

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☐ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>FORTIVE RETIREMENT SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>05/31/2016</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>05/31/2016</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>05/31/2016</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>FORTIVE CORPORATION</u> <u>6920 SEAWAY BLVD</u> <u>EVERETT, WA 98203-5829</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>47-5654583</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>425-446-6210</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>335900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>47-5654583</u>	2c Plan Sponsor's telephone number <u>425-446-6210</u>	2d Business code (see instructions) <u>335900</u>	
2b Employer Identification Number (EIN) <u>47-5654583</u>					
2c Plan Sponsor's telephone number <u>425-446-6210</u>					
2d Business code (see instructions) <u>335900</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/28/2022	EVAN REMENIH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	17457
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)	8428
a(2) Total number of active participants at the end of the plan year		6a(2)	9620
b Retired or separated participants receiving benefits.....		6b	52
c Other retired or separated participants entitled to future benefits		6c	3367
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	13039
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	49
f Total. Add lines 6d and 6e		6f	13088
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	12758
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	411
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 2G 2J 2R 2S 2T 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) ☐ <u>0</u> 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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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
		2021
		This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan FORTIVE RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 FORTIVE CORPORATION	D Employer Identification Number (EIN) 47-5654583	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

STRATEGIC ADVISORS INC

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	468028	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
37 64 65 71	RECORDKEEPER	429890	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

R.V. KUHNS & ASSOCIATES

93-0910652

(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 29	CONSULTANT	121298	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

SEYFARTH SHAW

36-2152202

(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?
29	ATTORNEY / LEGAL	93055	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
(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.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>FORTIVE RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>FORTIVE CORPORATION</u>	D Employer Identification Number (EIN) <u>47-5654583</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AMERICAN BEACON SMALL CAP VALUE</u>				
b Name of sponsor of entity listed in (a): <u>GLOBAL TRUST COMPANY</u>				
c EIN-PN <u>27-6334452-003</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>51599590</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MANAGED INCOME PORTFOLIO II CLASS 3</u>				
b Name of sponsor of entity listed in (a): <u>FIDELITY</u>				
c EIN-PN <u>04-3022712-025</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>129491544</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>HARDING LOEVNER INTERNATIONAL EQUIT</u>				
b Name of sponsor of entity listed in (a): <u>HARDING LOEVNER</u>				
c EIN-PN <u>27-6075499-003</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5124546</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2025 NON-LEND FUND G</u>				
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY</u>				
c EIN-PN <u>45-2829040-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>119844632</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2030 NON-LEND FUND G</u>				
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY</u>				
c EIN-PN <u>45-2829163-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>119122579</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2035 NON-LEND FUND G</u>				
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY</u>				
c EIN-PN <u>45-2828211-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>106460636</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2040 NON-LEND FUND G</u>				
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY</u>				
c EIN-PN <u>45-2837597-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>91463580</u>		

a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX 2045 NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 45-2837704-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75214410
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a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX 2050 NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 45-2837704-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 67876629
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a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX 2055 NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 45-2837751-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 46325870
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a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX 2060 NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 47-2034946-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17850545
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a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX 2065 NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 84-1930938-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 651490
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a Name of MTIA, CCT, PSA, or 103-12 IE: **LIFEPATH INDEX RET NON-LEND FUND G**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY**

c EIN-PN 45-2837784-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 86245226
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan FORTIVE RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 FORTIVE CORPORATION	D Employer Identification Number (EIN) 47-5654583	

Part I	Asset and Liability Statement
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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	940069	98612
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4968397	4558937
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	1737107	1107567
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3279161	4667007
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	326773359	357238551
(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)	14949524	15752221
(9) Value of interest in common/collective trusts	1c(9)	783745396	917271277
(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)	516558041	557436500
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	73734759	84224772

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1) 50478981	46859988
(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 1777164794	1989215432
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j 1406443	1431055
k	Total liabilities (add all amounts in lines 1g through 1j)	1k 1406443	1431055
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l 1775758351	1987784377

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.

		(a) Amount	(b) Total
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A) 55917644	
	(B) Participants	2a(1)(B) 80827429	
	(C) Others (including rollovers).....	2a(1)(C) 24581000	
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)	161326073
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E) 801321	
	(F) Other	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)	801321
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B) 17989126	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)	17989126
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A) 156889155	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B) 154841380	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	2047775
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B) 58927041	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	58927041

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		87435462
(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)		66615067
c Other income.....	2c		9073193
d Total income. Add all income amounts in column (b) and enter total.....	2d		404215058
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	190984445	
(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)		190984445
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	1204587	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		1204587
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		192189032
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		212026026
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

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: ERNST & YOUNG LLP

(2) EIN: 34-6565596

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

5c 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 _____.

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>► File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2021</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

<div>A Name of plan FORTIVE RETIREMENT SAVINGS PLAN</div>	<div>B Three-digit plan number (PN) ► 001</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500 FORTIVE CORPORATION</div>	<div>D Employer Identification Number (EIN) 47-5654583</div>

Part I	Distributions
--------	---------------

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

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-2647786		
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
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
---------	--

10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2021
v. 201209

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 _____

FORTIVE RETIREMENT SAVINGS PLAN
FINANCIAL STATEMENTS AS OF DECEMBER 31, 2021 AND 2020
AND FOR THE YEAR ENDED DECEMBER 31, 2021,
SUPPLEMENTAL SCHEDULE AS OF DECEMBER 31, 2021 AND
REPORT OF INDEPENDENT REGISTERED PUBLIC ACCOUNTING FIRM

**FORTIVE RETIREMENT SAVINGS PLAN
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Report of Independent Registered Public Accounting Firm

To the Plan Participants, the Plan Administrator, the Audit Committee of the Board of Directors, Fortive Corporation and the Benefits Committee of the Fortive Retirement Savings Plan

Opinion on the Financial Statements

We have audited the accompanying statements of net assets available for benefits of Fortive Retirement Savings Plan (the Plan) as of December 31, 2021 and 2020, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes (collectively referred to as the “financial statements”). In our opinion, the financial statements present fairly, in all material respects, the net assets available for benefits of the Plan at December 31, 2021 and 2020, and the changes in its net assets available for benefits for the year ended December 31, 2021, in conformity with U.S. generally accepted accounting principles.

Basis for Opinion

These financial statements are the responsibility of the Plan’s management. Our responsibility is to express an opinion on the Plan’s financial statements based on our audits. We are a public accounting firm registered with the Public Company Accounting Oversight Board (United States) (PCAOB) and are required to be independent with respect to the Plan in accordance with the U.S. federal securities laws and the applicable rules and regulations of the Securities and Exchange Commission and the PCAOB.

We conducted our audits in accordance with the standards of the PCAOB. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether due to error or fraud. The Plan is not required to have, nor were we engaged to perform, an audit of its internal control over financial reporting. As part of our audits we are required to obtain an understanding of internal control over financial reporting but not for the purpose of expressing an opinion on the effectiveness of the Plan’s internal control over financial reporting. Accordingly, we express no such opinion.

Our audits included performing procedures to assess the risks of material misstatement of the financial statements, whether due to error or fraud, and performing procedures that respond to those risks. Such procedures included examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements. Our audits also included evaluating the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that our audits provide a reasonable basis for our opinion.

Supplemental Schedules Required by ERISA

The accompanying supplemental schedule of assets (held at end of year) as of December 31, 2021, has been subjected to audit procedures performed in conjunction with the audit of the Plan’s financial statements. The information in the supplemental schedule is the responsibility of the Plan’s management. Our audit procedures included determining whether the information reconciles to the financial statements or the underlying accounting and other records, as applicable, and performing procedures to test the completeness and accuracy of the information presented in the supplemental schedule. In forming our opinion on the information, we evaluated whether such information, including its form and content, is presented in conformity with the Department of Labor’s Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

/s/ Ernst & Young LLP

We have served as the Plan’s auditor since 2016.

Seattle, Washington

June 13, 2022

FORTIVE RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2021 AND 2020
(\$ in millions)

	2021	2020
ASSETS		
Non-interest bearing cash	\$ 0.1	\$ 0.9
Investments at fair value	1,967.7	1,754.6
Receivables:		
Employer contributions	4.6	5.0
Other receivables	1.1	1.7
Notes receivable from participants	15.8	15.0
Total receivables	21.5	21.7
Total assets	1,989.3	1,777.2
LIABILITIES		
Other payables	1.4	1.4
Total liabilities	1.4	1.4
NET ASSETS AVAILABLE FOR BENEFITS	\$ 1,987.9	\$ 1,775.8

See the accompanying notes to the financial statements.

FORTIVE RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2021
(\$ in millions)

ADDITIONS

Contributions:		
Participant	\$	80.8
Rollovers		24.6
Employer		55.9
Total contributions		161.3
Investment income:		
Interest income on notes receivable from participants		0.8
Net appreciation of investments, at fair value		224.2
Dividend and interest income from investments		18.0
Total investment income		243.0
Total additions		404.3

DEDUCTIONS

Benefit payments		191.0
Administrative expenses		1.2
Total deductions		192.2

NET INCREASE

212.1

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year		1,775.8
End of year	\$	1,987.9

See the accompanying notes to the financial statements.

**FORTIVE RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2021**

NOTE 1. DESCRIPTION OF THE PLAN

The following description of the Fortive Retirement Savings Plan (the “Plan”) provides only general information. Participants should refer to the plan document and summary plan description for a more complete description of the Plan’s provisions.

General

Fortive Corporation (“Fortive,” “the Company”, or “the Plan Sponsor”) is a provider of essential technologies for connected workflow solutions across a range of attractive end-markets. Fortive established the Plan effective May 31, 2016. The Plan is a defined contribution plan established for eligible full-time and part-time non-union employees of the Company and its subsidiaries. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”), and the Plan is administered through affiliates of the trustee, Fidelity (the “Plan Administrator”). Plan participants should refer to the formal legal documents of the Plan and the summary plan description for a more complete description of the Plan’s provisions and a full explanation of all limitations, adjustments and special cases in the Plan. Significant provisions related to contributions, benefit payments, and investments are provided below.

Contributions

Eligible participants may contribute up to 75% of their compensation (subject to annual maximums). Employee contributions and the earnings or losses thereon are fully vested at all times.

The Company’s retirement contributions are determined at the discretion of the Plan Sponsor. Employees are eligible for Company retirement contributions upon completion of one year of service and become fully vested upon completion of three years of service. The discretionary retirement contribution can range from 0% to 2% of eligible compensation. For the year ended December 31, 2021, the discretionary retirement contribution was 2% of eligible compensation.

For eligible participants who have completed one year of service and are active employees on the last day of the plan year, an additional discretionary retirement contribution of up to 2% of eligible compensation above the Social Security wage base in effect at the beginning of the Plan year is calculated and deposited into participant accounts subsequent to the Plan year end. These contributions become fully vested after three years of service. For the year ended December 31, 2021, this additional retirement contribution was 2% of eligible compensation.

In addition, the Company makes matching contributions into the Plan. These matching contributions are considered “safe harbor” and the percentage for the safe harbor matching contributions has been established in the plan document. The Company matching contribution is 100% of the first 3% of eligible compensation contributed by the participant plus 50% of the next 2% of eligible compensation contributed. Employees are immediately 100% vested in all safe harbor matching contributions.

Benefit Payments

A participant who attains normal retirement age (age 65) shall be entitled to payment of the balance in their account. A participant who remains employed after attainment of normal retirement age shall continue to participate under the same terms and conditions as applied prior to reaching normal retirement age. A participant must begin receiving distributions no later than April 1 following the later of the year in which they retire from the Company or the calendar year in which they reach the age of 72.

The beneficiary or beneficiaries of a deceased participant shall be entitled to payment of the participant’s account balance within a reasonable period of time after the participant’s death.

Upon total and permanent disability, a participant shall be entitled to payment of the balance in their account within a reasonable period of time after termination of employment.

Upon a participant’s termination of employment for reasons other than as specified above, a participant is entitled to payment of their vested account balance. If the vested value of the participant’s account is \$1,000 (applied separately to Roth and non-Roth balances) or less, payment will automatically be made in a single lump sum. If the vested value of the participant’s Roth or non-Roth balances is greater than \$1,000 and does not exceed \$5,000, the Plan Administrator will automatically rollover the Roth or non-Roth balances to a separate Fidelity Individual Retirement Account. If the vested value of the participant’s account is greater than \$5,000, the participant must contact the Plan Administrator to request a distribution.

Eligible participants may request a hardship or age 59 1/2 in-service withdrawal of all or a portion of their vested account while still working for the Company in accordance with procedures established by the Plan Administrator, subject to certain limitations and tax penalties.

Notes Receivable from Participants

A participant may receive a loan from the Plan in accordance with the policy established by the Plan Sponsor. Any such loan or loans shall not exceed the lesser of 50% of the participant's vested account balance or \$50,000 reduced by the participant's highest outstanding loan balance in the Plan during the one-year period ending on the day before the loan is made. The Plan Administrator establishes the maximum maturity period that is permitted to prevent the loan from being treated as a distribution. Plan provisions require that all loans must be paid back within 60 months. The Plan Administrator may require loan payments to be made through payroll deductions.

Participant Accounts

Each participant account is credited with the participant's contributions, employer safe harbor matching contributions, employer retirement contributions, and an allocation of Plan earnings or losses, and is charged quarterly with administrative expenses and recordkeeping fees. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Administrative Expenses

The Plan's administrative expenses are paid by either the Plan or the Plan Sponsor, as provided by the Plan's provisions. Administrative expenses paid by the Plan include recordkeeping and trustee fees.

The Plan participates in a revenue credit program (Credits). Credits are earned in connection with the Plan's revenue sharing arrangements with certain investment funds. The Credits are deposited in an unallocated account and can be used to pay ERISA-qualified expenses or can be allocated to eligible participant accounts. The calculated Credits are funded quarterly in arrears by the Plan Administrator.

Unallocated Accounts

During the year ended December 31, 2021, forfeitures used to reduce Company related contributions totaled \$0.2 million.

As of December 31, 2021 and 2020, unallocated and non-vested accounts, including forfeited amounts, totaled \$1.5 million and \$0.7 million. These amounts will be used to reduce future employer contributions and to pay administrative expenses.

Termination of the Plan

Although the Company, as the Plan Sponsor, has not expressed an intention to do so, the Plan may be terminated at any time. In the event of termination of the Plan, the account balances of participants as of the date of termination shall immediately become vested.

CARES Act

On March 27, 2020 the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") was signed into law. The CARES Act allows retirement plans to provide participants who are impacted by the coronavirus (as defined in the CARES Act) with greater access to their savings. As permitted by the CARES Act, the Plan opted in to implement the following provisions:

- Through December 31, 2020, qualified individuals were permitted to take a penalty-free distribution in an amount up to \$100,000 from the Plan. Participants who take a qualified distribution have the option to have the distribution taxed over a three-year period, with the ability to recontribute up to the full amount of the distribution within three years and not be subject to federal income tax as a result.
- Required minimum distributions for calendar year 2020 were waived for retired and retirement-aged individuals.
- For loans outstanding on or after March 27, 2020, the due date on loan repayments due from March 27, 2020 to December 31, 2020 may be delayed under the Plan for up to one year. Any payments after the suspension period will be adjusted to reflect the delay and any interest accruing during the delay.

NOTE 2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

Use of Estimates

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

Risks and Uncertainties

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

Notes Receivable from Participants

Notes receivable from participants represent participant loans and are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. 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, 2021 and 2020. If a participant ceases to make loan repayments and has reached a distributable event, the loan balance is reduced and a benefit payment is recorded.

Investments

Investments are reported at fair value. Fair value is the price that would be received upon the sale of an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Refer to Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. The income of each fund is reinvested in that fund.

Payment of Benefits

Benefits are recorded when paid.

NOTE 3. FAIR VALUE MEASUREMENTS

Accounting standards define fair value based on an exit price model, establish a framework for measuring fair value where the Plan’s assets and liabilities are required to be carried at fair value and provide for certain disclosures related to the valuation methods used within a valuation hierarchy. This hierarchy prioritizes the inputs into three broad levels as follows. Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities. Level 2 inputs are quoted prices for similar assets and liabilities in active markets, quoted prices for identical or similar assets in markets that are not active, or other observable characteristics for the asset or liability, including interest rates, yield curves and credit risks, or inputs that are derived principally from, or corroborated by, observable market data through correlation. Level 3 inputs are unobservable inputs based on management’s assumptions. A financial asset or liability’s classification within the hierarchy is determined based on the lowest level input that is significant to the fair value measurement in its entirety.

The Plan provides for some investments that are valued using the Net Asset Value (“NAV”) practical expedient. None of these investments have limits on their redemption. Investments valued using NAV consist of common collective trusts and separately managed private account funds and privately traded mutual funds which allow the Plan to allocate investments across a broad array of types of funds and diversify the portfolio.

The fair values of the Plan's investments as of December 31, 2021, by asset category, were as follows (\$ in millions):

	Quoted Prices in Active Market (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
Money market funds	\$ 0.4	\$ —	\$ —	\$ 0.4
Fortive Corporation Stock Fund:				
Fortive common stock	46.9	—	—	46.9
Money market fund	0.5	—	—	0.5
Mutual funds	508.9	—	—	508.9
Separately managed funds:				
Cash and cash equivalents	3.8	—	—	3.8
Common stock	357.2	—	—	357.2
Mutual funds	48.5	—	—	48.5
Self-directed brokerage accounts	84.2	—	—	84.2
	<u>\$ 1,050.4</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 1,050.4</u>
Investments measured at NAV				
Common/collective trusts				917.3
Separately managed private account funds				—
Total investments, at fair value				<u><u>\$ 1,967.7</u></u>

The fair values of the Plan's investments as of December 31, 2020, by asset category, were as follows (\$ in millions):

	Quoted Prices in Active Market (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
Money market funds	\$ 0.4	\$ —	\$ —	\$ 0.4
Fortive Corporation Stock Fund:				
Fortive common stock	50.3	—	—	50.3
Money market fund	0.3	—	—	0.3
Mutual funds	427.5	—	—	427.5
Separately managed funds:				
Money market funds	2.2	—	—	2.2
Common stock	327.3	—	—	327.3
Mutual funds	43.7	—	—	43.7
Self-directed brokerage accounts	73.7	—	—	73.7
	<u>\$ 925.4</u>	<u>\$ —</u>	<u>\$ —</u>	<u>\$ 925.4</u>
Investments measured at NAV				
Common/collective trusts				783.7
Separately managed private account funds				45.5
Total investments, at fair value				<u><u>\$ 1,754.6</u></u>

Following is a description of the valuation techniques and inputs used for each major class of assets measured at fair value:

- *Money market funds and mutual funds* are valued at the quoted closing price reported on the active market on which the individual securities are traded.
- The *Fortive Corporation Stock Fund* consists of shares of the Company's stock and short-term money market investments and is valued based on the quoted market price of the investments.

- The *separately managed funds* consist of common stock, money market funds, and mutual funds, which are valued at the last reported sales price of the security on the last business day of the year, uninvested interest bearing cash and cash equivalents, which is recorded at carrying value as maturities are less than three months, and privately traded mutual funds, which cannot be priced on the open market and are valued using the net asset value of units held. The NAV is used as a practical expedient to estimate fair value and is based on the fair value of the underlying investments held by the fund less its liabilities.
- The *self-directed brokerage accounts* consist of common stock, mutual funds, and exchange traded funds, which are valued at the last reported sales price on the last business day of the year, and uninvested interest bearing cash, which is recorded at carrying value as maturities are less than three months.
- Participation units in the *common/collective trust funds* are valued using the NAV of units held. The NAV is used as a practical expedient to estimate fair value and is based on the fair value of the underlying investments held by the fund less its liabilities.

The methods described above may produce a fair value estimate that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes the valuation methods are appropriate and consistent with the methods used by 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.

NOTE 4. TAX STATUS OF THE PLAN

The Plan received a determination letter from the Internal Revenue Service (“IRS”) dated March 14, 2018 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the “Code”) and, therefore, its related trust is exempt from taxation. Subsequent to receiving the IRS determination letter, the Plan has been amended and restated. The Plan Sponsor believes that the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan, as amended and restated, is qualified and the related trust is tax-exempt.

GAAP requires plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Plan Sponsor has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2021 and 2020, there are no uncertain positions taken or expected to be taken. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 5. RELATED PARTY AND PARTIES IN INTEREST TRANSACTIONS

Certain investments are held in shares of mutual funds and units of common collective trust funds issued by affiliates of Fidelity. Fidelity is the trustee as defined by the Plan, therefore, these are party in interest transactions.

Additionally, as of December 31, 2021 and 2020, the Plan held 0.6 million and 0.7 million shares, respectively, of Fortive common stock within the Fortive Corporation Stock Fund. During the year ended December 31, 2021, the Fortive Corporation Stock Fund purchased \$40.7 million and sold \$47.9 million in Company stock and received \$0.2 million of dividends related to shares of Fortive common stock.

SUPPLEMENTAL SCHEDULE
FORTIVE RETIREMENT SAVINGS PLAN
EIN: 47-5654583, PLAN NO. 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value		(d) Cost	(e) Current value
Interest Bearing Cash (including Money Market Funds)					
	Interest Bearing Cash	3,816,461	US dollars	**	\$ 3,816,461
	Vanguard Federal Money Market Fund	366,348	shares	**	366,348
					4,182,809
Common/Collective Trust Funds					
	American Beacon Small Cap Value	2,776,963	units	**	51,599,590
*	Fidelity Managed Income Portfolio II Class 3	129,491,544	units	**	129,491,544
	Harding Loevner International Equity Portfolio	292,497	units	**	5,124,546
	BlackRock LifePath® Index 2025 Non-Lendable Fund G	5,457,331	units	**	119,844,632
	BlackRock LifePath® Index 2030 Non-Lendable Fund G	4,992,941	units	**	119,122,579
	BlackRock LifePath® Index 2035 Non-Lendable Fund G	4,129,422	units	**	106,460,636
	BlackRock LifePath® Index 2040 Non-Lendable Fund G	3,317,035	units	**	91,463,580
	BlackRock LifePath® Index 2045 Non-Lendable Fund G	2,587,382	units	**	75,214,410
	BlackRock LifePath® Index 2050 Non-Lendable Fund G	2,254,506	units	**	67,876,629
	BlackRock LifePath® Index 2055 Non-Lendable Fund G	1,511,107	units	**	46,325,870
	BlackRock LifePath® Index 2060 Non-Lendable Fund G	857,280	units	**	17,850,545
	BlackRock LifePath® Index 2065 Non-Lendable Fund G	45,784	units	**	651,490
	BlackRock LifePath® Index Retirement Non-Lendable Fund G	4,580,106	units	**	86,245,226
					917,271,277
Employer Securities					
	Fortive Corporation Stock Fund				
*	Fortive Corporation Common Stock	614,235	shares	**	46,859,988
*	Fidelity Investments Money Market Government Portfolio - Institutional Class	484,211	US Dollars	**	484,211
					47,344,199
Registered Investment Companies					
	Dodge & Cox International Stock Fund	1,034,947	shares	**	48,942,662
	PIMCO Inflation Response Multi-Asset Institutional	612,854	shares	**	5,540,201
	PIMCO Total Return Fund	4,724,589	shares	**	48,521,533
*	Fidelity® Extended Market Index Fund - Premium Class	1,147,542	shares	**	100,077,120

*	Fidelity® 500 Index Fund - Institutional Class	1,513,964	shares	**	250,288,593
	T. Rowe Price Treasury Reserve Fund	106	shares	**	106
	Vanguard Total Bond Market Index Fund Institutional Shares	5,058,858	shares	**	56,608,620
	Vanguard Total International Stock Index Fund Institutional Shares	346,989	shares	**	47,457,665
					557,436,500

Common Stock

AAON INC	10,791	shares	**	857,129
ADVANCED MICRO DEVICES INC	21,318	shares	**	3,067,660
AFFIRM HOLDINGS INC	7,379	shares	**	742,032
AIR PRODUCTS & CHEMICALS INC	7,382	shares	**	2,246,047
ALARM.COM HOLDINGS INC	14,138	shares	**	1,199,044
ALIGN TECHNOLOGY INC	601	shares	**	394,965
ALLEGiant TRAVEL CO	4,047	shares	**	756,951
ALPHABET INC CL A	1,087	shares	**	3,149,082
ALPHABET INC CL C	7,634	shares	**	22,089,666
ALTRIA GROUP INC	29,083	shares	**	1,378,243
AMAZON.COM INC	7,270	shares	**	24,240,652
ANT INTL CO LTD CLASS C PP	110,973	shares	**	209,739
APPLE INC	129,823	shares	**	23,052,670
ASML HLDG NV (NY REG SHS) NEW YORK REGIS	2,645	shares	**	2,105,790
ASTRAZENECA PLC SPONS ADR	8,732	shares	**	508,639
ATLASSIAN CORP PLC CLS A	2,741	shares	**	1,045,116
AXOS FINANCIAL INC	10,568	shares	**	590,857
AZENTA INC	8,337	shares	**	859,628
BALCHEM CORP	7,316	shares	**	1,233,478
BARNES GROUP INC	7,261	shares	**	338,290
BERKSHIRE HATHAWAY INC CL B	7,912	shares	**	2,365,688
BILL.COM HOLDINGS INC	3,300	shares	**	822,195
BIO TECHNE CORP	2,790	shares	**	1,443,379
BIOLIFE SOLUTIONS INC	17,127	shares	**	638,323
BLACKBAUD INC	7,899	shares	**	623,863
BLACKLINE INC	9,350	shares	**	968,099
BLACKROCK INC	3,148	shares	**	2,882,183
BLOCK INC CL A	8,674	shares	**	1,400,938
BOTTOMLINE TECHNOLOGIES INC	11,329	shares	**	639,749
BRIGHT HORIZONS FAMILY SOLUTIONS INC	6,484	shares	**	816,206
CARVANA CO CL A	10,087	shares	**	2,338,066
CERENCE INC	7,716	shares	**	591,354
CHEVRON CORP	13,653	shares	**	1,602,180
CHIPOTLE MEXICAN GRILL INC	986	shares	**	1,723,775

CHUBB LTD	3,356	shares	**	648,748
CINCINNATI FINANCIAL CORP	11,197	shares	**	1,275,674
CINTAS CORP	607	shares	**	269,004
CISCO SYSTEMS INC	32,805	shares	**	2,078,853
COMCAST CORP CL A	28,694	shares	**	1,444,169
CONSTRUCTION PARTNERS INC CL A	27,000	shares	**	794,070
COPART INC	4,481	shares	**	679,409
COSTAR GROUP INC	232	shares	**	18,335
COUPA SOFTWARE INC	2,345	shares	**	370,627
CROWDSTRIKE HOLDINGS INC	1,119	shares	**	229,115
CROWN CASTLE INTL CORP	12,943	shares	**	2,701,722
DANAHER CORP	8,576	shares	**	2,821,590
DATABRICKS INC SER G PC PP	409	shares	**	90,165
DATADOG INC CL A	3,338	shares	**	594,531
DELIVERY HERO SE	2,819	shares	**	314,524
DESCARTES SYS GROUP INC	14,535	shares	**	1,201,754
DIAGEO PLC SPON ADR	10,604	shares	**	2,334,365
DISNEY (WALT) CO	5,203	shares	**	805,893
DOCUSIGN INC	4,768	shares	**	726,214
DOLLAR GENERAL CORP	6,808	shares	**	1,605,531
DOMINION ENERGY INC	25,929	shares	**	2,036,982
DONALDSON CO INC	7,955	shares	**	471,413
DOORDASH INC	10,111	shares	**	1,505,528
DORMAN PRODUCTS INC	5,698	shares	**	643,931
ENVESTNET INC	11,901	shares	**	944,225
EPLUS INC	13,278	shares	**	715,419
EQUIFAX INC	943	shares	**	276,101
ESCO TECHNOLOGIES INC	9,581	shares	**	862,194
EVO PAYMENTS INC CL A	21,469	shares	**	549,606
EVOQUA WATER TECHNOLOGIES CO	10,190	shares	**	476,383
EXLSERVICE HOLDINGS INC	8,501	shares	**	1,230,690
EXPONENT INC	13,918	shares	**	1,624,648
FAIR ISAAC CORP	2,900	shares	**	1,257,643
FASTENAL CO	28,640	shares	**	1,834,678
FISERV INC	10,660	shares	**	1,106,401
FORTINET INC	4,502	shares	**	1,618,019
FOX FACTORY HOLDING CORP	12,434	shares	**	2,115,023
FRANKLIN RESOURCES INC	24,003	shares	**	803,860
GENERAL ELECTRIC CO	6,987	shares	**	660,062
GLOBUS MEDICAL INC	13,922	shares	**	1,005,168

GOLDMAN SACHS GROUP INC	6,222	shares	**	2,380,226
HASHICORP INC	1,913	shares	**	174,160
HCA HEALTHCARE INC	7,862	shares	**	2,019,905
HEALTH EQUITY INC	8,955	shares	**	396,169
HUMANA INC	1,819	shares	**	843,761
I3 VERTICALS INC CL A	20,330	shares	**	463,321
INTEL CORP	27,487	shares	**	1,415,581
INTUIT INC	7,750	shares	**	4,984,955
INTUITIVE SURGICAL INC	11,237	shares	**	4,037,454
J&J SNACKS FOOD CORP	4,723	shares	**	746,045
JOHNSON & JOHNSON	14,048	shares	**	2,403,191
KINSALE CAPITAL GROUP INC	7,459	shares	**	1,774,422
LEMAITRE VASCULAR INC	9,892	shares	**	496,875
LHC GROUP INC	6,618	shares	**	908,188
LILLY (ELI) & CO	9,786	shares	**	2,703,089
LINDE PLC	1,790	shares	**	620,110
LOWES COS INC	13,240	shares	**	3,422,275
LULULEMON ATHLETICA INC	4,718	shares	**	1,846,861
MARSH & MCLENNAN COS INC	2,269	shares	**	394,398
MARTEN TRANSPORT LTD	36,479	shares	**	625,980
MARVELL TECHNOLOGY INC	13,833	shares	**	1,210,249
MASIMO CORP	3,958	shares	**	1,158,823
MASTERCARD INC CL A	12,503	shares	**	4,492,578
MERCK & CO INC NEW	19,418	shares	**	1,488,196
META PLATFORMS INC CL A	48,885	shares	**	16,442,470
MICROSOFT CORP	88,663	shares	**	29,819,140
MONGODB INC CL A	3,016	shares	**	1,596,520
MONOLITHIC POWER SYS INC	1,670	shares	**	823,861
MSCI INC	531	shares	**	325,338
NEOGEN CORP	18,019	shares	**	818,243
NESTLE SA REG ADR	10,916	shares	**	1,532,279
NETFLIX INC	7,458	shares	**	4,492,998
NIKE INC CL B	12,101	shares	**	2,016,874
NINTENDO LTD ADR	20,589	shares	**	1,201,780
NORFOLK SOUTHERN CORP	8,475	shares	**	2,523,092
NOVANTA INC	6,043	shares	**	1,065,562
NVIDIA CORP	27,262	shares	**	8,018,027
OLLIES BARGAIN OUTLET HOLDINGS INC	10,211	shares	**	522,701
OMNICELL INC	9,589	shares	**	1,730,239
ONTO INNOVATION INC	13,628	shares	**	1,379,562

OPENDOOR TECHNOLOGIES INC	21,800	shares	**	318,498
PACIFIC PREMIER BANCORP INC	12,854	shares	**	514,546
PALOMAR HLDGS INC	3,824	shares	**	247,680
PAYCHEX INC	14,508	shares	**	1,980,342
PAYCOM SOFTWARE INC	504	shares	**	209,256
PAYPAL HLDGS INC	12,411	shares	**	2,340,466
PERFICIENT INC	6,244	shares	**	807,287
PETIQ INC CL A	14,409	shares	**	327,228
PFIZER INC	38,750	shares	**	2,288,188
PHILIP MORRIS INTL INC	13,052	shares	**	1,239,940
PINTEREST INC CL A	25,945	shares	**	943,101
PROGRESSIVE CORP OHIO	18,068	shares	**	1,854,680
Q2 HOLDINGS INC	8,556	shares	**	679,689
RBC BEARINGS INC	5,555	shares	**	1,121,943
RIVIAN AUTOMOTIVE INC	10,268	shares	**	1,064,689
RIVIAN AUTOMOTIVE INC(180 DAY LOCK UP)	14,346	shares	**	1,338,783
ROGERS CORP	3,206	shares	**	875,238
ROKU INC CLASS A	1,005	shares	**	229,341
ROPER TECHNOLOGIES INC	2,350	shares	**	1,155,871
ROSS STORES INC	15,363	shares	**	1,755,684
S&P GLOBAL INC	3,455	shares	**	1,630,518
SALESFORCE.COM INC	1,934	shares	**	491,487
SCHWAB CHARLES CORP	12,933	shares	**	1,087,665
SEA LTD ADR	17,209	shares	**	3,849,825
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FORTIVE RETIREMENT SAVINGS PLAN

June 13, 2022

By: /s/ Daniel T. Hickey
Daniel T. Hickey
Vice President, Total Rewards

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/s/ Ernst & Young LLP

Seattle, Washington
June 13, 2022

SUPPLEMENTAL SCHEDULE
FORTIVE RETIREMENT SAVINGS PLAN
EIN: 47-5654583, PLAN NO. 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value		(d) Cost	(e) Current value
Interest Bearing Cash (including Money Market Funds)					
	Interest Bearing Cash	3,816,461	US dollars	**	\$ 3,816,461
	Vanguard Federal Money Market Fund	366,348	shares	**	366,348
					4,182,809
Common/Collective Trust Funds					
	American Beacon Small Cap Value	2,776,963	units	**	51,599,590
*	Fidelity Managed Income Portfolio II Class 3	129,491,544	units	**	129,491,544
	Harding Loevner International Equity Portfolio	292,497	units	**	5,124,546
	BlackRock LifePath® Index 2025 Non-Lendable Fund G	5,457,331	units	**	119,844,632
	BlackRock LifePath® Index 2030 Non-Lendable Fund G	4,992,941	units	**	119,122,579
	BlackRock LifePath® Index 2035 Non-Lendable Fund G	4,129,422	units	**	106,460,636
	BlackRock LifePath® Index 2040 Non-Lendable Fund G	3,317,035	units	**	91,463,580
	BlackRock LifePath® Index 2045 Non-Lendable Fund G	2,587,382	units	**	75,214,410
	BlackRock LifePath® Index 2050 Non-Lendable Fund G	2,254,506	units	**	67,876,629
	BlackRock LifePath® Index 2055 Non-Lendable Fund G	1,511,107	units	**	46,325,870
	BlackRock LifePath® Index 2060 Non-Lendable Fund G	857,280	units	**	17,850,545
	BlackRock LifePath® Index 2065 Non-Lendable Fund G	45,784	units	**	651,490
	BlackRock LifePath® Index Retirement Non-Lendable Fund G	4,580,106	units	**	86,245,226
					917,271,277
Employer Securities					
	Fortive Corporation Stock Fund				
*	Fortive Corporation Common Stock	614,235	shares	**	46,859,988
*	Fidelity Investments Money Market Government Portfolio - Institutional Class	484,211	US Dollars	**	484,211
					47,344,199
Registered Investment Companies					
	Dodge & Cox International Stock Fund	1,034,947	shares	**	48,942,662
	PIMCO Inflation Response Multi-Asset Institutional	612,854	shares	**	5,540,201
	PIMCO Total Return Fund	4,724,589	shares	**	48,521,533
*	Fidelity® Extended Market Index Fund - Premium Class	1,147,542	shares	**	100,077,120

*	Fidelity® 500 Index Fund - Institutional Class	1,513,964	shares	**	250,288,593
	T. Rowe Price Treasury Reserve Fund	106	shares	**	106
	Vanguard Total Bond Market Index Fund Institutional Shares	5,058,858	shares	**	56,608,620
	Vanguard Total International Stock Index Fund Institutional Shares	346,989	shares	**	47,457,665
					557,436,500

Common Stock

AAON INC	10,791	shares	**	857,129
ADVANCED MICRO DEVICES INC	21,318	shares	**	3,067,660
AFFIRM HOLDINGS INC	7,379	shares	**	742,032
AIR PRODUCTS & CHEMICALS INC	7,382	shares	**	2,246,047
ALARM.COM HOLDINGS INC	14,138	shares	**	1,199,044
ALIGN TECHNOLOGY INC	601	shares	**	394,965
ALLEGiant TRAVEL CO	4,047	shares	**	756,951
ALPHABET INC CL A	1,087	shares	**	3,149,082
ALPHABET INC CL C	7,634	shares	**	22,089,666
ALTRIA GROUP INC	29,083	shares	**	1,378,243
AMAZON.COM INC	7,270	shares	**	24,240,652
ANT INTL CO LTD CLASS C PP	110,973	shares	**	209,739
APPLE INC	129,823	shares	**	23,052,670
ASML HLDG NV (NY REG SHS) NEW YORK REGIS	2,645	shares	**	2,105,790
ASTRAZENECA PLC SPONS ADR	8,732	shares	**	508,639
ATLASSIAN CORP PLC CLS A	2,741	shares	**	1,045,116
AXOS FINANCIAL INC	10,568	shares	**	590,857
AZENTA INC	8,337	shares	**	859,628
BALCHEM CORP	7,316	shares	**	1,233,478
BARNES GROUP INC	7,261	shares	**	338,290
BERKSHIRE HATHAWAY INC CL B	7,912	shares	**	2,365,688
BILL.COM HOLDINGS INC	3,300	shares	**	822,195
BIO TECHNE CORP	2,790	shares	**	1,443,379
BIOLIFE SOLUTIONS INC	17,127	shares	**	638,323
BLACKBAUD INC	7,899	shares	**	623,863
BLACKLINE INC	9,350	shares	**	968,099
BLACKROCK INC	3,148	shares	**	2,882,183
BLOCK INC CL A	8,674	shares	**	1,400,938
BOTTOMLINE TECHNOLOGIES INC	11,329	shares	**	639,749
BRIGHT HORIZONS FAMILY SOLUTIONS INC	6,484	shares	**	816,206
CARVANA CO CL A	10,087	shares	**	2,338,066
CERENCE INC	7,716	shares	**	591,354
CHEVRON CORP	13,653	shares	**	1,602,180
CHIPOTLE MEXICAN GRILL INC	986	shares	**	1,723,775

CHUBB LTD	3,356	shares	**	648,748
CINCINNATI FINANCIAL CORP	11,197	shares	**	1,275,674
CINTAS CORP	607	shares	**	269,004
CISCO SYSTEMS INC	32,805	shares	**	2,078,853
COMCAST CORP CL A	28,694	shares	**	1,444,169
CONSTRUCTION PARTNERS INC CL A	27,000	shares	**	794,070
COPART INC	4,481	shares	**	679,409
COSTAR GROUP INC	232	shares	**	18,335
COUPA SOFTWARE INC	2,345	shares	**	370,627
CROWDSTRIKE HOLDINGS INC	1,119	shares	**	229,115
CROWN CASTLE INTL CORP	12,943	shares	**	2,701,722
DANAHER CORP	8,576	shares	**	2,821,590
DATABRICKS INC SER G PC PP	409	shares	**	90,165
DATADOG INC CL A	3,338	shares	**	594,531
DELIVERY HERO SE	2,819	shares	**	314,524
DESCARTES SYS GROUP INC	14,535	shares	**	1,201,754
DIAGEO PLC SPON ADR	10,604	shares	**	2,334,365
DISNEY (WALT) CO	5,203	shares	**	805,893
DOCUSIGN INC	4,768	shares	**	726,214
DOLLAR GENERAL CORP	6,808	shares	**	1,605,531
DOMINION ENERGY INC	25,929	shares	**	2,036,982
DONALDSON CO INC	7,955	shares	**	471,413
DOORDASH INC	10,111	shares	**	1,505,528
DORMAN PRODUCTS INC	5,698	shares	**	643,931
ENVESTNET INC	11,901	shares	**	944,225
EPLUS INC	13,278	shares	**	715,419
EQUIFAX INC	943	shares	**	276,101
ESCO TECHNOLOGIES INC	9,581	shares	**	862,194
EVO PAYMENTS INC CL A	21,469	shares	**	549,606
EVOQUA WATER TECHNOLOGIES CO	10,190	shares	**	476,383
EXLSERVICE HOLDINGS INC	8,501	shares	**	1,230,690
EXPONENT INC	13,918	shares	**	1,624,648
FAIR ISAAC CORP	2,900	shares	**	1,257,643
FASTENAL CO	28,640	shares	**	1,834,678
FISERV INC	10,660	shares	**	1,106,401
FORTINET INC	4,502	shares	**	1,618,019
FOX FACTORY HOLDING CORP	12,434	shares	**	2,115,023
FRANKLIN RESOURCES INC	24,003	shares	**	803,860
GENERAL ELECTRIC CO	6,987	shares	**	660,062
GLOBUS MEDICAL INC	13,922	shares	**	1,005,168

GOLDMAN SACHS GROUP INC	6,222	shares	**	2,380,226
HASHICORP INC	1,913	shares	**	174,160
HCA HEALTHCARE INC	7,862	shares	**	2,019,905
HEALTH EQUITY INC	8,955	shares	**	396,169
HUMANA INC	1,819	shares	**	843,761
I3 VERTICALS INC CL A	20,330	shares	**	463,321
INTEL CORP	27,487	shares	**	1,415,581
INTUIT INC	7,750	shares	**	4,984,955
INTUITIVE SURGICAL INC	11,237	shares	**	4,037,454
J&J SNACKS FOOD CORP	4,723	shares	**	746,045
JOHNSON & JOHNSON	14,048	shares	**	2,403,191
KINSALE CAPITAL GROUP INC	7,459	shares	**	1,774,422
LEMAITRE VASCULAR INC	9,892	shares	**	496,875
LHC GROUP INC	6,618	shares	**	908,188
LILLY (ELI) & CO	9,786	shares	**	2,703,089
LINDE PLC	1,790	shares	**	620,110
LOWES COS INC	13,240	shares	**	3,422,275
LULULEMON ATHLETICA INC	4,718	shares	**	1,846,861
MARSH & MCLENNAN COS INC	2,269	shares	**	394,398
MARTEN TRANSPORT LTD	36,479	shares	**	625,980
MARVELL TECHNOLOGY INC	13,833	shares	**	1,210,249
MASIMO CORP	3,958	shares	**	1,158,823
MASTERCARD INC CL A	12,503	shares	**	4,492,578
MERCK & CO INC NEW	19,418	shares	**	1,488,196
META PLATFORMS INC CL A	48,885	shares	**	16,442,470
MICROSOFT CORP	88,663	shares	**	29,819,140
MONGODB INC CL A	3,016	shares	**	1,596,520
MONOLITHIC POWER SYS INC	1,670	shares	**	823,861
MSCI INC	531	shares	**	325,338
NEOGEN CORP	18,019	shares	**	818,243
NESTLE SA REG ADR	10,916	shares	**	1,532,279
NETFLIX INC	7,458	shares	**	4,492,998
NIKE INC CL B	12,101	shares	**	2,016,874
NINTENDO LTD ADR	20,589	shares	**	1,201,780
NORFOLK SOUTHERN CORP	8,475	shares	**	2,523,092
NOVANTA INC	6,043	shares	**	1,065,562
NVIDIA CORP	27,262	shares	**	8,018,027
OLLIES BARGAIN OUTLET HOLDINGS INC	10,211	shares	**	522,701
OMNICELL INC	9,589	shares	**	1,730,239
ONTO INNOVATION INC	13,628	shares	**	1,379,562

OPENDOOR TECHNOLOGIES INC	21,800	shares	**	318,498
PACIFIC PREMIER BANCORP INC	12,854	shares	**	514,546
PALOMAR HLDGS INC	3,824	shares	**	247,680
PAYCHEX INC	14,508	shares	**	1,980,342
PAYCOM SOFTWARE INC	504	shares	**	209,256
PAYPAL HLDGS INC	12,411	shares	**	2,340,466
PERFICIENT INC	6,244	shares	**	807,287
PETIQ INC CL A	14,409	shares	**	327,228
PFIZER INC	38,750	shares	**	2,288,188
PHILIP MORRIS INTL INC	13,052	shares	**	1,239,940
PINTEREST INC CL A	25,945	shares	**	943,101
PROGRESSIVE CORP OHIO	18,068	shares	**	1,854,680
Q2 HOLDINGS INC	8,556	shares	**	679,689
RBC BEARINGS INC	5,555	shares	**	1,121,943
RIVIAN AUTOMOTIVE INC	10,268	shares	**	1,064,689
RIVIAN AUTOMOTIVE INC(180 DAY LOCK UP)	14,346	shares	**	1,338,783
ROGERS CORP	3,206	shares	**	875,238
ROKU INC CLASS A	1,005	shares	**	229,341
ROPER TECHNOLOGIES INC	2,350	shares	**	1,155,871
ROSS STORES INC	15,363	shares	**	1,755,684
S&P GLOBAL INC	3,455	shares	**	1,630,518
SALESFORCE.COM INC	1,934	shares	**	491,487
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