

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110
1210-0089

2022

This Form is Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

- A** This return/report is for:
 - a multiemployer plan
 - a single-employer plan
 - a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
 - 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 TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN	1b Three-digit plan number (PN) ▶ <u>001</u>
	1c Effective date of plan <u>05/01/1996</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) TUPPERWARE BRANDS CORPORATION 14901 SOUTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32837	2b Employer Identification Number (EIN) <u>36-4062333</u>
	2c Plan Sponsor's telephone number <u>407-826-5050</u>
	2d Business code (see instructions) <u>454390</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.	<u>10/16/2023</u>	<u>GUNNAR GUSTAFSON</u>
	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 (2022)
v. 220413

<p>3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor</p> <p>MANAGEMENT COMMITTEE FOR EMPLOYEES BENEFITS TUPPERWARE BRANDS CORPORATION 14901 SOUTH ORANGE BLOSSOM TRAIL ORLANDO, FL 32837</p>	<p>3b Administrator's EIN 59-3380262</p> <p>3c Administrator's telephone number 407-826-5050</p>
<p>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:</p> <p>a Sponsor's name c Plan Name</p>	<p>4b EIN</p> <p>4d PN</p>
<p>5 Total number of participants at the beginning of the plan year</p>	<p>5 705</p>
<p>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).</p>	
<p>a(1) Total number of active participants at the beginning of the plan year</p>	<p>6a(1) 114</p>
<p>a(2) Total number of active participants at the end of the plan year</p>	<p>6a(2) 95</p>
<p>b Retired or separated participants receiving benefits</p>	<p>6b 239</p>
<p>c Other retired or separated participants entitled to future benefits.....</p>	<p>6c 152</p>
<p>d Subtotal. Add lines 6a(2), 6b, and 6c.....</p>	<p>6d 486</p>
<p>e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.</p>	<p>6e 80</p>
<p>f Total. Add lines 6d and 6e</p>	<p>6f 566</p>
<p>g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....</p>	<p>6g</p>
<p>h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....</p>	<p>6h 0</p>
<p>7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)</p>	<p>7</p>
<p>8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A 1I</p> <p>b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:</p>	
<p>9a Plan funding arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor</p>	<p>9b Plan benefit arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor</p>
<p>10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)</p>	
<p>a Pension Schedules</p> <p>(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> 0 A (Insurance Information)</p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>

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 2022 Form M-1 annual report. If the plan was not required to file the 2022 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 SB (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>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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

A Name of plan <u>TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>TUPPERWARE BRANDS CORPORATION</u>		
D Employer Identification Number (EIN) <u>36-4062333</u>		
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		
F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500		

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2022</u>			
2 Assets:			
a Market value.....	2a	<u>27092212</u>	
b Actuarial value.....	2b	<u>25595599</u>	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>320</u>	<u>9666595</u>	<u>9666595</u>
b For terminated vested participants.....	<u>271</u>	<u>10032750</u>	<u>10032750</u>
c For active participants.....	<u>114</u>	<u>4467419</u>	<u>4540768</u>
d Total	<u>705</u>	<u>24166764</u>	<u>24240113</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions.....			4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....			4b
5 Effective interest rate.....			5 <u>5.40 %</u>
6 Target normal cost			
a Present value of current plan year accruals.....			6a <u>0</u>
b Expected plan-related expenses			6b <u>501136</u>
c Total (line 6a + line 6b)			6c <u>501136</u>

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

SIGN HERE		
	Signature of actuary	<u>10/13/2023</u>
	<u>CAROLINE L. PISACKA, F.S.A., E.A.</u>	Date
	Type or print name of actuary	<u>23-08266</u>
	<u>FIDELITY INVESTMENTS</u>	Most recent enrollment number
	Firm name	<u>617-563-0265</u>
	<u>245 SUMMER STREET, V1B</u> <u>BOSTON, MA 02210</u>	Telephone number (including area code)
	Address of the firm	

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

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>9.29</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year).....		417394
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>4.96</u> %.....		20703
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance.....		438097
	d Portion of (c) to be added to prefunding balance.....		438097
12	Other reductions in balances due to elections or deemed elections.....	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	438097

Part III		Funding Percentages	
14	Funding target attainment percentage	14	103.78 %
15	Adjusted funding target attainment percentage	15	105.59 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	90.73 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV		Contributions and Liquidity Shortfalls			
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date.	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	0
20	Quarterly contributions and liquidity shortfalls:		
	a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:		

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

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

21 Discount rate:

a Segment rates:	1st segment: 4.75 %	2nd segment: 5.18 %	3rd segment: 5.92 %	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code)..... **21b** 4

22 Weighted average retirement age **22** 64

23 Mortality table(s) (see instructions) Prescribed - combined Prescribed - separate Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. Yes No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. Yes No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. Yes No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... Yes No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment **27**

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c).....	31a	501136
b Excess assets, if applicable, but not greater than line 31a	31b	501136

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment.....	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount..... **33**

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).... **34** 0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0

36 Additional cash requirement (line 34 minus line 35)..... **36** 0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)..... **37** 0

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)..... **39** 0

40 Unpaid minimum required contributions for all years..... **40** 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. 2019 2020 2021

SCHEDULE C (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>	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.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan <u>TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TUPPERWARE BRANDS CORPORATION</u>	D Employer Identification Number (EIN) <u>36-4062333</u>	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

04-2723880

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

20-4659714

(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)

FIDELITY INSTITU ASSET MANAGE

20-4659714

(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?
17 50	INVST MGMT	74973	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

FIDELITY INV INST OPER CO

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?
11 17 50	ADMIN FEES	9667	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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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 <hr/> 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>TUPPERWARE BRANDS CORPORATION BASE RETIREMENT 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>TUPPERWARE BRANDS CORPORATION</u>	D Employer Identification Number (EIN) <u>36-4062333</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>FIAM PENSION JOURNEY 60/40</u>	
b Name of sponsor of entity listed in (a):	<u>FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST CO</u>	
c EIN-PN <u>20-4659714-157</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>17051071</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**SCHEDULE H
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **12/31/2022**

A Name of plan TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 TUPPERWARE BRANDS CORPORATION	D Employer Identification Number (EIN) 36-4062333

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions.....	1b(1)	995000
(2) Participant contributions.....	1b(2)	0
(3) Other.....	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	
(2) U.S. Government securities.....	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred.....	1c(3)(A)	
(B) All other.....	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred.....	1c(4)(A)	
(B) Common.....	1c(4)(B)	
(5) Partnership/joint venture interests.....	1c(5)	
(6) Real estate (other than employer real property).....	1c(6)	
(7) Loans (other than to participants).....	1c(7)	
(8) Participant loans.....	1c(8)	
(9) Value of interest in common/collective trusts.....	1c(9)	26111617
(10) Value of interest in pooled separate accounts.....	1c(10)	17051071
(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)	
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	27106617	17051071

Liabilities

g Benefit claims payable.....	1g		
h Operating payables.....	1h	92920	0
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	92920	0

Net Assets

l Net assets (subtract line 1k from line 1f).....	1l	27013697	17051071
---	----	----------	----------

Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	1512	
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-5357181
(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)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-5355669
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4196181	
(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)		4196181
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees	2i(3)	74973	
(4) Other	2i(4)	335803	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		410776
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4606957
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-9962626
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

- (1) 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: RSM US LLP

(2) EIN: 42-0714325

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?.....	4e	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.).....	4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 468110.

SCHEDULE R (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>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan <u>TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TUPPERWARE BRANDS CORPORATION</u>	D Employer Identification Number (EIN) <u>36-4062333</u>	

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

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

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

1		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): 04-3275867

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		31
---	--	----

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a	
b Enter the amount contributed by the employer to the plan for this plan year.....	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> 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. <input type="checkbox"/> 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 _____

Tupperware Brands Corporation Base Retirement Plan

Financial Report
December 31, 2022

Contents

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<hr/>	
Financial statements	
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Independent Auditor's Report

RSM US LLP

Plan Participants and Administrator
Tupperware Brands Corporation Base Retirement Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of the Tupperware Brands Corporation Base Retirement Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP and for the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter—Supplemental Schedules Required by ERISA

The supplemental schedules of schedule H, line 4i—schedule of assets (held at end of year) and schedule H, line 4j—schedule of reportable transactions as of and for the year ended December 31, 2022, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements, or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

RSM US LLP

Tampa, Florida
October 13, 2023

Tupperware Brands Corporation Base Retirement Plan

**Statements of Net Assets Available for Benefits
December 31, 2022 and 2021**

	2022	2021
Assets		
Investments at fair value	\$ 17,051,071	\$ 26,111,617
Receivables:		
Employer contributions	-	995,000
Total assets	17,051,071	27,106,617
Liabilities		
Accrued expenses	-	92,920
Net assets available for benefits	\$ 17,051,071	\$ 27,013,697

See notes to financial statements.

Tupperware Brands Corporation Base Retirement Plan

Statements of Changes in Net Assets Available for Benefits Year Ended December 31, 2022

Investment (loss) income:	
Net depreciation in fair value of investments	\$ (5,357,181)
Interest and dividends	<u>1,512</u>
Net investment loss	<u>(5,355,669)</u>
Deductions from net assets attributed to:	
Benefits paid to participants	4,196,181
Administrative expenses	<u>410,776</u>
Total deductions	<u>4,606,957</u>
Net decrease in net assets available for benefits	(9,962,626)
Net assets available for benefits:	
Beginning of year	<u>27,013,697</u>
End of year	<u>\$ 17,051,071</u>

See notes to financial statements.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 1. Plan Description

General: The Tupperware Brands Corporation Base Retirement Plan (the Plan) was established May 1, 1996, in conjunction with the distribution by Premark International, Inc. to its stockholders of all outstanding shares of common stock of its wholly owned subsidiary, Tupperware Brands Corporation (the Company). The Company assumed sponsorship of the Plan on May 1, 1996. The Plan is a defined benefit plan covering eligible employees of certain subsidiaries of Tupperware Brands Corporation. Fidelity Management Trust Company (Fidelity) is the trustee of the Plan.

The Plan is administered on behalf of the Company by the Management Committee for Employee Benefits (MCEB), which functions as the Plan Administrator. MCEB is composed of certain officers and employees of the Company appointed by the Compensation and Management Development Committee of the Board of Directors of the Company (the Compensation Committee). The MCEB is responsible for oversight of the Plan. The MCEB determines the appropriateness of the Plan's investments, monitors investment performance and reports to the Compensation Committee.

The purpose of the Plan is to provide retirement income to its participants. The following brief description of the Plan is provided for general informational purposes only. Participants should refer to the Plan's summary description or the Plan document for more complete information.

Plan participant benefits have been frozen since June 30, 2005. Salaries or wages, as well as service credits, received after that date are not taken into consideration for purposes of calculating accrued benefits under the Plan. However, for purposes of determining early retirement eligibility, participants as of June 30, 2005, continue to receive service credit for periods of employment after such date. Plan participants did not lose any accrued benefits at the time the Plan was frozen.

Investments: The Plan's assets are composed mainly of commingled pool investments (common collective trusts) established under the Fidelity Group Trust for Employee Benefit Plans and the Spartan Group Trust for Employee Benefit Plans. Fidelity Institutional Asset Management (FIAM) and Geode Capital Management Trust Company, respectively, are trustees of their respective common collective trust. A commingled pool is similar to a mutual fund in that it combines the money of many investors. The main difference is in the legal setup and regulation. A mutual fund is a separate investment company, is registered with the U.S. Securities and Exchange Commission and has shares that are available for purchase by the general public. A commingled pool investment is part of a group trust maintained by a trust company, is governed in accordance with Internal Revenue Code (IRC) and United States Department of Labor (DOL) laws and regulations and is generally not available for purchase by the general public.

Eligibility: Prior to the Plan being frozen, an eligible employee whose usual base of employment was within the United States of America and were a U.S. citizen who participated in the U.S. Social Security program, became a participant in the Plan after the completion of one year of employment by the Company in which the employee was credited with at least 1,000 hours of service. Employees hired after June 30, 2005, are not eligible for participation in the Plan.

Vesting: A participant is considered to be fully vested and has a nonforfeitable right to benefits under the Plan if the participant has completed five years of credited service, has reached the age of 65 while still an employee, or has become permanently and totally disabled while an employee. All participants are 100% vested.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 1. Plan Description (Continued)

Pension benefits: Vested participants are entitled to benefit payments beginning at the normal retirement age of 65. The normal forms of benefit payments are a monthly annuity or a lump-sum payment. Other payment options may be chosen by the participant as allowed by the Plan. The Plan permits early retirement at any time after age 55 and completion of 10 years of credited service. The amount of the monthly benefit for early retirees is reduced by specified percentages from 0.2% to 0.4% per month for each calendar month that payments begin before the normal retirement age of 65 is attained. The accumulated Plan benefits for participants are based on the total compensation for the periods prior to June 30, 2005, that the participant received credited service under the Plan.

The Plan's normal retirement age is 65. Effective January 1, 2011, the Plan was amended to account for participants choosing later retirement. Accordingly, Plan participants who elect to defer their normal retirement date past age 65 have their pension benefits actuarially adjusted on their subsequent retirement to reflect the deferred retirement date. Retired plan participants who originally chose to receive their pension benefit in the form of a monthly annuity but are subsequently rehired by the Company to work more than 40 cumulative hours in a month, will have their pension benefit suspended and deferred until their later retirement date. At such time, their pension benefit will be actuarially adjusted to account for the deferred retirement date.

On October 1, 2016, the Plan was amended to provide for a voluntary, early commencement window for a one-time lump-sum payment or monthly annuity payment option for terminated participants and surviving spouses who were not eligible for early retirement (at least age 55 with 10 or more years of service) or normal retirement (age 65 regardless of years of service). The eligibility of participants that did not participate in the window, reverted to the timing stated above.

Mandatory rollover rules: The automatic rollover provisions of IRC Section 401(a)(31)(B) as amended by Section 657 of the Economic Growth and Tax Relief Reconciliation Act of 2001 require that a mandatory distribution of more than \$1,000 from a plan qualified under IRC Section 401(a) be paid in a direct rollover to an individual retirement account. In addition, involuntary distributions are subject to the same automatic rollover provisions of Section 401(a)(31)(B).

Terminating participants with a lump-sum balance of \$1,000 or less, receive a one-time lump-sum payment upon termination. Terminated participants with a balance greater than \$1,000, but less than or equal to \$5,000, have their Plan benefit removed from the Plan and placed in an individual retirement account (IRA) elected by the terminated participant, or if no affirmative election is made, then with Fidelity Management Trust Company, an independent custodian serving the self-directed retirement account market. Those terminated participants with a balance greater than \$5,000 have a deferred vested benefit.

Death benefits: If a married participant who is vested dies before any benefits are received, his or her spouse is eligible to receive monthly lifetime benefits whether or not the participant was actively working for the Company at the time of death.

In such case, the payment amount will be one-half the amount the participant would have been entitled to receive. This is under the 50% joint and survivor annuity form of benefit payment determined as of the day before the date of death or the date earliest retirement eligibility is attained, whichever is later.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 2. Summary of Significant Accounting Policies

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

Use of estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires the Plan's management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

The Plan uses an actuary to determine the actuarial present value of accumulated plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value of accumulated plan benefits reported in Note 3.

Investment valuation and income recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The MCEB determines the Plan's valuation policies utilizing information provided by the trustee. See Note 6 for discussion of fair value measurements.

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

Investment securities are exposed to various risks, such as interest rate, market and credit risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and such changes could materially affect participant account balances and the amounts reported in the statements of net assets available for benefits.

Payments of benefits: Benefits are recorded when paid.

Expenses: Certain expenses of maintaining the Plan are paid directly by the Sponsor and are excluded from these financial statements. Allowable trust and Plan management fees and expenses are charged to the Plan in accordance with Plan provisions and guidelines approved by MCEB.

Subsequent events: The Plan has evaluated subsequent events (events occurring after December 31, 2022) through October 13, 2023, the date the financial statements were available to be issued.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 3. Actuarial Information

The actuarially computed values of accumulated plan benefits reported by the consulting actuary as of December 31, 2022 and 2021, were as follows:

	December 31	
	2022	2021
Vested benefits:		
Participants currently receiving payments	\$ 8,819,664	\$ 9,552,185
Terminated participants entitled to deferred benefits	8,896,766	12,706,424
Other participants	3,809,178	6,045,553
Nonvested benefits	63,434	96,722
Total actuarial present value of accumulated plan benefits	<u>\$ 21,589,042</u>	<u>\$ 28,400,884</u>

During 2022, the actuarial present value of accumulated plan benefits changed as follows:

	Year Ended December 31, 2022
Actuarial present value of accumulated plan benefits at beginning of year	\$ 28,400,884
Changes during the year attributable to:	
Decrease in the discount period	1,382,306
Benefit payments	(4,196,181)
Assumption changes	(3,933,881)
Other, including benefits earned and net actuarial (gain) loss:	(64,086)
Net decrease	<u>(6,811,842)</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 21,589,042</u>

A summary of the more significant actuarial assumptions underlying the computations used in calculating the actuarial present value of accumulated plan benefits for 2022 and 2021 is presented below. As a result of changes in the discount rate and lump-sum interest rate used in 2022, the accumulated plan benefits decreased by approximately \$3,934,000.

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries, beneficiaries of employees who have died, and present employees or their beneficiaries. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment, are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

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

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 3. Actuarial Information (Continued)

2022

Discount rate	5.75%
Lump-sum interest rate	5.25%
Average retirement age	64
Mortality table	Pri-2012 with MP-2021 Mortality Improvement Scale

2021

Discount rate	5.25%
Lump-sum interest rate	2.50%
Average retirement age	64
Mortality table	Pri-2012 with MP-2021 Mortality Improvement Scale

Employees are assumed to retire between the ages of 55 and 70. The retirement age shown above represents the average assumed age of retirement.

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

Note 4. Funding

The funding policy of the Company is to make at least the minimum contributions required by the IRC and ERISA, as amended.

Company contributions are based on the determination and recommendation of the Plan's consulting actuary. Based on such recommendation, the Company contributes such amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the requirements of the IRC and ERISA and for benefits to be paid to Plan participants. Nonetheless, the Company, at its discretion, may contribute additional amounts. Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. The Company has met the minimum funding requirements set forth by ERISA for the years ended December 31, 2022 and 2021, as determined by the actuarial valuation.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 5. Information Certified or Provided by Fidelity Management Trust Company (Trustee)

The following is a summary of the Plan's asset information as of December 31, 2022 and 2021, and for the year ended December 31, 2022, included throughout the Plan's financial statements and ERISA-required supplemental schedules, obtained by management and agreed to or derived from information certified by Fidelity, the trustee of the Plan. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the information that appears throughout the financial statements and ERISA-required supplemental schedules related to the following assets:

	December 31	
	2022	2021
Investments at fair value:		
Common collective trust	\$ 17,051,071	\$ 26,111,617

The trustee also certified the completeness and accuracy of \$5,357,181 of net depreciation in fair value of investments and \$1,512 of interest and dividends related to the aforementioned plan assets for the year ended December 31, 2022.

Note 6. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy are described below:

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

Level 2: Inputs to the valuation methodology include:

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

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

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

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

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 6. Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2022 and 2021.

Common collective trust: Valued at the net asset value (NAV) of shares in each account held by the Plan at year-end. The NAV is not a publicly quoted price in an active market. The NAV, as provided by the trustee, is used as a practical expedient to estimating fair value. The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022 and 2021.

	Assets at Fair Value as of December 31, 2022			
	Total	Level 1	Level 2	Level 3
Investments measured at NAV (a)	<u>\$ 17,051,071</u>			
Total investments at fair value	<u>\$ 17,051,071</u>			
	Assets at Fair Value as of December 31, 2021			
	Total	Level 1	Level 2	Level 3
Investments measured at NAV (a)	<u>\$ 26,111,617</u>			
Total investments at fair value	<u>\$ 26,111,617</u>			

(a) In accordance with the Fair Value Measurements topic, certain investments that were measured at NAV per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

The following sets forth additional disclosures of the Plan's investments for which fair value is based on NAV per share practical expedient as of December 31, 2022 and 2021:

Description	Fair Value		Unfunded Commitment	Redemption Frequency	Redemption Notice Period and Restrictions
	2022	2021			
Common collective trust	<u>\$ 17,051,071</u>	<u>\$ 26,111,617</u>	None	Monthly	15 days

To assess the appropriate classification of investments within the fair value hierarchy, the availability of market data is monitored. Changes in economic conditions or valuation techniques may require the transfer of investments from one fair value level to another.

The Plan evaluates the significance of transfers between levels based upon the nature of the investment and size of the transfer relative to total net assets available for benefits.

Note 7. Related-Party and Party-in-Interest Transactions

Certain Plan investments are shares of common collective trust funds managed by Fidelity or its affiliate, FIAM. As Fidelity is the trustee of the Plan and FIAM the Plan's investment advisor, transactions with both Fidelity and FIAM qualify as party-in-interest transactions. For the year ended December 31, 2022, fees incurred and paid by the Plan to Fidelity or FIAM related to consulting and professional fees were \$84,640. The Company provides certain administrative services for the Plan and is not reimbursed for their service to the Plan.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 8. Plan Termination

It is the intent of the Company that the Plan will continue into the future. However, the MCEB, with the approval of the Compensation Committee of the Company's Board of Directors, reserves the right to terminate the Plan. In the event of termination, the assets of the Plan, less expense of administration and liquidation, would be allocated to the participants in accordance with the terms of the Plan and the requirements of ERISA. To the extent unfunded vested benefits exist, ERISA provides that such benefits, within specified limitations, are payable to participants by the Pension Benefit Guaranty Corporation (PBGC), a U.S. government agency.

Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For Plan terminations occurring during 2022, that ceiling was \$6,205 per month. That ceiling applied to those pensioners who elected to receive their benefits in the form of a single-life annuity and were at least 65 years old at the time of retirement or Plan termination (whichever came later).

For younger annuitants, or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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

1. Benefits attributable to employee contributions, if any, taking into account those paid out before termination.
2. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years.
3. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
4. Other vested benefits insured by the PBGC up to the applicable limitations (discussed above).
5. All other vested benefits (that is, vested benefits not insured by the PBGC).
6. All nonvested benefits.

Whether all participants would receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Company, the level of benefits guaranteed by the PBGC and the ability of the PBGC to meet its obligations.

Tupperware Brands Corporation Base Retirement Plan

Notes to Financial Statements

Note 9. Tax Status

The IRS has determined and informed the Plan Sponsor, by a letter dated July 27, 2015, that the Plan is qualified, and the trust established under the Plan is tax-exempt under the appropriate section(s) of the IRC. The Plan has been amended since receiving the determination letter. The Plan Administrator believes the Plan and trust are operating in a manner that did not jeopardize this tax status.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken any significant uncertain tax positions that more likely than not would not be sustained upon examination. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 10. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits. Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

The Pension Protection Act of 2006 as amended by the Worker, Retiree and Employer Recovery Act of 2008 imposes certain benefit restrictions for qualified defined benefit plans that do not meet certain funding thresholds. A plan's funded percentage is referred to as the Adjusted Funding Target Attainment Percentage (AFTAP). The 2022 AFTAP for the Plan is 105.59%. Because the Plan's AFTAP equals or exceeds 80%, the Plan is not subject to any benefit restrictions.

Tupperware Brands Corporation Base Retirement Plan

**Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2022**

Employer Identification Number: 36-4062333

Plan Number: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Shares	Cost	Current Value
	Common collective trust:			
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool	1,449,921	\$ 18,251,956	\$ 17,051,071
Total assets held			\$ 18,251,956	\$ 17,051,071

* Designates party in interest.

The above information has been certified by Fidelity Management Trust Company, the trustee, to be complete and accurate.

Tupperware Brands Corporation Base Retirement Plan

**Schedule H, Line 4j—Schedule of Reportable Transactions
December 31, 2022**

Employer Identification Number: 36-4062333

Plan Number: 001

Identity of Party Involved	Description of Asset	Purchase Price		Selling Price		Cost of Asset	Current Value of Asset on Transaction Date	Net (Loss)
		Number of Transactions	Amount	Number of Transactions	Amount			
Series of transactions by issue in excess of 5%								
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool	15	\$ 1,000,498			\$ 1,000,498	\$ 1,000,498	\$ -
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool			32	\$ 4,703,866	\$ 4,803,854	\$ 4,703,866	\$ (99,990)

* Designates party in interest.

The above information has been certified by Fidelity Management Trust Company, the trustee, to be complete and accurate.

Transactions are measured against the December 31, 2021, net asset value of \$27,013,697.

Attachment to 2022 Form 5500
Schedule SB, line 22 - Weighted Average Retirement Age

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Development of Weighted Average Retirement Age

(1) <u>Age</u>	(2) <u>Total Exposure</u>	(3) <u>Retirement Percent</u>	(4) <u>Number Retired</u>	(5) <u>(1) * (4)</u>
55	1,000	3%	30	1,650
56	970	3%	29	1,624
57	941	4%	38	2,166
58	903	4%	36	2,088
59	867	5%	43	2,537
60	824	5%	41	2,460
61	783	5%	39	2,379
62	744	5%	37	2,294
63	707	5%	35	2,205
64	672	5%	34	2,176
65	638	25%	160	10,400
66	478	40%	191	12,606
67	287	55%	158	10,586
68	129	70%	90	6,120
69	39	85%	33	2,277
70	6	100%	6	420
			<u>1,000</u>	<u>63,988</u>

Sum of Column (5), Divided by Age 55 Exposure
(Rounded to the Nearest Whole Year)

63,988 / 1,000
64

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods

ERISA Interest Rates as required by IRC Section 430 based on plan sponsor election of the look-back month for the segment rates:

“Minimum” means for the purpose of calculating the PPA funding liability and normal cost for the minimum required contribution.

“Maximum” means for the purpose of calculating the PPA funding liability and normal cost for the maximum tax-deductible contribution.

Purpose	2022 Plan Year		2021 Plan Year	
	Minimum	Maximum	Minimum	Maximum
Segment rates or full yield curve	Segment	Segment	Segment	Segment
Look-back months	4	4	4	4
First 5 years	4.75%	1.07%	3.32%	2.22%
Next 15 years	5.18%	2.68%	4.79%	3.38%
Over 20 years	5.92%	3.36%	5.47%	3.92%
Applicable Law for the segment rates corridor	ARPA	Not Applicable	BBA	Not Applicable

Valuation Pay: Not applicable; plan is frozen.

Lump Sum Payments: PPA Funding Target interest rates (per above) applied for funding purposes as required by IRC Section 430.

Mortality:

ERISA: IRS 2022 Static Mortality Table using separate tables for annuitants and non-annuitants as prescribed by IRC Section 430. These tables include future mortality improvement of 8 years for males and 9 years for females with the following adjustments: For ages below 80, the projection period is increased by 1 year for each year below age 80. For ages above 80, the projection period is reduced (but not below zero) by 1/3 year for each year above 80 (previously IRS 2021 Static Mortality Table using separate tables for annuitants and non-annuitants as prescribed by IRC Section 430. These tables include future mortality improvement of 8 years for males and 9 years for females with the following adjustments: For ages below 80, the projection period is increased by 1 year for each year below age 80. For ages above 80, the projection period is reduced (but not below zero) by 1/3 year for each year above 80).

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods (continued)

Retirement Rates: Rates varying by age for active employees based on a study of experience under this plan conducted in 2014.

Age	Rate
55	3%
56	3
57	4
58	4
59	5
60	5
61	5
62	5
63	5
64	5
65	25
66	40
67	55
68	70
69	85
70	100

Average Retirement Age is 64.

Retirement Rates: Rates varying by age for early retirement eligible deferred vested participants, based on a study of experience under this plan conducted in 2011. There has been no pattern of significant consistent gains or consistent losses related to this decrement:

Age	Rate
55	25%
56 - 61	0
62	5
63	5
64	5
65	100

Retirement Rates: Deferred vested participants who are not eligible for early retirement are assumed to retire at age 65 based on a study of experience under this plan conducted in 2011. There has been no pattern of significant consistent gains or consistent losses related to this decrement.

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods (continued)

Withdrawal: Sample withdrawal rates per 1,000 participants, based on a study of experience under this plan conducted in 2014.

Age	Male	Female
20	224.3	374.4
25	149.0	224.3
30	103.7	149.0
35	73.2	103.7
40	45.0	73.2
45	41.5	52.5
50	39.0	50.0
55	36.5	47.5
60	34.0	45.0
64	32.0	43.0

Disability: Sample disability rates per 1,000 participants based on the assumption used by the prior actuary for this plan. There has been no pattern of significant consistent gains or consistent losses related to this decrement:

Age	Male	Female
20	.3	.3
25	.3	.3
30	.3	.4
35	.4	.7
40	.8	1.3
45	1.6	2.4
50	3.3	4.0
55	6.9	6.4
60	11.5	9.0
64	16.4	10.9

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods (continued)

Marital Status: 80 percent of males and 60 percent of females are assumed married, with females 3 years younger than males.

Increase in Consumer Price Index (CPI): 3.00%. This is based on long-term historical inflation rates of about 3%.

Maximum Benefit: \$245,000 for 2022. For determining limitations under funding amounts, no future increases in the IRC Section 415 limit have been reflected.

Form of Payment: It has been assumed that death benefits and benefits payable to terminated vested participants who have not met the requirements for early retirement will be paid in the normal annuity form applicable to these particular benefits. All other terminating participants are assumed to receive their benefit in the form of a one-time lump sum payment. To the extent optional forms of payment are elected and conversions are determined under an actuarial basis which differs from the basis funded in the valuation, gains or losses will occur. These gains or losses will be recognized through the routine application of the actuarial cost method.

Administrative Expenses:

ERISA: Estimated based on the average of the non-investment related administrative expenses paid from the Trust in the prior three years plus actual PBGC premium for the 2022 Plan Year. This year's estimate is \$501,136.

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods (continued)

Actuarial Value of Plan Assets for Funding Purposes:

The actuarial value of assets is equal to:

- a) the market value of assets (including discounted employer contributions receivable) on the valuation date, less
- b) the following percentages of prior years' investment gains (losses):
 - i) 67% of the prior year, and
 - ii) 33% of the second prior year.

Investment gains and losses are defined as the excess or deficiency of the expected return on the market value (at an assumed rate of return, not to exceed the third segment rate for that year) over the actual return on the market value (including employer contributions receivable) for any given year.

- c) The actuarial value of assets can be neither less than 90% nor greater than 110% of the market value of assets (including discounted employer contributions receivable).

Shortfall Amortization Charge for ERISA Funding Purposes: Per IRC Section 430(c), the shortfall amortization charge for any plan year is the aggregate total (not less than zero) of the shortfall amortization installments for such plan year with respect to any shortfall amortization base which has not been fully amortized. The shortfall amortization installments are the amounts necessary to amortize the shortfall amortization base of the plan year in level annual installments over the 15-year period beginning with such plan year.

Attachment to 2022 Form 5500
Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Actuarial Assumptions and Methods (continued)

Actuarial Cost Method: The unit credit cost method is used for ERISA funding target (FT). Under this method, accrued pension benefits are determined for all eligible active participants. These benefits reflect service, salary and negotiated benefit increases to date. The liability is then equal to the present value of all benefits (PVAB) for inactive participants plus the PVAB for active participants.

The normal cost is determined on an individual basis for all active participants who have not attained the assumed retirement age and is equal to the present value of the difference between the current accrued benefit and the anticipated accrued benefit one year later, with the accrued benefit based upon earnings, or negotiated benefit increases, to date in both cases. The total normal cost is based upon the sum of the individual normal costs. The target normal cost for funding is equal to the total normal cost plus assumed administrative expenses expected to be paid from the trust.

The projected unit credit method is used for IRS maximum deductible limit cushion amount. Under this method, accrued pension benefits are determined for all eligible active participants. These benefits reflect service to date and anticipated salary and negotiated benefit increases to the assumed retirement age. The liability is then equal to the present value of all benefits for inactive participants plus the PVAB for active participants.

The normal cost is determined on an individual basis for all active participants who have not attained the assumed retirement age and is equal to the present value of the difference between the current accrued benefit and the anticipated accrued benefit one year later, with the accrued benefit based upon earnings and negotiated benefit increases projected to assumed retirement age in both cases. The total normal cost is based upon the sum of the individual normal costs.

Tupperware Brands Corporation Base Retirement Plan

**Schedule H, Line 4j—Schedule of Reportable Transactions
December 31, 2022**

Employer Identification Number: 36-4062333

Plan Number: 001

Identity of Party Involved	Description of Asset	Purchase Price		Selling Price		Cost of Asset	Current Value of Asset on Transaction Date	Net (Loss)
		Number of Transactions	Amount	Number of Transactions	Amount			
Series of transactions by issue in excess of 5%								
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool	15	\$ 1,000,498			\$ 1,000,498	\$ 1,000,498	\$ -
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool			32	\$ 4,703,866	\$ 4,803,854	\$ 4,703,866	\$ (99,990)

* Designates party in interest.

The above information has been certified by Fidelity Management Trust Company, the trustee, to be complete and accurate.

Transactions are measured against the December 31, 2021, net asset value of \$27,013,697.

SCHEDULE SB (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>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022


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

A Name of plan TUPPERWARE BRANDS CORPORATION BASE RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TUPPERWARE BRANDS CORPORATION	D Employer Identification Number (EIN) 36-4062333	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2022</u>		
2	Assets:		
	a Market value	2a	27,092,212
	b Actuarial value	2b	25,595,599
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	320	9,666,595
	b For terminated vested participants	271	10,032,750
	c For active participants	114	4,467,419
	d Total	705	24,166,764
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	5.40%
6	Target normal cost		
	a Present value of current plan year accruals	6a	0
	b Expected plan-related expenses	6b	501,136
	c Total (line 6a + line 6b)	6c	501,136

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

SIGN HERE	 Signature of actuary CAROLINE L. PISACKA, F.S.A., E.A. Type or print name of actuary FIDELITY INVESTMENTS Firm name 245 SUMMER STREET, V1B BOSTON MA 02210 Address of the firm	<u>10/13/2023</u> Date <u>2308266</u> Most recent enrollment number <u>617-563-0265</u> Telephone number (including area code)
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Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>9.29</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		417,394
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>4.96</u> %		20,703
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		438,097
	d Portion of (c) to be added to prefunding balance		438,097
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	438,097

Part III		Funding Percentages	
14	Funding target attainment percentage	14	103.78 %
15	Adjusted funding target attainment percentage	15	105.59 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.73 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	
Totals ▶			18(b)	0	18(c)	0

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

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? Yes No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost				
21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.18 %	3rd segment: 5.92 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

Part VI Miscellaneous Items				
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
26 Demographic and benefit information				
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....				27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years				
28 Unpaid minimum required contributions for all prior years				28 0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....				29 0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....				30 0

Part VIII Minimum Required Contribution For Current Year				
31 Target normal cost and excess assets (see instructions):				
a Target normal cost (line 6c)				31a 501,136
b Excess assets, if applicable, but not greater than line 31a				31b 501,136
32 Amortization installments:	Outstanding Balance		Installment	
a Net shortfall amortization installment	0		0	
b Waiver amortization installment.....	0		0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount				33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....				34 0
	Carryover balance	Prefunding balance	Total balance	
35 Balances elected for use to offset funding requirement	0	0	0	
36 Additional cash requirement (line 34 minus line 35)				36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)				37 0
38 Present value of excess contributions for current year (see instructions)				
a Total (excess, if any, of line 37 over line 36)				38a 0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....				38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)				39 0
40 Unpaid minimum required contributions for all years				40 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)				
41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021				

Attachment to 2022 Form 5500
Schedule SB, line 22 - Weighted Average Retirement Age

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Development of Weighted Average Retirement Age

(1) <u>Age</u>	(2) <u>Total Exposure</u>	(3) <u>Retirement Percent</u>	(4) <u>Number Retired</u>	(5) <u>(1) * (4)</u>
55	1,000	3%	30	1,650
56	970	3%	29	1,624
57	941	4%	38	2,166
58	903	4%	36	2,088
59	867	5%	43	2,537
60	824	5%	41	2,460
61	783	5%	39	2,379
62	744	5%	37	2,294
63	707	5%	35	2,205
64	672	5%	34	2,176
65	638	25%	160	10,400
66	478	40%	191	12,606
67	287	55%	158	10,586
68	129	70%	90	6,120
69	39	85%	33	2,277
70	6	100%	6	420
			<u>1,000</u>	<u>63,988</u>

Sum of Column (5), Divided by Age 55 Exposure
(Rounded to the Nearest Whole Year)

63,988 / 1,000
64

Attachment to 2022 Form 5500
Schedule SB, Part V – Summary of Plan Provisions

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Plan Provisions

Name of Plan: Tupperware Brands Corporation Base Retirement Plan.

Employer Identification Number / Plan Number: 36-4062333 / 001.

Effective Date: May 1, 1996. Amended and restated as of January 1, 2014.
Most recent plan amendment effective March 23, 2020.

Covered Employees: All United States employees who are not covered by a collective bargaining agreement or do not participate in other Company sponsored pension, profit sharing, or retirement plans participate after one year of service.

Plan Freeze: Effective June 30, 2005, the plan was closed to new hires and benefit accruals for current participants were frozen as of June 30, 2005.

Definitions:

Vesting service/pension service: Generally, an employee receives service credit for eligibility, vesting and benefit accrual for all periods of eligible employment with the Company. An Hour of Service is credited when an employee is directly or indirectly paid or entitled to payment by the Company for the performance of duties subject to additional credit (with limitations) for pay without performance of duties such as vacation, sickness or disability.

Pensionable pay: Total wages, salaries, commissions and bonuses, plus elective deferrals under IRC Sections 125 and 401(k), excluding severance pay, accrued vacation pay and other payments by reason of termination of employment, as well as non-cash compensation, long-term incentive compensation and reimbursement of expenses.

Normal retirement date (NRD): First of the month following attainment of age 65.

Monthly pension benefit: A monthly income for life equal to the greater of (1) 1/12 of 1% of total compensation after January 1, 1989 plus 1/12 of 3/4% of total compensation between January 1, 1975 to December 31, 1988 plus 1/12 of 1/2% of the first annual total compensation between January 1, 1973 and January 1, 1975 times service prior to January 1, 1975 (less other plan amount), or (2) if service was at least 15 years as of December 31, 1989, \$120 increased or decreased by \$4.00 for each year of service more or less than 30 (less other plan amount). Service includes all service since hire.

Attachment to 2022 Form 5500
Schedule SB, Part V – Summary of Plan Provisions

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Plan Provisions (continued)

Monthly pre-retirement spouse death benefit: The spouse of an active or terminated vested participant who dies prior to his/her pension commencement date may receive a benefit equal to 50% of the vested accrued benefit to which the participant would have been entitled had he/she terminated on the day immediately preceding his/her death and elected to receive his/her pension in the Joint and 50% Survivor form of annuity commencing on a date elected by the spouse (but no earlier than the participant's earliest pension commencement date, had he/she lived).

Eligibility for Benefits:

Normal retirement: Retire on NRD.

Early retirement: Retire before NRD and on or after both attaining age 55 and completing 10 years of vesting service.

Postponed retirement: Retire after NRD.

Disability retirement: Any participant who is determined to be unable to perform work due to a physical or mental disability that qualifies such participant for, and such participant is receiving, disability benefits under the Company's long-term disability plan or under Title II or Title XVI of the Federal Social Security Act shall be entitled to receive a disability retirement. The above determination shall be made by the Administrative Committee. Such participant may begin to receive his vested amount beginning on the first of the month following the later of his 55th birthday or the date the application for benefits is filed, but no later than NRD.

Deferred vested: Terminate for reasons other than death, disability or retirement after completing 5 years of vesting service.

Pre-retirement spouse benefit: Death while eligible for Normal, Early, Postponed, or Deferred Vested Retirement benefits, with a surviving spouse.

Monthly Benefits Paid Upon the Following Events:

Normal retirement: Monthly Pension Benefit determined as of NRD, payable immediately.

Early retirement: The accrued vested normal retirement benefit reduced by 4/10% for each month early retirement precedes age 62 and 2/10% for each month from age 62 to age 65.

Attachment to 2022 Form 5500
Schedule SB, Part V – Summary of Plan Provisions

Plan Name Tupperware Brands Corporation Base Retirement Plan **EIN:** 36-4062333
Plan Sponsor's Name Tupperware Brands Corporation **PN:** 001

Plan Provisions (continued)

Postponed retirement: Monthly pension benefit determined as of actual retirement date, payable immediately.

Disability retirement: The accrued normal retirement benefit deferred to age 65, or if elected, payments reduced in the same manner as early retirement benefits and paid any time after age 55.

Termination with deferred vested benefit 100% of the accrued normal retirement benefit after five years of service, age 60 and one year of service, or age 65. Payments are deferred to age 65, or if eligible for deferred vested early retirement (i.e. completion of 10 years of vesting service), accrued benefit is reduced by 4/10% for each month benefit commencement precedes age 65.

Death with pre-retirement spouse benefit: Monthly pre-retirement spouse benefit is payable. See above.

Forms of Payment: For those participants with a qualified spouse at retirement, benefits must be paid in the form of a 50% Joint and Survivor annuity unless the spouse consents to an optional form.

Single participants and married participants with spousal consent have the following options:

- (a) life annuity;
- (b) 100% Joint and Survivor annuity; or
- (c) 75% Joint and Survivor annuity; or
- (d) 66-2/3% Joint and Survivor annuity; or
- (e) ten-year certain and life annuity; or
- (f) lump sum.

For those participants who are vested upon termination and whose present value of accrued benefits is \$5,000 or less, a lump sum payment is made immediately, without participant or spousal consent.

Maximum on Benefits and Pay: All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for adjusting the dollar limits automatically as such changes become effective (as indexed by the Secretary of the Treasury). The plan recognizes the increased limits on benefits and pay as established by the Economic Growth and Tax Relief Reconciliation Act of 2001.

Tupperware Brands Corporation Base Retirement Plan

**Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2022**

Employer Identification Number: 36-4062333

Plan Number: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Shares	Cost	Current Value
	Common collective trust:			
* Fidelity Institutional Asset Management	Pension Journey 60/40 Commingled Pool	1,449,921	\$ 18,251,956	\$ 17,051,071
Total assets held			\$ 18,251,956	\$ 17,051,071

* Designates party in interest.

The above information has been certified by Fidelity Management Trust Company, the trustee, to be complete and accurate.