCES CORP	Common stock	**	56,176
	EXXON MOBIL CORP	Common stock	**	1,072,792
	FACEBOOK INC. - CLASS A	Common stock	**	14,010,650
	FIDELITY NATIONAL INFO SE	Common stock	**	2,314,851
	FIFTH THIRD BANCORP	Common stock	**	2,190,878
	FISERV INC	Common stock	**	2,423,624
	FLOWSERVE CORP	Common stock	**	132,476
	FORTIVE CORP	Common stock	**	495,882
	FOX CORP - CLASS B	Common stock	**	999,104
	FRANKLIN RESOURCES INC	Common stock	**	480,783
	GENERAL ELECTRIC CO	Common stock	**	4,248,029
	GENERAL MOTORS CO	Common stock	**	282,278
	GILEAD SCIENCE INC	Common stock	**	614,643
	GLAXOSMITHKLINE PLC-SPON	Common stock	**	709,320
	GLOBAL PAYMENTS INC	Common stock	**	4,739,455
	GOLDMAN SACHS GROUP INC	Common stock	**	2,812,467
	HALLIBURTON CO	Common stock	**	1,002,569
	HCA HEALTHCARE INC	Common stock	**	1,043,499
	HESS CORP	Common stock	**	289,975
	HILTON WORLDWIDE HOLDINGS	Common stock	**	52,960
	HONEYWELL INTERNATIONAL I	Common stock	**	105,712
	HUMANA INC	Common stock	**	528,428
	INCYTE CORP	Common stock	**	794,475
	INTERCONTINENTAL EXCHANGE	Common stock	**	871,477
	INTERNATIONAL PAPER CO	Common stock	**	2,511,954
	INTUIT INC	Common stock	**	4,683,551
	INTUITIVE SURGICAL INC	Common stock	**	3,429,475
	JD.COM INC-ADR	Common stock	**	184,590
	JOHNSON & JOHNSON	Common stock	**	2,081,665
	JOHNSON CONTROLS INTERNAT	Common stock	**	655,335
	JPMORGAN CHASE & CO	Common stock	**	1,388,113
	KANSAS CITY SOUTHERN	Common stock	**	17,759
	KIMBERLY-CLARK CORP	Common stock	**	1,425,692
	KLA CORP	Common stock	**	40,908
	KOHLS CORP	Common stock	**	1,141,477
	L3HARRIS TECHNOLOGIES INC	Common stock	**	2,166,736
	LAM RESEARCH CORP	Common stock	**	97,288
	LAS VEGAS SANDS CORP	Common stock	**	1,504,066
	LINDE PLC	Common stock	**	794,219
	LOEWS CORP	Common stock	**	2,041,567
	LULULEMON ATHLETICA INC	Common stock	**	1,539,337
	MAGNA INTERNATIONAL INC	Common stock	**	194,558
	MARRIOTT INTERNATIONAL -C	Common stock	**	153,687
	MARSH & MCLENNAN COS	Common stock	**	594,243
	MARVELL TECHNOLOGY GROUP	Common stock	**	1,778,709
	MASTERCARD INC -A	Common stock	**	5,201,330
	MATCH GROUP INC	Common stock	**	2,256,511
	MATTEL INC	Common stock	**	1,070,366
	MAXIM INTEGREATED PRODUCTS	Common stock	**	684,467
	MCDONALD'S CORP	Common stock	**	245,265
	MEDTRONIC PLC	Common stock	**	2,442,838
	MERCK & CO. INC.	Common stock	**	670,760

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	METLIFE INC	Common stock	**	$ 2,953,296
	MICROSOFT CORP	Common stock	**	13,519,132
	MONDELEZ INTERNATIONAL IN	Common stock	**	80,922
	MONGODB INC	Common stock	**	143,616
	MONOLITHIC POWER SYSTEMS	Common stock	**	386,006
	MORGAN STANLEY	Common stock	**	3,832,198
	MSCI INC	Common stock	**	29,471
	NETFLIX INC	Common stock	**	5,173,705
	NEWS CORP - CLASS A	Common stock	**	1,819,498
	NEXTERA ENERGY INC	Common stock	**	1,550,502
	NIELSEN HOLDINGS PLC	Common stock	**	1,101,059
	NIKE INC -CL B	Common stock	**	2,111,864
	NISOURCE INC	Common stock	**	2,410,443
	NORFOLK SOUTHERN CORP	Common stock	**	484,012
	NVIDIA CORP	Common stock	**	3,196,908
	NXP SEMICONDUCTORS NV	Common stock	**	545,881
	OCCIDENTAL PETE CO WT	Common stock	**	23,324
	OCCIDENTAL PETROLEUM CORP	Common stock	**	185,217
	PACCAR INC	Common stock	**	610,345
	PARKER HANNIFIN CORP	Common stock	**	157,998
	PAYCOM SOFTWARE INC	Common stock	**	588,830
	PAYPAL HOLDINGS INC	Common stock	**	6,180,304
	PFIZER INC	Common stock	**	1,736,254
	PHILIP MORRIS INTERNATIONAL	Common stock	**	2,595,798
	PINDUODUO INC-ADR	Common stock	**	533,188
	PNC FINANCIAL SERVICES GR	Common stock	**	1,576,420
	PPD INC	Common stock	**	162,340
	PPG INDUSTRIES INC	Common stock	**	532,893
	QUALCOMM INC	Common stock	**	5,598,495
	RAYMOND JAMES FINANCIAL I	Common stock	**	895,854
	RAYONIER INC	Common stock	**	1,221,238
	RINGCENTRAL INC-CLASS A	Common stock	**	113,691
	ROKU INC	Common stock	**	99,606
	ROPER TECHNOLOGIES INC	Common stock	**	1,128,163
	ROSS STORES INC	Common stock	**	1,653,759
	S&P GLOBAL INC	Common stock	**	1,363,901
	SALESFORCE.COM INC	Common stock	**	4,424,341
	SANOFI-ADR	Common stock	**	524,140
	SCHWAB (CHARLES) CORP	Common stock	**	1,695,742
	SEA LTD-ADR	Common stock	**	3,013,816
	SEAGEN INC	Common stock	**	48,689
	SEMPRA ENERGY	Common stock	**	2,199,143
	SERVICENOW INC	Common stock	**	5,600,075
	SHERWIN-WILLIAMS CO/THE	Common stock	**	254,279
	SHOPIFY INC - CLASS A	Common stock	**	830,851
	SL GREEN REALTY CORP	Common stock	**	647,635
	SNAP-ON INC	Common stock	**	2,889,210
	SNOWFLAKE INC-CLASS A	Common stock	**	75,134
	SOUTHERN CO	Common stock	**	672,365
	SOUTHERN CO/THE	Common stock	**	4,018,013
	SPLUNK INC	Common stock	**	1,280,971
	SPOTIFY TECHNOLOGY SA	Common stock	**	1,397,720
	SQUARE INC - A	Common stock	**	174,112
	STARBUCKS CORP	Common stock	**	171,168
	STATE STREET CORP	Common stock	**	1,968,990
	STERICYCLE INC	Common stock	**	1,118,085
	STRYKER CORP	Common stock	**	3,006,396
	SYNOPSYS INC	Common stock	**	1,700,096
	T-MOBILE US INC	Common stock	**	80,910
	TARGA RESOURCES CORP	Common stock	**	793,405
	TC ENERGY CORP	Common stock	**	1,109,864
	TE CONNECTIVITY LTD	Common stock	**	876,184
	TENCENT HOLDINGS LTD	Common stock	**	7,050,000
	TENCENT HOLDINGS LTD-UNS	Common stock	**	4,577,308
	TEXAS INSTRUMENTS INC	Common stock	**	2,124,006
	THERMO FISHER SCIENTIFIC	Common stock	**	2,130,944
	TJX COMPANIES INC	Common stock	**	906,140

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	TOTAL SE-SPON ADR	Common stock	**	$ 2,885,294
	TWILIO INC - A	Common stock	**	244,059
	TYSON FOODS INC-CL A	Common stock	**	2,476,365
	UNION PACIFIC CORP	Common stock	**	509,931
	UNITED AIRLINES HOLDINGS	Common stock	**	24,782
	UNITED PARCEL SERVICE-CL	Common stock	**	3,364,127
	UNITEDHEALTH GROUP INC	Common stock	**	4,470,819
	VEEVA SYSTEMS INC-CLASS A	Common stock	**	534,427
	VERIZON COMMUNICATIONS IN	Common stock	**	495,674
	VERTEX PHARMACEUTICALS IN	Common stock	**	2,291,316
	VF CORP	Common stock	**	239,148
	VISA INC - CLASS A SHARES	Common stock	**	6,889,339
	VOLKSWAGEN AG-UNSP ADR PR	Common stock	**	1,270,212
	WALMART INC	Common stock	**	705,038
	WALT DISNEY CO/THE	Common stock	**	1,907,644
	WELLS FARGO & CO	Common stock	**	4,192,696
	WELLTOWER INC	Common stock	**	330,014
	WEYERHAEUSER CO	Common stock	**	2,805,053
	WILLIS TOWERS WATSON PLC	Common stock	**	695,033
	WIX.COM LTD	Common stock	**	884,858
	WORKDAY INC - CLASS A	Common stock	**	906,205
	YUMI BRANDS INC	Common stock	**	704,772
	ZIMMER BIOMET HOLDINGS IN	Common stock	**	713,283
	ZOETIS INC	Common stock	**	852,325
	ZOOM VIDEO COMMUNICATIONS	Common stock	**	356,210
	Total common stock			373,414,833
	ABBOTT LABS 3.4 11/23	Bonds	**	84,521
	ABBOTT LABS 4.75 11/36	Bonds	**	295,913
	ABBVIE INC 4.5 5/35	Bonds	**	144,449
	ABBVIE INC 4.7 5/45	Bonds	**	162,698
	ABBVIE INC 2.95 11/26	Bonds	**	104,976
	AGILENT TECH IN 3.2 10/22	Bonds	**	72,864
	AGILENT TECH I 3.875 7/23	Bonds	**	48,424
	AIA GROUP 3.6 4/29	Bonds	**	243,468
	AIG GLOBAL FUND 2.3 7/22	Bonds	**	66,891
	AIR LEASE CORP 3.625 4/27	Bonds	**	107,171
	AIR PROD & CHEM 1.5 10/25	Bonds	**	15,580
	ALABAMA POWER C 3.75 3/45	Bonds	**	138,141
	ALBERTA PROVINCE 3.3 3/28	Bonds	**	120,970
	ALEXANDRIA REAL 3.95 1/27	Bonds	**	40,206
	ALEXANDRIA REAL 3.45 4/25	Bonds	**	277,524
	ALTRIA GROUP IN 3.49 2/22	Bonds	**	62,060
	ALTRIA GROUP IN 2.35 5/25	Bonds	**	47,709
	AMAZON.COM INC 2.8 8/24	Bonds	**	64,887
	AMAZON.COM INC. 3.875 8/37	Bonds	**	117,942
	AMERICA MOVIL 6.375 3/35	Bonds	**	450,777
	AM AIRLN 19-1AA 3.15 2/32	Bonds	**	129,775
	AMER CAMPUS CO 4.125 7/24	Bonds	**	103,448
	AMER CAMPUS C 3.625 11/27	Bonds	**	296,002
	AMER INTL GROUP 3.4 6/30	Bonds	**	165,493
	AMERIPRISE FIN 2.875 9/26	Bonds	**	171,654
	AMGEN INC 2.77 9/53	Bonds	**	173,601
	ANGLO AMERICAN 2.625 9/30	Bonds	**	207,783
	ANHEUSER-BUSCH 5.55 1/49	Bonds	**	113,610
	ANHEUSER-BUSCH 4.15 1/25	Bonds	**	364,133
	ANTHEM INC 4.65 1/43	Bonds	**	78,424
	AON PLC 2.8 3/21	Bonds	**	155,455
	APPLE INC 3.2 5/27	Bonds	**	486,568
	APPLE INC 1.25 8/30	Bonds	**	219,694
	AT&T INC 4.35 3/29	Bonds	**	59,476
	AT&T INC 2.75 6/31	Bonds	**	175,828
	AT&T INC 3.5 6/41	Bonds	**	221,003
	AT&T INC 2.25 2/32	Bonds	**	263,344
	AT&T INC 3.8 12/57	Bonds	**	122,060
	AUTORIDAD CANAL 4.95 7/35	Bonds	**	252,500

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
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(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	AUTOZONE INC 3.125 4/26	Bonds	**	$ 44,012
	AUTOZONE INC 1.65 1/31	Bonds	**	267,964
	BANCO SANTANDER 3.49 5/30	Bonds	**	224,382
	BANK OF AMER CRP 4 1/25	Bonds	**	139,824
	BANK OF AMER CRP 3.5 4/26	Bonds	**	124,601
	BANK OF AMER C 3.824 1/28	Bonds	**	360,621
	BANK OF AMER CR 4.33 3/50	Bonds	**	235,466
	BANK OF NY MELLO 2.5 4/21	Bonds	**	100,455
	BANNER HEALTH 1.897 1/31	Bonds	**	75,846
	BARCLAYS PLC 2.852 5/26	Bonds	**	240,792
	BAY AREA TOLL 6.907 10/50	Bonds	**	184,574
	BBVA BANCOMER 4.375 4/24	Bonds	**	163,127
	BIOGEN INC 3.625 9/22	Bonds	**	116,040
	BIOGEN INC 2.25 5/30	Bonds	**	384,677
	BMW US CAP LLC 3.8 4/23	Bonds	**	257,452
	BNP PARIBAS 2.219 6/26	Bonds	**	276,582
	BOARDWALK PIPELI 3.4 2/31	Bonds	**	125,153
	BOSTON SCIENTIF 3.75 3/26	Bonds	**	141,849
	BP CAP MKTS AM 3.194 4/25	Bonds	**	252,951
	BP CAP MKTS AM 1.749 8/30	Bonds	**	200,329
	BPCE 5.7 10/23	Bonds	**	226,000
	BRISTOL-MYERS 4.624 5/44	Bonds	**	409,908
	BRISTOL-MYERS 2.9 7/24	Bonds	**	221,589
	BRIT COLUMBIA 2 10/22	Bonds	**	103,118
	BRIXMOR OPERATI 3.25 9/23	Bonds	**	110,900
	BRIXMOR OPERAT 4.125 6/26	Bonds	**	62,298
	BRIXMOR OPERATI 4.05 7/30	Bonds	**	34,407
	BRDCOM INC 4.7 4/25	Bonds	**	103,077
	BRDCOM CRP / FIN 2.2 1/21	Bonds	**	105,075
	BURLINGTON NORT 4.15 4/45	Bonds	**	248,272
	CIGNA CORP 3 7/23	Bonds	**	73,866
	CMS ENERGY 4.875 3/44	Bonds	**	165,005
	CRH AMERICA FIN 3.95 4/28	Bonds	**	232,571
	CSX CORP 4.25 3/29	Bonds	**	150,869
	CVS HEALTH COR 3.875 7/25	Bonds	**	30,541
	CVS HEALTH COR 5.125 7/45	Bonds	**	201,049
	CVS HEALTH CORP 3 8/26	Bonds	**	110,334
	CVS HEALTH CORP 3.25 8/29	Bonds	**	78,838
	CVS HEALTH COR 4.125 4/40	Bonds	**	118,936
	CVS HEALTH COR 1.875 2/31	Bonds	**	95,924
	CAMDEN PROP TR 2.95 12/22	Bonds	**	67,762
	CAMERON LNG 2.902 7/31	Bonds	**	32,972
	CAMERON LNG 3.701 1/39	Bonds	**	27,919
	CANADIAN NATL R 2.95 7/30	Bonds	**	188,911
	CATERPILLAR INC 2.6 4/30	Bonds	**	335,810
	CAPITAL ONE FIN 3.45 4/21	Bonds	**	211,424
	CARDINAL HEALTH 3.75 9/25	Bonds	**	56,426
	CARDINAL HEALTH 3.41 6/27	Bonds	**	90,296
	CELUSOSA ARAUCO 4.2 1/30	Bonds	**	226,000
	CHEVRON CORP 1.995 5/27	Bonds	**	89,879
	CHICAGO WTR TX 5.72 12/38	Bonds	**	143,350
	CHICAGO ARPT-B 6.395 1/40	Bonds	**	165,697
	CITIGROUP INC 3.887 1/28	Bonds	**	450,388
	CITIGROUP INC 2.572 6/31	Bonds	**	308,513
	CITIZENS BANK N 2.55 5/21	Bonds	**	251,517
	CITIZENS FIN GR 4.3 12/25	Bonds	**	63,272
	CITIZENS FIN G 2.375 7/21	Bonds	**	25,246
	COMCAST CORP 3.95 10/25	Bonds	**	257,676
	COMCAST CORP 1.95 1/31	Bonds	**	92,391
	COMCAST CORP 3.9 3/38	Bonds	**	212,820
	COMCAST CORP 2.65 2/30	Bonds	**	81,654
	COMMONSPIRIT 2.76 10/24	Bonds	**	48,323
	COMMONSPIRIT 2.782 10/30	Bonds	**	89,889
	CONCHO RES/MIDLA 2.4 2/31	Bonds	**	26,109
	CODELCO INC 3.15 1/30	Bonds	**	217,922
	COX COMMUN INC 2.95 10/50	Bonds	**	330,700
	CREDIT SUISSE 2.997 12/23	Bonds	**	261,294

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
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(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	CREDIT SUISSE 4.194 4/31	Bonds	**	$ 293,000
	CROWN CASTLE T 3.222 5/22	Bonds	**	25,257
	CROWN CASTLE T 3.663 5/25	Bonds	**	42,995
	CROWN CASTLE INT 3.7 6/26	Bonds	**	169,053
	DAIMLER FINANCE 2.3 2/21	Bonds	**	150,308
	DANSKE BANK A 3.244 12/25	Bonds	**	288,204
	DEERE & CO 8.1 5/30	Bonds	**	447,055
	DELPHI CORP 4.15 3/24	Bonds	**	60,412
	DISCOVER BANK 2.7 2/30	Bonds	**	265,649
	DOMINION RES 2.75 9/22	Bonds	**	103,256
	DOW CHEMICAL CO 3.15 5/24	Bonds	**	48,330
	DR PEPPER SNAPP 2.55 9/26	Bonds	**	114,393
	DUKE ENERGY COR 3.75 9/46	Bonds	**	40,698
	DUKE ENERGY COR 2.65 9/26	Bonds	**	43,488
	EOG RESOURCES 2.625 3/23	Bonds	**	208,726
	EATON VANCE CO 3.625 6/23	Bonds	**	80,715
	ECOLAB INC 3.25 12/27	Bonds	**	84,809
	ENBRIDGE INC 5.5 12/46	Bonds	**	133,338
	ENEL FIN INTL N 2.75 4/23	Bonds	**	261,707
	ENERGY TRANSFER 5.25 4/29	Bonds	**	69,675
	ESSEX PORTFOLIO 4 3/29	Bonds	**	169,249
	EQUITABLE FINANC 1.4 7/25	Bonds	**	71,441
	EXPERIAN FINANC 2.75 3/30	Bonds	**	217,195
	FED RLTY INVS T 2.75 6/23	Bonds	**	156,561
	FHMS K024 A1 2/22	Bonds	**	56,311
	FHMS K027 A1 9/22	Bonds	**	51,157
	FHMS K068 A1 2/27	Bonds	**	73,877
	FIDELITY NATION 4.25 5/28	Bonds	**	154,002
	FIFTH THIRD BANK 4.3 1/24	Bonds	**	137,892
	FIFTH THIRD BA 1.625 5/23	Bonds	**	87,637
	FISERV INC 3.2 7/26	Bonds	**	78,393
	FLORIDA GAS TRA 4.35 7/25	Bonds	**	85,302
	FL ST DEV FIN 4.109 4/50	Bonds	**	259,746
	GATX CORP 3.25 9/26	Bonds	**	222,115
	GE CAPITAL IN 4.418 11/35	Bonds	**	237,885
	GENERAL DYNAMIC 3.25 4/25	Bonds	**	181,880
	G2 8041 FRN 8/20/22	Bonds	**	712
	G2 8867 FRN 11/20/21	Bonds	**	83
	GEN MOTORS FIN 3.45 1/22	Bonds	**	189,819
	GOLDMAN SACHS 6.75 10/37	Bonds	**	227,318
	GOLDMAN SACHS 3 4/22	Bonds	**	206,711
	GOLDMAN SACHS 4.25 10/25	Bonds	**	273,607
	GOLDMAN SACHS GP 3.5 1/25	Bonds	**	82,666
	GREAT LAKES MI 3.473 7/41	Bonds	**	31,979
	GREAT LAKES WT 3.056 7/39	Bonds	**	118,377
	HSBC HOLDINGS 2.013 9/28	Bonds	**	319,892
	HARRIS CORP 3.832 4/25	Bonds	**	39,191
	HEALTHPEAK PRO 2.875 1/31	Bonds	**	54,250
	HOUSTON ARPT S 2.385 7/31	Bonds	**	50,515
	HYUNDAI CAP AM 2.85 11/22	Bonds	**	64,360
	HYUNDAI CAP AM 2.375 2/23	Bonds	**	77,349
	HYUNDAI CAP AME 1.8 10/25	Bonds	**	81,859
	ING GOEP NV 3.55 4/24	Bonds	**	229,171
	INTL PAPER CO 4.4 8/47	Bonds	**	297,177
	INTESA SANPAOL 3.375 1/23	Bonds	**	209,411
	ITC HOLDINGS CO 2.7 11/22	Bonds	**	150,970
	JPMORGAN CHASE 3.375 5/23	Bonds	**	491,172
	JPMORGAN CHASE 3.3 4/26	Bonds	**	195,511
	JPMORGAN CHASE 2.956 5/31	Bonds	**	109,471
	JPMORGAN CHASE 3.882 7/38	Bonds	**	169,202
	KANSAS CITY SOUT 3 5/23	Bonds	**	46,846
	KANSAS CITY S 2.875 11/29	Bonds	**	97,254
	KEYCORP 2.25 4/27	Bonds	**	170,960
	KEYSIGHT TECHN 4.55 10/24	Bonds	**	220,555
	KILROY REALTY 4.375 10/25	Bonds	**	50,461
	KILROY REALTY 3.45 12/24	Bonds	**	86,392
	KIMCO REALTY 3.45 11/22	Bonds	**	36,706

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	LLOYDS BK GR P 1.326 6/23	Bonds	**	$ 226,125
	LIBERTY MUTUAL 4.85 8/44	Bonds	**	272,611
	LIFE STORAGE 4 6/29	Bonds	**	93,090
	L A ARPTS-TXB- 7.053 5/40	Bonds	**	237,945
	LOCKHEED MARTIN 3.6 3/35	Bonds	**	36,226
	LOCKHEED MARTIN 4.7 5/46	Bonds	**	175,752
	MANITOBA (PROV) 2.1 9/22	Bonds	**	102,991
	MARSH & MCLENNAN 3.5 6/24	Bonds	**	136,237
	MARSH & MCLENNAN 2.25 11/30	Bonds	**	68,739
	MCDONALD'S CORP 1.45 9/25	Bonds	**	77,569
	MCDONALD'S CORP 3.3 7/25	Bonds	**	72,292
	MICRON TECH 2.497 4/23	Bonds	**	93,865
	MITSUB UFJ FIN 2.193 2/25	Bonds	**	211,199
	MEMORIAL SLOAN 4.2 7/55	Bonds	**	99,609
	MET TRANS AUT 5.871 11/39	Bonds	**	183,725
	MOHAWK INDUST 3.85 2/23	Bonds	**	186,065
	MORGAN STANLEY 3.971 7/38	Bonds	**	104,359
	MORGAN STANLEY 4.3 1/45	Bonds	**	133,081
	MORGAN STANLEY 3.622 4/31	Bonds	**	173,620
	MORGAN STANLEY 3.125 7/26	Bonds	**	194,926
	NATWEST MARKET 2.375 5/23	Bonds	**	207,560
	NEVADA POWER CO 6.65 4/36	Bonds	**	305,744
	NEW BRUNSWICK 3.625 2/28	Bonds	**	179,752
	NEW YORK LIFE G 3.25 8/21	Bonds	**	111,936
	NEW YORK LIFE GL 1.1 5/23	Bonds	**	45,618
	NYC FIN AUTH 5.508 8/37	Bonds	**	206,129
	NYC WTR-BABS-T 6.011 6/42	Bonds	**	55,618
	NYS DORM-F-BAB 5.628 3/39	Bonds	**	302,380
	NISOURCE INC 3.95 3/48	Bonds	**	165,235
	NISOURCE INC 1.7 2/31	Bonds	**	188,771
	NORDEA BANK 1 6/23	Bonds	**	258,088
	NORTHERN TRST 3.95 10/25	Bonds	**	115,600
	NORTHROP GRUMMA 3.85 4/45	Bonds	**	150,651
	NORTHWELL HEA 3.979 11/46	Bonds	**	285,751
	NORTHWESTERN U 2.64 12/50	Bonds	**	107,893
	NUCOR CORP 3.95 5/28	Bonds	**	152,804
	NUCOR CORP 2.7 6/30	Bonds	**	93,341
	NUTRIEN LTD 4 12/26	Bonds	**	63,951
	O'REILLY AUTOMOT 3.8 9/22	Bonds	**	47,109
	O'REILLY AUTOMOT 3.85 6/23	Bonds	**	58,893
	O'REILLY AUTOMOT 3.6 9/27	Bonds	**	125,625
	OCCIDENTAL PETE 2.9 8/24	Bonds	**	57,675
	OHIO POWER CO 5.375 10/21	Bonds	**	258,536
	OMNICOM GP/OMN 3.625 5/22	Bonds	**	119,893
	OMNICOM GP/OMN 3.65 11/24	Bonds	**	82,680
	ONTARIO PROVINC 2.55 2/21	Bonds	**	145,384
	PPL CAPITAL FDG 3.1 5/26	Bonds	**	165,530
	PACCAR FINL CORP 2 9/22	Bonds	**	180,233
	PACCAR FINL COR 2.65 4/23	Bonds	**	68,417
	PACKAGING CORP 4.5 11/23	Bonds	**	38,504
	PANASONIC CORP 2.536 7/22	Bonds	**	205,738
	PAYPAL HOLDING 2.4 10/24	Bonds	**	229,755
	PERRIGO FINANCE 3.15 6/30	Bonds	**	294,582
	PARTNERS HEALT 3.192 7/49	Bonds	**	181,121
	REP OF POLAND 3.25 4/26	Bonds	**	124,052
	PORT AUTH NY & 5.31 8/46	Bonds	**	106,607
	PRES & FELLOW 3.619 10/37	Bonds	**	89,994
	PRICELINE GROUP 3.65 3/25	Bonds	**	121,814
	PRICELINE GROUP 3.6 6/26	Bonds	**	90,549
	PRINCIPAL FINL 3.3 9/22	Bonds	**	20,975
	PRINCIPAL FINL 3.7 5/29	Bonds	**	58,501
	PRINCIPAL FINL 2.125 6/30	Bonds	**	228,947
	PROLOGIS LP 2.125 4/27	Bonds	**	32,167
	PROTECTIVE LIF 1.082 6/23	Bonds	**	259,264
	PROTECTIVE LIFE 1.17 7/25	Bonds	**	197,954
	QATAR STATE OF 3.75 4/30	Bonds	**	235,380
	QUALCOMM INC 3.25 5/27	Bonds	**	64,561

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	QUALCOMM INC 2.15 5/30	Bonds	**	$ 200,822
	QUEBEC PROVINCE 2.75 8/21	Bonds	**	151,891
	RELX CAPITAL INC 3.5 3/23	Bonds	**	47,893
	RELX CAPITAL INC 3 5/30	Bonds	**	133,346
	RAYMOND JAMES 3.625 9/26	Bonds	**	40,046
	RAYTHEON TECH 3.2 3/24	Bonds	**	183,080
	REPUBLIC SVCS 3.375 11/27	Bonds	**	67,853
	ROGERS COMM INC 3.7 11/49	Bonds	**	348,445
	ROPER TECHNOLOG 3.8 12/26	Bonds	**	80,634
	ROPER TECHNOLOG 2.95 9/29	Bonds	**	38,350
	ROPER TECHNOLOGI 2 6/30	Bonds	**	50,949
	ROPER TECHNOLOGI 1.4 9/27	Bonds	**	241,612
	ROSS STORES INC 4.6 4/25	Bonds	**	207,438
	ROSS STORES IN 1.875 4/31	Bonds	**	80,257
	SBA TOWER TRUS 2.836 1/25	Bonds	**	266,171
	SABINE PASS LIQU 4.2 3/28	Bonds	**	154,913
	SAN DIEGO G & E 6 6/39	Bonds	**	290,962
	SAN JOSE REDEV 3.375 8/34	Bonds	**	64,473
	SANTANDER UK 2.875 8/21	Bonds	**	222,630
	SERVICENOW INC 1.4 9/30	Bonds	**	262,985
	SHELL INTL FIN 4.375 5/45	Bonds	**	361,806
	SHIRE ACQ INV 2.875 9/23	Bonds	**	201,444
	SIMON PROP GP LP 3.3 1/26	Bonds	**	158,789
	SIMON PROP GP LP 3.8 7/50	Bonds	**	188,647
	SC PUB SVC AUT 4.77 12/45	Bonds	**	167,040
	SC PUB SVC AU 2.388 12/23	Bonds	**	52,125
	SPECTRA PRTN 3.375 10/26	Bonds	**	105,684
	STANFORD UNIV 1.289 6/27	Bonds	**	133,076
	STATE GRID OSEA 3.75 5/23	Bonds	**	223,639
	STATE STREET COR 3.1 5/23	Bonds	**	42,515
	STATE STREET C 2.825 3/23	Bonds	**	46,347
	SUNCOR ENERGY 3.1 5/25	Bonds	**	82,100
	T-MOBILE USA IN 3.75 4/27	Bonds	**	255,848
	TAKEDA PHARM 2.05 3/30	Bonds	**	214,380
	TEXAS INSTRUME 1.375 3/25	Bonds	**	51,692
	TEXAS INSTRUMEN 1.75 5/30	Bonds	**	97,752
	TX TRANSPRTN C 3.029 8/41	Bonds	**	141,061
	TENCENT HOLDIN 2.985 1/23	Bonds	**	208,334
	THERMO FISHER 2.95 9/26	Bonds	**	222,687
	THERMO FISHER 4.133 3/25	Bonds	**	39,817
	THOMSON REUTERS 3.35 5/26	Bonds	**	39,175
	3M CO 3.25 8/49	Bonds	**	233,069
	TORONTO DOM BA 3.625 9/31	Bonds	**	28,313
	TORONTO DOM BAN 1.15 6/25	Bonds	**	315,641
	TOTAL CAP INTL 2.434 1/25	Bonds	**	159,863
	TOTAL CAP INTL 2.986 6/41	Bonds	**	201,323
	TRANSURBAN FIN 4.125 2/26	Bonds	**	39,601
	TRANSURBAN FIN 3.375 3/27	Bonds	**	43,869
	TRANSURBAN FIN 2.45 3/31	Bonds	**	172,960
	TRINITY ACQ PLC 3.5 9/21	Bonds	**	65,975
	TRINITY HEALT 4.125 12/45	Bonds	**	152,889
	TRUIST FINANCIA 1.95 6/30	Bonds	**	140,209
	UBS GROUP 1.364 1/27	Bonds	**	292,222
	UNTD AIR 19-1 A 4.15 8/31	Bonds	**	84,710
	UNITED OVERSEAS 3.2 4/21	Bonds	**	201,686
	UNITED MEXICAN 2.659 5/31	Bonds	**	204,500
	UNITEDHEALTH GR 4.75 7/45	Bonds	**	168,246
	UNITEDHEALTH GRP 3.5 8/39	Bonds	**	129,760
	REGENTS UNIV 5.77 5/43	Bonds	**	216,819
	UNIV OF CA-J-R 4.131 5/45	Bonds	**	30,266
	VALERO ENERGY 2.85 4/25	Bonds	**	334,811
	VENTAS REALTY 3.25 10/26	Bonds	**	110,145
	VEREIT OPERATING 2.2 6/28	Bonds	**	81,879
	VERIZON COMM I 4.272 1/36	Bonds	**	302,977
	VERIZON COMM INC 4 3/50	Bonds	**	181,479
	VERIZON COMM I 1.68 10/30	Bonds	**	360,500
	VA ST CMWLTH U 4.956 1/44	Bonds	**	163,885

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	VA TRN BRD BABS 5.35 5/35	Bonds	**	$ 134,675
	VA PBA-B2 - BABS 5.9 8/30	Bonds	**	145,141
	VISA INC 4.15 12/35	Bonds	**	175,084
	VISA INC 2.15 9/22	Bonds	**	108,279
	VODAFONE GROUP 4.875 6/49	Bonds	**	193,001
	VOLKSWAGEN GRP 2.7 9/22	Bonds	**	238,391
	VULCAN MATERIALS 4.5 6/47	Bonds	**	43,228
	WPP FINANCE 20 3.625 9/22	Bonds	**	94,619
	WPP FINANCE 201 3.75 9/24	Bonds	**	127,440
	WP CAREY INC 3.85 7/29	Bonds	**	160,295
	WEINGARTEN RLTY 3.5 4/23	Bonds	**	46,630
	WELLPOINT INC 3.125 5/22	Bonds	**	155,633
	WELLS FARGO CO 3.069 1/23	Bonds	**	148,906
	WELLS FARGO CO 3.584 5/28	Bonds	**	158,546
	WELLS FARGO CO 2.393 6/28	Bonds	**	159,458
	WILLIS NORTH AME 3.6 5/24	Bonds	**	49,159
	WISCONSIN-A-RE 3.954 5/36	Bonds	**	196,131
	WOODSIDE FINANCE 3.7 9/26	Bonds	**	142,615
	WOODSIDE FINANCE 3.7 3/28	Bonds	**	71,523
	WOODSIDE FINANCE 4.5 3/29	Bonds	**	83,740
	ZOETIS INC 2 5/30	Bonds	**	263,615
	AESOP 2017-1A B 9/23	Bonds	**	204,390
	AESOP 2019-3A B 3/26	Bonds	**	137,780
	BFLD 2019 DPLO C 10/34	Bonds	**	106,558
	BX 2019-IMC A 4/34	Bonds	**	155,987
	BACM 2016-UB10 A4 7/49	Bonds	**	165,520
	BBCMS 2019-C4 C 8/52	Bonds	**	161,515
	COMM 2017-COR2 A3 9/50	Bonds	**	170,177
	COMM 2014-UBS5 A4 9/47	Bonds	**	88,284
	CNH 20190C B 4/27	Bonds	**	144,514
	DIN 2019-1A A2I 6/49	Bonds	**	152,497
	FORDF 2020-2 B 9/27	Bonds	**	101,027
	GFORT 2019-1 C 4/24	Bonds	**	164,098
	GMCAR 2020-3 D 9/27	Bonds	**	81,201
	GWT 2019-WOLF C 12/36	Bonds	**	51,208
	JPMBB 2014-C23 A5 9/47	Bonds	**	88,402
	JPMCC 2020-609M A 10/33	Bonds	**	104,999
	MVWOT 2019-1A A 11/36	Bonds	**	100,724
	MVWOT 2019-2A A 10/38	Bonds	**	84,362
	MVWOT 2020-1A A 10/37	Bonds	**	92,859
	MSC 2019-MEAD D 11/36	Bonds	**	92,739
	NAVSL 2019-FA A2 8/68	Bonds	**	108,448
	NAVSL 2019-CA A2 2/68	Bonds	**	103,029
	NAVSL 2019-GA A 10/68	Bonds	**	65,303
	NAVSL 2020-HA A 1/69	Bonds	**	101,017
	NAVSL 2020-BA A2 1/69	Bonds	**	102,691
	NSLT 2020-1A A 3/68	Bonds	**	92,621
	SMB 2020-A A2A 9/37	Bonds	**	103,781
	SRT 2019-C A4 11/23	Bonds	**	178,932
	SRT 2019-C D 6/24	Bonds	**	66,944
	SDART 2019-3 C 10/25	Bonds	**	168,393
	WFCM 2017-C38 A5 7/50	Bonds	**	170,154
	WFRBS 2014-C23 A5 10/57	Bonds	**	83,021
	WOSAT 2019-A B 12/25	Bonds	**	77,061
	Total corporate bonds			54,252,035
	US TREASURY N/B 3.5 2/39	Bonds	**	2,752,870
	US TREASURY N/B 3.875 8/40	Bonds	**	1,030,613
	US TREASURY N/B 3.125 11/41	Bonds	**	391,922
	US TREASURY N/B 2.75 11/42	Bonds	**	216,563
	US TREASURY N/B 3.125 8/44	Bonds	**	395,297
	US TREASURY N/B 2.5 2/45	Bonds	**	303,848

The Milliken Retirement Plan

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

December 31, 2020

Plan Number: 335
EIN: 51-0105342

(a)	(b) Identity of Issuer, 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 2.25 8/46	Bonds	**	$ 616,106
	US TREASURY N/B 3 5/47	Bonds	**	569,374
	US TREASURY N/B 2.75 2/24	Bonds	**	7,092,252
	US TREASURY N/B 2.25 11/24	Bonds	**	64,631
	US TREASURY N/B 2 2/22	Bonds	**	102,094
	US TREASURY N/B 2 2/23	Bonds	**	831,500
	US TREASURY N/B 4.5 5/38	Bonds	**	165,894
	US TREASURY N/B 3 11/44	Bonds	**	226,297
	US TREASURY N/B 3 5/45	Bonds	**	272,344
	US TREASURY N/B 2.5 2/46	Bonds	**	119,375
	US TREASURY N/B 2.5 5/46	Bonds	**	710,560
	US TREASURY N/B 3 2/47	Bonds	**	176,470
	US TREASURY N/B 2.75 8/47	Bonds	**	971,172
	US TREASURY N/B 3 2/48	Bonds	**	419,800
	US TREASURY N/B 3 8/48	Bonds	**	933,428
	US TREASURY N/B 2.25 8/49	Bonds	**	932,156
	US TREASURY N/B 1.5 8/26	Bonds	**	1,413,014
	US TREASURY N/B 2.75 8/23	Bonds	**	673,313
	US TREASURY N/B 2.5 1/24	Bonds	**	2,431,738
	US TREASURY N 2.25 2/27	Bonds	**	77,350
	US TREASURY N/B 2 2/50	Bonds	**	1,851,257
	US TREASURY N/B 1.25 5/50	Bonds	**	271,969
	US TREASURY N/B 1.375 8/50	Bonds	**	631,547
	US TREASURY N/ 1.125 5/40	Bonds	**	379,438
	US TREASURY N/B 2 5/24	Bonds	**	95,498
	US TREASURY N/B 0.5 3/25	Bonds	**	1,311,781
	US TREASURY N/ 0.375 3/22	Bonds	**	1,073,344
	US TREASURY N/B 0.25 5/25	Bonds	**	6,362,051
	US TREASURY N/ 0.125 7/22	Bonds	**	580,091
	US TREASURY N/B 0.25 8/25	Bonds	**	3,388,313
	US TREASURY N/B 2.75 7/23	Bonds	**	1,867,031
	US TREASURY N/B 1.5 11/24	Bonds	**	3,077,623
	US GOVT STIF 5 BPS	Money Market securities	**	1,123,413
	Total U.S. government securities			45,903,334
*	TROWEPRICE RET HYB BAL TR T11	Collective trust fund	**	6,022,642
*	TROWEPRICE RET HYB 2005 TR T11	Collective trust fund	**	9,796,509
*	TROWEPRICE RET HYB 2010 TR T11	Collective trust fund	**	11,078,551
*	TROWEPRICE RET HYB 2015 TR T11	Collective trust fund	**	23,199,009
*	TROWEPRICE RET HYB 2020 TR T11	Collective trust fund	**	56,223,073
*	TROWEPRICE RET HYB 2025 TR T11	Collective trust fund	**	83,448,995
*	TROWEPRICE RET HYB 2030 TR T11	Collective trust fund	**	87,301,960
*	TROWEPRICE RET HYB 2035 TR T11	Collective trust fund	**	47,438,733
*	TROWEPRICE RET HYB 2040 TR T11	Collective trust fund	**	35,439,457
*	TROWEPRICE RET HYB 2045 TR T11	Collective trust fund	**	18,419,693
*	TROWEPRICE RET HYB 2050 TR T11	Collective trust fund	**	10,337,650
*	TROWEPRICE RET HYB 2055 TR T11	Collective trust fund	**	7,327,176
*	TROWEPRICE RET HYB 2060 TR T11	Collective trust fund	**	3,244,518
	US TREASURY MM TRUST C	Collective trust fund	**	132,340,483
	Total collective trust funds			531,618,449
	Total investments			1,311,315,589
*	Notes receivable from participants	Interest rates of 6.5% to 7.75%, maturing at various dates through February 2044		14,779,918
	Total			$ 1,326,095,507

* 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, 2020**

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, 2020**

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	