Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] 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
KIMBERLY-CLARK CORPORATION 401(K) & PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 016

1c Effective date of plan 01/01/2010

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)
KIMBERLY-CLARK CORPORATION

2100 WINCHESTER ROAD
NEENAH, WI 54957

2b Employer Identification Number (EIN)
39-0394230

2c Plan Sponsor's telephone number
865-541-7000

2d Business code (see instructions)
339900

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/08/2026	ALISA HUNT
	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

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	17038
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	11273
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	10736
b	Retired or separated participants receiving benefits	**6b**	755
c	Other retired or separated participants entitled to future benefits	**6c**	4899
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	16390
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	109
f	Total. Add lines **6d** and **6e**.	**6f**	16499
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	16993
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	16463
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 2J 2K 2O 2R 2S 2T 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

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

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
KIMBERLY-CLARK CORPORATION 401(K) & PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 016

C Plan sponsor's name as shown on line 2a of Form 5500
KIMBERLY-CLARK CORPORATION

D Employer Identification Number (EIN)
39-0394230

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

AMERIPRISE TRUST COMPANY

41-6219335

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

FID INV INST OPS CO

04-2647786

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

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

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

STRATEGIC ADVISORS

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 72	INV. ADVISORY	2406629	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

BLACKROCK INSTITUTIONAL TRUST CO,NA

94-3112180

(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?
21 24 28 50 51	INV. MANAGER	785641	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

NORTHERN TRUST CORPORATION

36-2723087

(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?
21 50	TRUSTEE	136779	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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)

FID INV INST OPS 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?
15 37 50 60 64 65 71	RECORDKEEPER	113026	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

BDO USA, P.C.

13-5381590

(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?
10 50	ACCOUNTANT	79500	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

HEWITT FINANCIAL SERVICES LLC

36-3943169

(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?
33 61 63	BROKER	59981	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

CURCIO WEBB

36-4171366

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	CONSULTANT	24585	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PRINTEDGE

62-1142356

(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?
38 50	COMMUNICATIONS	13185	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SIMPLY CONNECT CONSULTING

27-2424795

(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?
38 50	COMMUNICATIONS	12314	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
AMERIPRISE TRUST COMPANY	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE FUNDS COMPANY 41-6219335	SUB-TRANSFER AGENCY FEES SEE ATTACHMENT TO LINE 2(H) FOR FORMULAS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FID INV INST OPS SO	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE MUTUAL FUND COMPANIES 04-2647786	SUB-TRANSFER AGENCY FEES SEE ATTACHMENT TO LINE 2(H) FOR FORMULAS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
BLACKROCK INST TRUST CO	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE MUTUAL FUND COMPANIES 94-3112180	SUB-TRANSFER AGENCY FEES SEE ATTACHMENT TO LINE 2(H) FOR FORMULAS

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
NORTHERN TRUST	71	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
MULTIPLE BROKERS 36-2723087	SUB-TRANSFER AGENCY FEES SEE ATTACHMENT TO LINE 2(H) FOR FORMULAS	

(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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
KIMBERLY-CLARK CORPORATION 401(K) & PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 016

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
KIMBERLY-CLARK CORPORATION

D Employer Identification Number (EIN)
39-0394230

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

a Name of MTIA, CCT, PSA, or 103-12 IE:	COLLECTIVE GOVERNMENT SHORT TERM IN		
b Name of sponsor of entity listed in (a):	NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-068	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	6100000
a Name of MTIA, CCT, PSA, or 103-12 IE:	CT MONEY MARKET FUND Z		
b Name of sponsor of entity listed in (a):	AMERIPRISE TRUST COMPANY		
c EIN-PN 41-0007957-057	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	15903000
a Name of MTIA, CCT, PSA, or 103-12 IE:	CT STABLE GOVERNMENT FUND Z		
b Name of sponsor of entity listed in (a):	AMERIPRISE TRUST COMPANY		
c EIN-PN 41-0007957-056	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	53907000
a Name of MTIA, CCT, PSA, or 103-12 IE:	CT STABLE INCOME FUND Z		
b Name of sponsor of entity listed in (a):	AMERIPRISE TRUST COMPANY		
c EIN-PN 41-0007957-055	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	142208000
a Name of MTIA, CCT, PSA, or 103-12 IE:	MONEY MARKET FUND Z		
b Name of sponsor of entity listed in (a):	AMERIPRISE TRUST COMPANY		
c EIN-PN 41-0007957-054	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	106381000
a Name of MTIA, CCT, PSA, or 103-12 IE:	U.S. DEBT INDEX FUND F		
b Name of sponsor of entity listed in (a):	BLACKROCK INSTITUTIONAL TRUST CO		
c EIN-PN 94-3291425-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	502153000
a Name of MTIA, CCT, PSA, or 103-12 IE:	RUSSELL 1000 INDEX FUND F		
b Name of sponsor of entity listed in (a):	BLACKROCK INSTITUTIONAL TRUST CO		
c EIN-PN 94-3357216-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	815804000

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 VALUE INDEX FUND F

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

c EIN-PN 94-3330726-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 486483000

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 GROWTH INDEX FUND F

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

c EIN-PN 94-3330725-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 910396000

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 INDEX FUND F

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

c EIN-PN 94-3318704-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 207673000

a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI ACWI EX-US IMI INDEX FUND F

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

c EIN-PN 27-4955447-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 638742000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX TARGET CONSERVATIVE

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

c EIN-PN 71-0986421-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 135902000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2030 FUND F

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

c EIN-PN 71-0986424-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 80433000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2035 FUND F

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

c EIN-PN 20-5114956-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 184192000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2040 FUND F

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

c EIN-PN 71-0986419-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 98184000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2045 FUND F

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

c EIN-PN 20-5115008-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 154997000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2050 FUND F

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

c EIN-PN 26-0896020-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 92204000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2055 FUND F

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

c EIN-PN 27-2470604-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 90863000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2060 FUND F

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

c EIN-PN 47-1878775-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44445000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2065 FUND F

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

c EIN-PN 84-1770109-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17230000

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2070 FUND F

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

c EIN-PN 99-3702781-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1281000

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)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
KIMBERLY-CLARK CORPORATION 401(K) & PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 016

C Plan sponsor's name as shown on line 2a of Form 5500
KIMBERLY-CLARK CORPORATION

D Employer Identification Number (EIN)
39-0394230

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)	66988000	55300000
(2) Participant contributions	1b(2)	4528000	4414000
(3) Other	1b(3)	1514000	1574000
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4992000	6100000
(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)	37067000	39018000
(9) Value of interest in common/collective trusts	1c(9)	4244340000	4779382000
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	466113000	521437000

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	162609000	125975000
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	4988151000	5533200000
Liabilities			
1g Benefit claims payable	1g	14000	141000
1h Operating payables	1h	2545000	1010000
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	2559000	1151000
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	4985592000	5532049000

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)	117345000	
(B) Participants	2a(1)(B)	137263000	
(C) Others (including rollovers)	2a(1)(C)	23809000	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		278417000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	8696000	
(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)	3222000	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		11918000
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	6085000	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	10650000	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		16735000
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	1187892000	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	971335000	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		216557000
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	22143000	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		22143000

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		453705000
(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)		23617000
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1023092000
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	475096000	
(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)		475096000
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		20000
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	79000	
(5) Investment advisory and investment management fees	2i(5)	1151000	
(6) Bank or trust company trustee/custodial fees	2i(6)	254000	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	35000	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1519000
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		476635000
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		546457000
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) [X] 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)** [X] 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: BDO USA, P.C. **(2)** EIN: 13-5381590

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
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		35000000
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 [X] No

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

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
KIMBERLY-CLARK CORPORATION 401(K) & PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 016

C Plan sponsor's name as shown on line 2a of Form 5500
KIMBERLY-CLARK CORPORATION

D Employer Identification Number (EIN)
39-0394230

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): 04-6568107 36-3046063

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (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: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

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

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

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

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☒ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

KIMBERLY-CLARK CORPORATION 401(K) AND PROFIT SHARING PLAN

Employer ID 39-0394230
Plan ID 016

Financial Statements as of and for the Years Ended
December 31, 2025 and 2024

Supplemental Schedule
As of December 31, 2025

(With Independent Auditor's Report Thereon)

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NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

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Independent Auditor's Report

To the Plan Administrator
Kimberly-Clark Corporation 401(k) and Profit Sharing Plan
Dallas, Texas

Opinion

We have audited the financial statements of Kimberly-Clark Corporation 401(k) and Profit Sharing Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America (GAAP).

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 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 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.

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 available to be issued.

Management is responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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.

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BDO is the brand name for the BDO network and for each of the BDO Member Firms.

Auditor's Responsibilities for the Audit of the Financial Statements

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.

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.

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The ERISA-required Supplemental Schedule H, line 4i- Schedule of Assets (Held at End of Year) as of December 31, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under 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 has been subjected to the auditing procedures applied in the audits 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.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying supplemental schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

BDO USA, P.C.

Dallas, Texas
June 23, 2026

KIMBERLY-CLARK CORPORATION
401(K) AND PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

(Thousands of dollars)	December 31 2025	2024
Assets		
Investments at fair value	$ 5,432,894	$ 4,878,053
Receivables:		
Dividends and interest	1,574	1,514
Employee contributions	4,414	4,528
Employer matching contributions	3,451	3,686
Employer profit sharing contributions	51,849	63,303
Notes receivable from participants	40,200	38,229
Total Receivables	101,488	111,260
Total Assets	5,534,382	4,989,313
Liabilities		
Fees payable and pending disbursements	1,011	2,545
Total Liabilities	1,011	2,545
Net Assets Available for Benefits	$ 5,533,371	$ 4,986,768

See Notes to Financial Statements.

KIMBERLY-CLARK CORPORATION
401(K) AND PROFIT SHARING PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

(Thousands of dollars)	For the Year Ended December 31 2025	2024
Net Additions to Net Assets Available for Benefits		
Investment income:		
Net appreciation in fair value of investments	$ 716,023	$ 638,665
Dividends - Kimberly-Clark Corporation stock	6,085	6,233
Dividends - Self-Directed Brokerage Account ("SDBA")	10,650	9,481
Interest	8,695	10,442
Net investment income	741,453	664,821
Contributions:		
Employee contributions	161,072	157,019
Employer profit sharing contributions	51,849	63,303
Employer matching contributions	65,496	68,285
Total contributions	278,417	288,607
Interest on notes receivable from participants	3,222	2,771
Total Net Additions	1,023,092	956,199
Deductions from Net Assets Available for Benefits		
Benefits paid to participants	474,969	518,360
Administrative expenses	1,520	1,455
Total Deductions	476,489	519,815
Net Increase in Net Assets Available for Benefits	546,603	436,384
Net Assets Available for Benefits		
Beginning of Year	4,986,768	4,550,384
End of Year	$ 5,533,371	$ 4,986,768

See Notes to Financial Statements.

KIMBERLY-CLARK CORPORATION
401(K) AND PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Note 1. Description of the Plan

The following brief description of the Kimberly-Clark Corporation 401(k) and Profit Sharing Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

The financial statements represent the accounts of the Plan in conformity with accounting principles generally accepted in the United States of America ("GAAP").

General

The Plan, sponsored by Kimberly-Clark Corporation (the "Corporation"), was adopted effective January 1, 2010. It is a defined contribution plan covering eligible employees of the Corporation and its participating subsidiaries. The Plan is an employee stock ownership plan, as defined in Section 4975 of the Internal Revenue Code of 1986 (the "Code"). Salary, hourly non-union and hourly union (as bargained) employees of the Corporation and its participating U.S. subsidiaries (collectively, the "Employer") are eligible to participate in the Plan.

The Board of Directors of the Corporation or its delegate may change the eligibility and other provisions of the Plan from time to time. The assets of the Plan are held with The Northern Trust Company (the "Trustee"). The named fiduciary for the Plan is the Benefits Administration Committee (the "BAC"). The recordkeeper for the Plan is Fidelity Workplace Services LLC ("Fidelity").

Contributions

An eligible employee may elect to make contributions that are deducted from compensation paid by the Employer before federal income taxes are withheld ("401(k) contributions"), after-tax contributions, and Roth 401(k) contributions in any combination up to 50% in whole percentages of base salary. 401(k) contributions, after-tax contributions, and Roth 401(k) contributions in any combination up to 5% of base salary are eligible for Company Match Safe Harbor contributions ("Employer matching contributions") with the exception to hourly union participants located in Mobile Operations whose Company Match Safe Harbor contributions for a participant's pre-tax contributions, Roth 401(k) contributions or after-tax contributions remains on the first 4% of such participant's eligible earnings per pay period. Employees that are new hires or re-hires are automatically enrolled in the Plan at an 8% 401(k) contribution rate and have the option to opt out of the contribution.

Employer matching contributions are matched 100% on the first 5% of eligible earnings with the exception to hourly union participants located in Mobile Operations whose Company Match Safe Harbor Contributions for a participant's pre-tax contributions, Roth 401(k) contributions or after-tax contributions remains on the first 4% of such participant's eligible earnings per pay period. The Employer matching contributions are not required to meet anti-discrimination requirements and testing and do not require distinction of highly compensated employees. Employer matching contributions are accounted for separately and share in the net appreciation or depreciation in fair value of investments, dividends, interest and expenses in the same manner as contributions made by a participant. All Employer matching contributions are invested according to the participants' contribution investment elections. Employer matching contributions and future earnings (losses) on that amount can be reallocated to another investment fund within the Plan. Any forfeitures in the Plan are used to offset Employer contributions.

The Employer makes a discretionary annual profit sharing contribution for each eligible employee based on the Corporation's adjusted earnings per share performance from a range of 0% to 8% of eligible earnings. The contribution is deposited into participants' accounts as soon as administratively possible. The contributions related to the 2025 and 2024 targets were 3.8% and 4.5% of eligible earnings for each year and totaled $51.8 million and $63.3 million, respectively, and were deposited into participants' accounts within the first two months of the following year.

Employee contributions receivable as of December 31, 2025 of $4.4 million includes 401(k) contributions receivable of $2.9 million and after-tax, Roth 401(k) receivable, collectively, of $1.5 million. The employee contributions for the year ended December 31, 2025 of $161.1 million includes 401(k) contributions of $107.0 million and after-tax, Roth 401(k), and rollover contributions, collectively, of $54.1 million.

Employee contributions receivable as of December 31, 2024 of $4.5 million includes 401(k) contributions receivable of $2.9 million and after-tax, Roth 401(k) and rollover contributions receivable, collectively, of $1.6 million. The employee

contributions for the year ended December 31, 2024 of $157.0 million includes 401(k) contributions of $111.7 million and after-tax, Roth 401(k), and rollover contributions, collectively, of $45.3 million.

Participant Accounts

Individual accounts are maintained for each Plan participant. Each participant's account is credited with the employee's contributions, the Employer matching contributions, profit sharing contributions, and Plan earnings and losses, less expenses.

Investments

All investment elections are held by the Trustee and employee contributions allocated to a specific fund are commingled with those of other participants and are invested in accordance with the nature of the specific fund. Pending such investment, the Trustee is authorized to invest in short-term securities of the United States of America or in other investments of a short-term nature. Employees can elect to have their contributions in any of the 19 fund options available. The fund options consist of Kimberly-Clark Corporation Stock Fund ("K-C Stock Fund"), two different collective funds offered by Columbia Management (formerly Ameriprise), which are the Money Market and Stable Income Fund, and 16 collective funds offered by BlackRock which include the Russell 1000 Value Index Fund F, Russell 2000 Index Fund F, Russell 1000 Growth Index Fund F, U.S. Debt Index Fund F, Russell 1000 Index Fund F, MSCI ACWI ex-U.S. IMI Index Fund F, and 10 LifePath Index Fund F funds which are the Target Conservative Fund, 2030 Fund, 2035 Fund, 2040 Fund, 2045 Fund, 2050 Fund, 2055 Fund, 2060 Fund, 2065 Fund, and 2070 Fund. The participant can also choose from a broad range of funds and certain other investments offered through a brokerage account.

Vesting

Employees are immediately vested in their 401(k), after-tax, Roth 401(k), and rollover contributions as well as Employer matching contributions and profit sharing contributions.

Participant Loans

Participants may borrow from their fund accounts a minimum of $1 thousand up to a maximum of 50% or $50 thousand of their vested account balance, whichever is less. The loans are secured by the balance in the participant's account and bear interest at the prime +1% interest rate as published in the Wall Street Journal on the 15th of the month prior to the first day of the month to which it applies. Principal and interest is paid ratably through payroll deductions. A participant may have only one outstanding loan. A loan processing fee of $50 is charged to the participant. A loan may be a general purpose loan which must be repaid within a maximum of four years, or a primary residence loan, which must be repaid within a maximum of 10 years.

Distributions

Upon termination of a participant's employment, or because of death, the value of the participant's accounts, including the value of all Employer matching and profit sharing contributions, is distributable in either a lump sum, partial amount or systematic withdrawal per the participant's request. An automatic distribution will occur within 90 days if the participant's balance is $7 thousand or less. If the balance is $1 thousand or less, the distribution will be in the form of cash. If the balance is $7 thousand or less but more than $1 thousand, the balance will automatically be rolled over into an Individual Retirement Account ("IRA") with Fidelity.

A participant invested in the K-C Stock Fund earns dividends quarterly and has the option to reinvest the dividends earned into the fund or receive a distribution. Dividends distributed to participants during the years ended December 31, 2025 and 2024 were $1.5 million and $1.5 million, respectively, and are included in benefits paid to participants on the Statements of Changes in Net Assets Available for Benefits.

Withdrawals

An employee may withdraw the value of their after-tax accounts and Employer matching contributions after being in the Plan for 24 months. Subject to certain conditions, a participant may withdraw the value of 401(k) contributions, Roth 401(k) contributions, Employer matching contributions, profit sharing, and earnings credited in the case of hardship or after attaining age 59½.

K-C Stock Fund

A participant has the right to direct the Trustee as to the manner in which to vote at each annual meeting and special meeting of the stockholders of the Corporation the number of whole shares of the Corporation's common stock held by the Trustee and attributable to his or her K-C Stock Fund account as of the valuation date coincident with the record date for the meeting. In addition, the participant has the right to determine whether whole shares of the Corporation's common stock held by the Trustee and attributable to his or her K-C Stock Fund account should be tendered in response to offers thereof.

The K-C Stock Fund is allocated to participants using a unit value, which is calculated using the stock's year end market price plus cash held in a collective short-term investment fund.

Note 2. Accounting Principles and Practices

Basis of Accounting

The accompanying financial statements for the Plan have been prepared on the accrual basis and are in accordance with the accounting principles generally accepted in the United States of America ("U.S. GAAP") for defined contribution benefit plans. The significant accounting policies employed in the preparation of the accompanying financial statements are described below.

Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

All investments are stated at fair value. The Plan primarily invests in collective funds that have underlying investments and the fair value is determined by the Plan's proportionate share of the underlying investments and is estimated using the net asset value (the "NAV") per share. The fair value of the Corporation's common stock held by the Plan is determined as the last selling price on the last business day of the year, as published by an independent source. Security transactions are recorded on the trade date. Cash and cash equivalents include a collective short-term investment fund for pending transactions which is recorded at fair value using the NAV per share as well as certificates of deposit and other interest bearing investments that are recorded at cost, which approximates fair value. 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.

Notes Receivable from Participants

Notes receivable from participant loans are valued at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis.

Administrative Expenses

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

Benefits Paid to Participants

Distributions are recorded when paid. Amounts allocated to accounts of participants who have elected to withdraw from the Plan, but have not yet been paid, were insignificant at December 31, 2025 and 2024.

Contributions

Employee and Employer matching contributions are recorded in the period in which the Employer makes the payroll deductions from the participant's earnings. Employer profit sharing contributions are recognized in the year in which the compensation relates.

Note 3. Fair Value Measurements

The following fair value information is based on a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The three levels in the hierarchy used to measure fair value are:

Level 1 – Unadjusted quoted prices in active markets accessible at the reporting date for identical assets and liabilities.

Level 2 – Quoted prices for similar assets or liabilities in active markets. Quoted prices for identical or similar assets and liabilities in markets that are not considered active or financial instruments for which all significant inputs are observable, either directly or indirectly.

Level 3 – Prices or valuations that require inputs that are significant to the valuation and are unobservable.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

The following tables set forth by level, within the fair value hierarchy, a summary of the Plan's investments measured at fair value as of December 31, 2025 and 2024. As of December 31, 2025 and 2024, approximately 88% of the assets, are held in collective funds and are measured using NAV as a practical expedient. Accordingly, such assets do not meet the Level 1, Level 2 or Level 3 criteria of the fair value hierarchy.

	December 31 2025	Fair Value Measurements		NAV
		Level 1	Level 2	
	(Thousands of dollars)			
Cash and cash equivalents	$ 83,787	77,687	$ —	$ 6,100
Kimberly-Clark Corporation stock	125,975	125,975	—	—
SDBA	443,750	441,026	2,724	—
Common collective trusts	4,779,382	—	—	4,779,382
Total Investments at Fair Value	$ 5,432,894	$ 644,688	$ 2,724	$ 4,785,482

	December 31 2024	Fair Value Measurements		NAV
		Level 1	Level 2	
	(Thousands of dollars)			
Cash and cash equivalents	$ 79,546	74,554	$ —	$ 4,992
Kimberly-Clark Corporation stock	162,609	162,609	—	—
SDBA	391,559	388,846	2,713	—
Common collective trusts	4,244,339	—	—	4,244,339
Total Investments at Fair Value	$ 4,878,053	$ 626,009	$ 2,713	$ 4,249,331

As of December 31, 2025 and 2024, there were no assets with a Level 3 fair value determination. The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. The Plan's policy is to recognize significant transfers between levels at the end of the year. The significance of transfers between levels is evaluated based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. During the years ended December 31, 2025 and 2024, there were no significant transfers between level 1 or 2 fair value determinations.

The following is a description of the valuation methodologies used for the Plan's investments measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Cash and cash equivalents: The cash and cash equivalents include cash liquidity held in the SDBA. The valuation of the cash and cash equivalents is classified as level 1. Cash and cash equivalents also include cash associated with the K-C Stock Fund and the clearing account which are invested in a collective short-term investment fund. The fair value of the collective short-term investment fund is based on NAV as a practical expedient.

Kimberly-Clark Corporation stock: The K-C Stock Fund investments are held directly by the Plan. The fair value of the Corporation's common stock is determined based on the closing unadjusted quoted price as of the end of the year.

SDBA: The account consists primarily of mutual funds and common stocks that are valued on the basis of readily determinable market prices.

Collective funds: Composed of a money market fund, stable income fund, fixed income fund, equity funds and multi-asset class funds. The fair value of each fund is determined by multiplying the net asset value per unit by the number of units held by the Plan. The net asset value is based on the values of the underlying securities and cash held in the fund.

Note 4. NAV Per Share

The following table for December 31, 2025 and 2024, sets forth a summary of the Plan's investments with a reported NAV.

			Fair Value Estimated Using NAV per Share			
Investment	**December 31 2025 Fair Value [a]**	**December 31 2024 Fair Value [a]**	**Unfunded Commitment**	**Redemption Frequency**	**Other Redemption Restrictions**	**Redemption Notice Period**
	(Thousands of dollars)					
Short-term investment funds [b]	$ 6,100	$ 4,992	$ —	Daily	None	Daily
Fixed income funds [c]	820,553	791,150	—	Daily	None	Daily
Multi-asset class funds [d]	899,731	742,636	—	Daily	None	Daily
Equity index funds [e]	3,059,098	2,710,553	—	Daily	None	Daily

[a] The fair values of the investments have been estimated using the NAV of the investment.

[b] Short-term investment fund strategies seek to invest in high-quality, short-term securities which are included in cash and cash equivalents.

[c] The fixed income fund strategy seeks to replicate the Barclays Bloomberg U.S. Aggregate Bond Index or provide capital preservation and income.

[d] Multi-asset class funds are target date funds that seek to provide a diversified asset allocation consistent with the participants' current stage of life.

[e] Equity index fund strategies seek to replicate the return of an index of a specific financial market, such as the Russell 1000 Index or Russell 2000 Index.

Note 5. Related Party and Party-In-Interest Transactions

At December 31, 2025, the Plan held 1.2 million shares of the Corporation's common stock at a fair value of $126.0 million. During the year ended December 31, 2025, 0.2 million shares were acquired and 0.2 million shares were sold. At December 31, 2024, the Plan held 1.2 million shares of the Corporation's common stock at a fair value of $162.6 million. During the year ended December 31, 2024, 0.3 million shares were acquired and 0.4 million shares were sold. All of these transactions are exempt from the prohibitions against party-in-interest transactions under ERISA. Notes receivable are secured by the vested balance of participant accounts, and, as such, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for the investment management services are included in net appreciation (depreciation) in fair value of investments.

Note 6. Plan Termination

Although it has not expressed any intention to do so, the Corporation 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.

Note 7. Federal Income Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Corporation in a letter dated October 18, 2017, that the Plan and the related trust were designed in accordance with the applicable requirements of the Code. The Plan satisfies the requirement of Section 401(a) of the Code and Plan management is not aware of any Plan provision that would result in disqualification. The federal income tax status of participants with respect to the Plan is as follows: A participant's after-tax and Roth contributions, in whatever form, are not tax-deductible by the participant; however, the portion of a distribution attributable to such contributions is not taxable upon distribution. Participant pre-tax 401(k) contributions are considered contributions by the Employer rather than the participant and, as a result, are not taxable until the year in which they are distributed. Employer contributions and the earnings on employer and participant contributions are generally not taxable to the participant until the year in which they are distributed.

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 an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8. Changes to the Plan

During the years ended December 31, 2025 or 2024, the Plan was not amended.

Effective January 1, 2026 the Plan was amended as follows:- (1) Add a two year vesting schedule for Eligible Employees hired on or after January 1,2026, which applies to the Company Match and Profit Sharing Contributions; (2) Adopt of a Qualified Automatic Contribution Arrangement (QACA) safe harbor design which auto enrolls new hires at an 8% deferral rate and increases their contribution rate by 1% each December up to a maximum of 15%; (3) Add Elapsed Time Method for crediting of service, replacing the actual method; (4) Add Mobile Hourly Union Employees will receive Company Matching Contributions of 100% on the first 5% of eligible earnings contributed; (5) Add mandatory Roth catch-up contributions required for participants age 50+ with prior year FICA wages exceeding $150,000 (subject to IRS adjustments); (6) Add enhanced catch-up contribution limits for participants ages 60–63; (7) Provide that dividends from the K-C Stock Fund will not immediately vest. Dividends will follow the two year vesting schedule; and (8) Amend and restate administrative provisions to implement the new safe harbor design and other design elements articulated above.

Note 9. Reconciliation of Financial Statements to Form 5500

Benefit payments requested by participants are recorded on the Form 5500 for benefit payments that have been processed and approved for payment prior to year end, but not yet paid as of that date.

The following is a reconciliation of benefits paid to Plan participants per the financial statements for the year ended December 31, 2025, to Form 5500:

	December 31, 2025
	(Thousands of dollars)
Benefits paid to participants per the financial statements	$ 474,969
Add: Benefit payments requested by participants at December 31, 2025	141
Less: Benefit payments requested by participants at December 31, 2024	(14)
Benefits paid to participants for Form 5500	$ 475,096

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2025 and 2024 to Form 5500:

	December 31	
	2025	2024
	(Thousands of dollars)	
Net assets available for benefits per the financial statements	$ 5,533,371	$ 4,986,768
Less: Deemed distributions from outstanding participant loans with no repayment	(1,181)	(1,162)
Less: Benefit payments requested by participants	(141)	(14)
Net assets available for benefits per Form 5500	$ 5,532,049	$ 4,985,592

The following is a reconciliation of expenses per the financial statements for the year ended December 31, 2025 to Form 5500:

	December 31, 2025
	(Thousands of dollars)
Total deductions per the financial statements	$ 476,489
Add: Deemed distribution on outstanding participant loans at December 31, 2025	1,181
Less: Deemed distribution on outstanding participant loans at December 31, 2024	(1,162)
Add: Benefit payments requested by participants at December 31, 2025	141
Less: Benefit payments requested by participants at December 31, 2024	(14)
Total expense per Form 5500	$ 476,635

Note 10. Risks and Uncertainties

Plan assets are invested in funds and securities as directed by Plan participants. These investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Accordingly, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

Note 11. Subsequent Events

The Plan has evaluated subsequent events through June 23, 2026, the date the financial statements were available to be issued, and there are none to report.

SUPPLEMENTAL INFORMATION REQUIRED
BY THE DEPARTMENT OF LABOR'S RULES AND REGULATIONS FOR
REPORTING AND DISCLOSURE UNDER THE
EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974

KIMBERLY-CLARK CORPORATION
401(K) AND PROFIT SHARING PLAN
SCHEDULE H, PART IV, 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SPONSOR'S EIN: 39-0394230
PLAN NAME/NUMBER: Kimberly-Clark Corporation 401(K) and Profit Sharing Plan / 016

Identity of Investment Issuer	Description of Investment	December 31, 2025 Fair Value (Thousands of dollars)
The Northern Trust [1]	Collective Fund:	
	Collective Government Short-Term Investment Fund	$ 6,100
		6,100
Columbia Management	Collective Funds:	
	CT Money Market Fund Z	122,285
	CT Stable Government Fund Z	53,907
	CT Stable Income Fund Z	142,208
		318,400
BlackRock	Collective Funds:	
	U.S. Debt Index Fund F	502,153
	Russell 1000 Index Fund F	815,804
	Russell 1000 Value Index Fund F	486,483
	Russell 1000 Growth Index Fund F	910,396
	Russell 2000 Index Fund F	207,673
	MSCI ACWI ex-U.S. IMI Index Fund F	638,742
	LifePath Index Target Conservative Fund F	135,902
	LifePath Index 2030 Fund F	80,433
	LifePath Index 2035 Fund F	184,192
	LifePath Index 2040 Fund F	98,184
	LifePath Index 2045 Fund F	154,997
	LifePath Index 2050 Fund F	92,204
	LifePath Index 2055 Fund F	90,863
	LifePath Index 2060 Fund F	44,445
	LifePath Index 2065 Fund F	17,230
	LifePath Index 2070 Fund F	1,281
		4,460,982
K-C[1]	Kimberly-Clark Corporation Common Stock	125,975
Fidelity [1]	Self-Directed Brokerage Account	521,437
The Northern Trust [1]	Notes receivable from participants rate of interest (4.25% - 9.5%) maturity dates (January 2026 - December 2035)	39,018
Total Investments		$ 5,471,912

[1] Sponsor and/or issuer known to be a party-in-interest to the Plan.
Cost is not presented as all investments are participant directed.
See accompanying independent auditor's report.

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
AB INCOME FUND ADVISOR	8000 IH 10 W	STE 1400	SAN ANTONIO	TX	78230	0.15%
AB INCOME FUND CL A	8000 IH 10 W	STE 1400	SAN ANTONIO	TX	78230	0.40%
ABERDEEN DYNAMIC DIVIDEND INSTL	1735 MARKET ST	32ND FL	PHILADELPHIA	PA	19103	0.15%
ADVISORS CAPITAL ACTIVE ALL CAP FD	100 SALEM ST		SMITHFIELD	RI	02917	0.40%
ADVISORS CAPITAL GROWTH FUND	100 SALEM ST		SMITHFIELD	RI	02917	0.40%
ADVISORS CAPITAL INTERNATIONAL FUND	100 SALEM ST		SMITHFIELD	RI	02917	0.40%
ADVISORS CAPITAL TACTICAL FX INC INVS	100 SALEM ST		SMITHFIELD	RI	02917	0.40%
ALGER CAPITAL APPRECIATION CL Z	600 PLAZA ONE	6TH FL	JERSEY CITY	NJ	07311	0.10%
ALLSPRING DISCIPLINEUS CORE FD A	525 MARKET ST MAC A0103 122		SAN FRANCISCO	CA	94105	0.40%
ALLSPRING GROWTH FUND A	525 MARKET ST MAC A0103 122		SAN FRANCISCO	CA	94105	0.40%
ALLSPRING SPECIAL MID CAP VLUE FD A	525 MARKET ST MAC A0103 122		SAN FRANCISCO	CA	94105	0.40%
ALLSPRING SPECIAL MID CAP VLUE INST	525 MARKET ST MAC A0103 122		SAN FRANCISCO	CA	94105	0.15%
AMANA MUTUAL FUND TRUST GROWTH	1300 NORTH STATE ST		BELLINGHAM	WA	98225	0.40%
AMERICAN 2035 TARGETDATE RETIREMNT F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN 2040 TARGETDATE RETIREMNT F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN AMCAP CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN BALANCED CLASS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN BEACON ARK TRANS INNOVTN INVSTR	220 E LAS COLINAS BLVD	STE 1200	IRVING	TX	75039	0.40%
AMERICAN BEACON DEV WORLD INCOME INV	220 E LAS COLINAS BLVD	STE 1200	IRVING	TX	75039	0.40%
AMERICAN BOND FUND OF AMERICA CL F2	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.15%
AMERICAN BOND FUND OF AMERICA CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN CAPITAL INCOME BUILDER CL A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN CAPITAL WORLD GRTH & INC A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN CAPITAL WORLD GRWTH & INC F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN CEN FOCUSEDDYNAMIC GROWTH INV	4400 MAIN ST 1ST FL		KANSAS CITY	MO	64111	0.35%
AMERICAN CENTURY EQUITY INCOME INV CL	4400 MAIN ST 1ST FL		KANSAS CITY	MO	64111	0.35%
AMERICAN EUPAC CL F2	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.15%
AMERICAN EUPAC F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN EUROPAC FD A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN FUNDAMENTALINVESTORS CL F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN FUNDAMENTALINVESTORS CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
AMERICAN GROWTH FUNDOF AMERICA CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN GROWTH FUNDOF AMERICA CLASS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN INTERNATL GROWTH & INCOME F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN INVESTMENT CO OF AMERICA CL F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN INVESTMNT CO OF AMERICA CL A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN MUTUAL FUNDCLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN MUTUAL FUNDCLASS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN NEW PERSPECTIVE CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN NEW PERSPECTIVE CLASS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN NEW WORLD CLASS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN NEW WORLD FUND CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN SMALL CAP WORLD CLASS A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMERICAN WASHINGTON MUTUAL INVESTORS F1	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.37%
AMERICAN WASHINGTON MUTUAL INVESTORS F2	3500 WISEMAN BLVD		SAN ANTONIO	TX	782514321	0.15%
AMERICAN WASHNTN MUTUAL INVESTRS CL A	3500 WISEMAN BLVD		SAN ANTONIO	TX	78251	$18.00
AMG GW&K SMALL CAP VALUE CLASS N	600 STEAMBOAT RD	STE 300	GREENWICH	CT	06830	0.40%
AMG YACKTMAN FOCUSED N	600 STEAMBOAT RD	STE 300	GREENWICH	CT	06830	0.40%
AMG YACKTMAN FUND I	600 STEAMBOAT RD	STE 300	GREENWICH	CT	06830	0.40%
AQR MANAGED FUTURES FUND CL N	1 GREENWICH PLAZA		GREENWICH	CT	06830	0.40%
AVANTIS INTL SMALL CAP VALUE FUND	4400 MAIN ST 1ST FL		KANSAS CITY	MO	64111	0.05%
AVE MARIA VALUE FUND	801 W. ANN ARBOR TRAIL STE 244		PLYMOUTH	MI	48170	0.40%
BARON ASSET	767 5TH AVE 49TH FL		NEW YORK	NY	10153	0.40%
BARON EMERGING MARKETS FUND RETAIL	767 5TH AVE 49TH FL		NEW YORK	NY	10153	0.40%
BARON GROWTH FUND INSTL CLASS	767 5TH AVE 49TH FL		NEW YORK	NY	10153	0.10%
BARON OPPORTUNITY FUND	767 5TH AVE 49TH FL		NEW YORK	NY	10153	0.40%
BARON REAL ESTATE FUND INSTITUTIONAL	767 5TH AVE 49TH FL		NEW YORK	NY	10153	0.15%
BERKSHIRE FOCUS FUND	475 MILAN DR STE 103		SAN JOSE	CA	95134	0.40%
BLACKROCK ADVANTAGE SM CAP GROWTH INSTL	40 EAST 52ND ST		NEW YORK	NY	10022	0.08%
BLACKROCK EQUITY DIVIDEND FD CL A	40 EAST 52ND ST		NEW YORK	NY	10022	0.40%
BLACKROCK GL EQUITY MARKET NEUTRAL NSTL	40 EAST 52ND ST		NEW YORK	NY	10022	0.15%
BLACKROCK HEALTH SCIENCES OPP PRT I	40 EAST 52ND ST		NEW YORK	NY	10022	0.25%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
BLACKROCK MID CAP GROWTH EQUITY CL A	40 EAST 52ND ST		NEW YORK	NY	10022	0.40%
BLACKROCK TECHNOLOGYOPPORTUNITIES CL A	40 EAST 52ND ST		NEW YORK	NY	10022	0.40%
BNY MELLON APPRECIATION INVSTR	144 GLENN CURTISS BLVD 8TH FL		UNIONDALE	NY	11556	0.40%
BNY MELLON LARGE CAPSECURITIES FUND INC	144 GLENN CURTISS BLVD 8TH FL		UNIONDALE	NY	11556	0.35%
BROWN ADVISORY SUSTAIN GROWTH INV	777 E. WISCONSIN AVE	4TH FL	MILWAUKEE	WI	53202	0.08%
BUFFALO INTERNATIONAL FUND	615 E. MICHIGAN ST		MILWAUKEE	WI	53202	0.40%
CALVERT SMALL CAP CL I	4550 MONTGOMERY AVE STE 1000 N		BETHESDA	MD	20814	0.10%
CARILLON SCOUT MID CAP FUND CL I	P. O. BOX 33022		ST PETERSBURG	FL	337338022	0.40%
CLIPPER	2949 EAST ELVIRA ROAD	STE 101	TUCSON	AZ	85706	0.35%
COHEN & STEERS PREF SECURITIES INC A	280 PARK AVE	10TH FL	NEW YORK	NY	10017	0.40%
COHEN & STEERS PREF SECURITIES INCOME I	280 PARK AVE	10TH FL	NEW YORK	NY	10017	0.15%
COHEN & STEERS REALTY I	280 PARK AVE	10TH FL	NEW YORK	NY	10017	0.15%
COHEN & STEERS REALTY SHARES	280 PARK AVE	10TH FL	NEW YORK	NY	10017	0.40%
COHEN& STEERS GLBAL REALTY CL I	280 PARK AVE	10TH FL	NEW YORK	NY	10017	0.10%
COLUMBIA CONTRARIAN CORE S	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COLUMBIA DIVIDEND INCOME CL A	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COLUMBIA DIVIDEND INCOME FUND CL I2	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.15%
COLUMBIA EMERGING MARKETS FUND CL I2	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.10%
COLUMBIA GLOBAL TECHGROWTH S	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COLUMBIA OVERSEAS 19765N278D CL A	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COLUMBIA SELECT MID CAP VALUE S	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COLUMBIA SELIGMAN TECH AND INFO CL A	225 FRANKLIN ST	BX25 10320	BOSTON	MA	02110	0.40%
COMMERCE VALUE INSTITUTIONAL	922 WALNUT ST 4TH FL		KANSAS CITY	MO	64106	0.35%
CONESTOGA SMALL CAP INVESTOR CLASS	225 PICTORIA DR	STE 450	CINCINNATI	OH	45246	0.40%
CROMWELL CENTERSQUARREAL ESTATE INVESTOR	100 SALEM ST		SMITHFIELD	RI	02917	0.40%
DESTINATIONS CORE FIXED INCOME INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS EQUITY INCOME FD INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS GLOBAL FIXD INC OPPOR INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS INTL EQUITY FD INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS LARGE CAP EQUITY INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS LOW DURFIXED INC INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
DESTINATIONS MULTI STRGY ALT INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS REAL ASSETS FD INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DESTINATIONS SMALL MID CAP EQ INSTL	1055 WESTLAKES DR	STE 250	BERWYN	PA	19312	0.15%
DF DENT MIDCAP GROWTH FUND INSTL	2 EAST READ ST 6TH FL		BALTIMORE	MD	21202	0.12%
DFA EMERGING MARKETS TARGET VAL PORT INS	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA EMERGING MRKTS CORE EQU PORTF	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA FIVE YEAR GLBL FIXED INC PRTF INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA GLOBAL REAL ESTATE SEC PORTFOLIO	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA INTERNATIONAL CORE EQUITY	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA INTERNATIONAL SMALL COMPANY PORT	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA INT'L SMALL CAP VALUE	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA INVESTMENT GRADE PORTFOLIO INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA SHORT-DURATION REAL RETURN INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US CORE EQUITY I	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US HIGH RELATIVE PROFIT PORT INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US LARGE CAP VALUE PRTF INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US SMALL CAP PORTFOLIO INSTL CL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US SMALL CAP VALUE PRTF INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DFA US TARGETED VALUE PRTF INSTL	6300 BEE CAVES ROAD	BUILDING ONE	AUSTIN	TX	78746	0.02%
DOUBLELINE TOTAL RETURN BOND FD CL I	777 EAST WISCONSIN AVE		MILWAUKEE	WI	53202	0.06%
DOUBLELINE TOTAL RT BOND FD CL N	777 EAST WISCONSIN AVE		MILWAUKEE	WI	53202	0.40%
DRIEHAUS EMERGING MARKETS	25 EAST ERIE ST		CHICAGO	IL	60611	0.40%
DWS GLOBAL INFRASTRU FD -INST	280 PARK AVE	9TH FLR	NEW YORK	NY	10026	0.10%
EATON VANCE EMERGINGAND FRONT COUNT EQ I	TWO INTERNATIONAL PLACE		BOSTON	MA	02110	$16.00
EUROPAC GOLD FUND CLASS A	LOTS 81 82	ST C	DORADO	PR	00646	0.08%
FAIRHOLME FUND	4400 BISCAYNE BOULEVARD		SOUTH MIAMI	FL	33143	0.10%
FEDERATED HERMES KAUFMANN SM CAP A	4000 ERICSSON DR		WARRENDALE	PA	150867515	0.40%
FIRST EAGLE GLOBAL CLASS A	1345 AVE OF THE AMERICAS 48TH FLR		NEW YORK	NY	10105	0.40%
FIRST EAGLE GLOBAL CLASS I	1345 AVE OF THE AMERICAS 48TH FLR		NEW YORK	NY	10105	0.15%
FMI COMMON STOCK FUND	777 EAST WISCONSIN AVE		MILWAUKEE	WI	53202	0.40%
FMI INTERNATIONAL	777 EAST WISCONSIN AVE		MILWAUKEE	WI	53202	0.40%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
FMI LARGE CAP FUND	777 EAST WISCONSIN AVE		MILWAUKEE	WI	53202	0.40%
FPA CRESCENT FUND	11601 WILSHIRE BLVD	STE 1200	LOS ANGELES	CA	90025	0.35%
FRANKLIN GOLD AND PRECIOUS METALS CL A	100 FOUNTAIN PARKWAY		ST. PETERSBURG	FL	33716	$16.00
FRANKLIN LOW DURATN TOTAL RETURN CL A	100 FOUNTAIN PARKWAY		ST. PETERSBURG	FL	33716	$16.00
FRANKLIN MUTUAL GLBLDISCOVERY CLASS A	100 FOUNTAIN PARKWAY		ST. PETERSBURG	FL	33716	$16.00
FRANKLIN NATURAL RESOURCES A	100 FOUNTAIN PARKWAY		ST. PETERSBURG	FL	33716	$16.00
FRANKLIN SMALL-MID CAP GROWTH A	100 FOUNTAIN PARKWAY		ST. PETERSBURG	FL	33716	$16.00
GABELLI EQUITY INCOME FUND AAA	401 THEODORE FREMD. AVE.		RYE	NY	10580	0.35%
GABELLI INTL SMALL CAP FUND CL AAA	401 THEODORE FREMD. AVE.		RYE	NY	10580	0.40%
GABELLI SMALL CAP GROWTH AAA	401 THEODORE FREMD. AVE.		RYE	NY	10580	0.35%
GABELLI UTILITIES	401 THEODORE FREMD. AVE.		RYE	NY	10580	0.35%
GLOBAL RESOURCES FUND	3 CANAL PLAZA	STE 600	PORTLAND	ME	04101	0.40%
GOLDMAN SACHS GQG PART INTERNTL OPP A	71 S. WACKER DR	4TH FL	CHICAGO	IL	60606	0.40%
GOLDMAN SACHS INTL SM CAP INSIGHTS A	71 S. WACKER DR	4TH FL	CHICAGO	IL	60606	0.40%
GQG PARTNERS INTL QUALITY DIV INC INV	1 FREEDOM VALLEY DR		OAKS	PA	19456	0.40%
GUGGENHEIM FLOATING RATE STRATEGIES CL P	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.40%
GUGGENHEIM HIGH YIELD CL P	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.40%
GUGGENHEIM MACRO OPPORTUNITIES CL P	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.40%
GUGGENHEIM MACRO OPPORTUNTITIES INSTL	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.15%
GUGGENHEIM TOTAL RETURN BOND FD INSTL	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.15%
HARDING LOEVNER GLBLEQUITY PORT ADV CL	PO BOX 4766		CHICAGO	IL	60680	0.40%
HARTFORD CORE EQUITYCLASS A	100 MATSONFORD RD	STE 300	RADNOR	PA	19087	0.40%
HARTFORD DIVIDEND & GROWTH CLASS A	100 MATSONFORD RD	STE 300	RADNOR	PA	19087	0.40%
HARTFORD SCHRODERS INTL STOCK CL I	100 MATSONFORD RD	STE 300	RADNOR	PA	19087	0.15%
HARTFORD SCHRODERS US MID CAP OPP CL A	100 MATSONFORD RD	STE 300	RADNOR	PA	19087	0.40%
HARTFORD STRATEGIC INCOME FUND CL A	100 MATSONFORD RD	STE 300	RADNOR	PA	19087	0.35%
HCM MULTI ASSET PLUSINVESTOR	1145 HEMBREE ROAD		ROSWELL	GA	30076	0.40%
HCM SECTOR PLUS INVESTOR	1145 HEMBREE ROAD		ROSWELL	GA	30076	0.40%
HCM TACTICAL PLUS INVESTOR	1145 HEMBREE ROAD		ROSWELL	GA	30076	0.40%
HENNESSY CORNERSTONEGROWTH INV CL	7250 REDWOOD BLVD.	STE 200	NOVATO	CA	94945	0.40%
HENNESSY CORNERSTONEMID CAP 30 INV CL	7250 REDWOOD BLVD.	STE 200	NOVATO	CA	94945	0.40%

Schedule C, Line 2(h) Formula Descriptions

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EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
HOOD RIVER INTL OPPORTUNITY FUND INV	6001 SHADY OAK ROAD	SUITE 200	MINNETONKA	MN	55343	0.40%
HOTCHKIS & WILEY HIGH YIELD FUND CL A	725 S FIGUEROA 39TH FL		LOS ANGELES	CA	90017	0.40%
JANUS HENDERSON CONTRARIAN T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON DEVELOPED WORLD BD T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON ENTERPRISE T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON GLOB TECH & INNOV I	151 DETROIT ST.		DENVER	CO	80206	$15.00
JANUS HENDERSON MID CAP VALUE T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON OVERSEAS T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON SMALL CAP VALUE T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JANUS HENDERSON TRITON T	151 DETROIT ST.		DENVER	CO	80206	0.35%
JENSEN QUALITY GROWTH FD CL J	811 E. WISCONSIN AVE	8TH FL	MILWAUKEE	WI	53202	0.40%
JOHN HANCOCK GLOBAL ENVIR OPPORT FUND A	601 CONGRESS ST.	9TH FL.	BOSTON	MA	02210	0.40%
JP MORGAN INCOME BUILDER FUND CL A	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.38%
JP MORGAN MID CAP VALUE FUND CLASS I	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
JPMORGAN CORE BOND CLASS I	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.15%
JPMORGAN GROWTH ADVANTAGE FUND CL A	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
JPMORGAN HEDGED EQUITY CLASS I	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.15%
JPMORGAN INCOME BUILDER FUND CLASS I	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.08%
JPMORGAN LARGE CAP GROWTH CLASS A	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
JPMORGAN LARGE CAP VALUE FUND CLASS A	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
JPMORGAN U.S. GARP EQUITY FUND CL A	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
JPMORGAN U.S. GARP EQUITY FUND CL C	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.08%
JPMORGAN US LG CAP CORE PLUS CLASS I	1111 POLARIS PARKWAY		COLUMBUS	OH	43240	0.40%
LAZARD EMERGING MKTSEQUITY OPEN CL SHRS	30 ROCKEFELLER PLAZA	57TH FL.	NEW YORK	NY	10112	0.40%
LEUTHOLD GRIZZLY SHORT RETAIL	100 NORTH 6TH STREET	SUITE 600A	MINNEAPOLIS	MN	55403	0.40%
LONGLEAF SMALL CAP	6410 POPLAR AVE	STE 900	MEMPHIS	TN	38119	0.12%
LORD ABBETT SHORT DURATION HI YIELD A	90 HUDSON ST 10TH FL		JERSEY CITY	NJ	07302	0.37%
LORD ABBETT SHORT DURATION INCOME CL A	90 HUDSON ST 10TH FL		JERSEY CITY	NJ	07302	0.37%
MANNING & NAPIER PROBLEND MOD CL S	290 WOODCLIFF DR.		FAIRPORT	NY	14450	0.40%
MARSICO FOCUS	235 WEST GALENA ST		MILWAUKEE	WI	53212	0.40%
MARSICO GROWTH FUND	235 WEST GALENA ST		MILWAUKEE	WI	53212	0.40%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
MATTHEWS CHINA DIV FUND INVESTOR CLASS	4 EMBARCADERO CENTER STE 550		SAN FRANCISCO	CA	94111	0.40%
MATTHEWS CHINA SMALLCOMPANIES INVESTOR	4 EMBARCADERO CENTER STE 550		SAN FRANCISCO	CA	94111	0.40%
MATTHEWS EMERG MRKTSSM COMPANIES INVSTR	4 EMBARCADERO CENTER STE 550		SAN FRANCISCO	CA	94111	0.40%
MERIDIAN GROWTH FUND LEGACY	100 FILLMORE ST.		DENVER	CO	80206	0.12%
MFS GLOBAL HIGH YIELD CL I	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.08%
MFS INTERNATIONAL DIVERSIFICATION CL I	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.15%
MFS INTERNATIONAL GROWTH CLASS A	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.40%
MFS INTERNATIONAL INTRINSIC VALUE CL A	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.40%
MFS MASS INVESTOR GROWTH STOCK A	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.40%
MFS MID CAP GROWTH CLASS A	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.40%
MFS MID CAP VALUE FUND CL I	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.15%
MFS MODERATE ALLOCATION CLASS A	111 HUNTINGTON AVE		BOSTON	MA	021997632	0.40%
MORGAN STA INST INC. EMERGING MARKET CL	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.10%
MORGAN STANLEY DISCOVERY PORT CL A	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.40%
MORGAN STANLEY DISCOVERY PORT CL I	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.10%
MORGAN STANLEY GROWTH PORTFOLIO A	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.40%
MORGAN STANLEY INSIGHT A	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.40%
MORGAN STANLEY INSTLINTERNTL OPP CL A	522 FIFTH AVE	4TH FL	NEW YORK	NY	10036	0.40%
NATIONWIDE BNYM DYNAMIC US EQT INC K	1000 CONTINENTAL DR STE 400		COLUMBUS	OH	43215	0.40%
NEEDHAM AGGRESSIVE GROWTH	445 PARK AVE 15TH FL		NEW YORK	NY	10022	0.40%
NEUBERGER LARGE CAP VALUE INST	1290 AVE OF THE AMERICAS	22ND FL	NEW YORK	NY	101040002	0.15%
NOMURA INTL CORE EQUITY FUND CL A	2005 MARKET ST		PHILADELPHIA	PA	19103	0.40%
NORTH SQUARE SMALL CAP VALUE INVESTOR	10 SOUTH LASALLE STREET SUITE 1925		CHICAGO	IL	60603	0.40%
NORTHERN SMALL CAP VALUE	801 SOUTH CANAL	C5S	CHICAGO	IL	60675	0.40%
OAKMARK EQUITY & INCOME INVESTOR CL	111 SOUTH WACKER DR.		CHICAGO	IL	60606	0.35%
OAKMARK FUND INVESTOR CLASS	111 SOUTH WACKER DR.		CHICAGO	IL	60606	0.35%
OAKMARK GLOBAL SELECT FD INVESTOR	111 SOUTH WACKER DR.		CHICAGO	IL	60606	0.35%
OAKMARK INTL INVESTOR CL	111 SOUTH WACKER DR.		CHICAGO	IL	60606	0.35%
OBERWEIS CHINA OPPORTUNITIES FUND	3333 WARRENVILLE RD	STE. 500	LISLE	IL	60532	0.40%
OBERWEIS INTERNATNL OPPORTUNITIES INSTL	3333 WARRENVILLE RD	STE. 500	LISLE	IL	60532	0.08%
OBERWEIS MICRO CAP FUND	3333 WARRENVILLE RD	STE. 500	LISLE	IL	60532	0.40%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
OIL&GAS EQUIP&SERVICULTRASEC PROFUND INV	7501 WISCONSIN AVE	STE 1000 E TOWER	BETHESDA	MD	20814	0.40%
PARNASSUS CORE EQUITY INVESTOR	1 MARKET ST STEUART TOWER STE 1600		SAN FRANCISCO	CA	94105	0.40%
PARNASSUS MID CAP	1 MARKET ST STEUART TOWER STE 1600		SAN FRANCISCO	CA	94105	0.40%
PARNASSUS VALUE EQUITY INVESTOR	1 MARKET ST STEUART TOWER STE 1600		SAN FRANCISCO	CA	94105	0.40%
PERFORMANCE TRUST TOTAL RETRN BND INST	500 WEST MADISON	STE 470	CHICAGO	IL	60661	0.40%
PERMANENT PORTFOLIO	600 MONTGOMERY ST STE 4100		SAN FRANCISCO	CA	941112702	0.38%
PFG ACTIVE CORE BOND STRATEGY FUND CL R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG AMERICAN FDS CONS INC STRAT CL R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG AMERICAN FUNDS GROWTH STRAT CL R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG BNY MELLON DIVERSIFIER STRAT R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG BR TRGT ALLOCAT EQ STRATEGY FD CL R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG EQUITY INDEX FOCUSED STRATEGY R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG FIDELITY INST AMCORE PLUS BD STRG R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG GLOBAL EQUITY INDEX STRATEGY CL R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG INVESCO EQ FACTRROTATION STRATEGY R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG JANUS HENDERSON BALANCED STRATEGY R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG JANUS HENDERSON TACTICAL INC STRAT R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG JP MORGAN TACTICAGGRESSIVE STRAT R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG MEEDER TACTICAL STRATEGY FUND R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG MFS AGGRESSIVE GROWTH STRATEGY R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG SECTOR EQUITY BUS CYCLE STRAT R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PFG US EQUITY INDEX STRATEGY CLASS R	777 108TH AVE NE	STE 2100	BELLEVUE	WA	98004	0.25%
PGIM JENNISON SMALL COMPANY CL Z	655 BROAD ST		NEWARK	NJ	07102	0.10%
PGIM JENNISON UTILITY CL Z	655 BROAD ST		NEWARK	NJ	07102	0.10%
PGIM SHRT DUR MULTI- SECT BND CL Z	655 BROAD ST		NEWARK	NJ	07102	0.10%
PGIM TOTAL RETURN BOND CL A	655 BROAD ST		NEWARK	NJ	07102	0.40%
PIMCO ALL ASSET ALLAUTHORITY FD CL A	1633 BROADWAY		NEW YORK	NY	10019	0.40%
PIMCO ALL ASSET FUNDCLASS A	1633 BROADWAY		NEW YORK	NY	10019	0.40%
PIMCO INCOME CL I3	1633 BROADWAY		NEW YORK	NY	10019	0.15%
PIMCO INCOME FUND CL A	1633 BROADWAY		NEW YORK	NY	10019	0.40%
PIMCO STOCKSPLUS INTL US DOL HEDG I3	1633 BROADWAY		NEW YORK	NY	10019	0.10%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
PIMCO TOTAL RETURN CLASS A	1633 BROADWAY		NEW YORK	NY	10019	0.40%
PIN OAK EQUITY FUND	225 PICTORIA DR	STE 450	CINCINNATI	OH	45246	0.40%
PRECIOUS METALS ULTRA SEC PRO INVST	7501 WISCONSIN AVE	STE 1000 E TOWER	BETHESDA	MD	20814	0.40%
PRIMECAP ODYSSEY AGGRESSIVE GRWTH FD	2020 E. FINANCIAL WAY	STE 100	GLENDORA	CA	91741	0.10%
PRIMECAP ODYSSEY GROWTH FUND	2020 E. FINANCIAL WAY	STE 100	GLENDORA	CA	91741	0.10%
PRIMECAP ODYSSEY STO CK FUND	2020 E. FINANCIAL WAY	STE 100	GLENDORA	CA	91741	0.10%
PRINCIPAL REAL ESTATE SEC FD CL A	620 COOLIDGE DR	STE 300	FOLSOM	CA	95630	0.40%
PUTNAM LARGE CAP GROWTH FD CLASS A	1 POST OFFICE SQ MAILZONE G3C		BOSTON	MA	02109	0.40%
REGAN TOTAL RETURN INCOME FD INVESTOR	8350 N CENTRAL EXPRESSWAY	STE G108	DALLAS	TX	75206	0.40%
ROYCE SMALL-CAP OPPORTUNITY INVEST	745 FIFTH AVE STE 2400		NEW YORK	NY	10151	0.15%
ROYCE SMALL-CAP SPECEQUITY SERVICE CLASS	745 FIFTH AVE STE 2400		NEW YORK	NY	10151	0.40%
RYDEX INVERSE DOW 2XSTRATEGY CL A	9601 BLACKWELL RD STE 500		ROCKVILLE	MD	20850	0.40%
SELECTED AMERICAN SHARES CL D	2949 E. ELVIRA RD.		TUCSON	AZ	85706	$16.00
SHELTON NASDAQ 100 INDEX FD INSTL	P.O. BOX 87		DENVER	CO	802010087	0.10%
SHORT DURATION BOND CL S	1301 SECOND AVE 16TH FL		SEATTLE	WA	98101	0.25%
SOUND SHORE FD INC	8 SOUND SHORE DR	STE 180	GREENWICH	CT	06830	0.40%
SPYGLASS GROWTH FUND INSTL	ONE LETTERMAN DR		SAN FRANCISCO	CA	94129	0.10%
T ROWE PRICE ALL CAPOPPORTUNITIES INVST	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE BALANCED	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE BLUE CHIP GROWTH INC	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE CAP APPRECIATION	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE COMM & TECHNOLOGY INVESTOR	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE DIVIDEND GROWTH	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE EMERG MARKETS BOND FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE EMERGING EUROPE FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE EMERGING MKTS STOCK	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE EQUITY INCOME	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE FLOATING RATE INVEST	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE GLOBAL INDUSTRIALS INVESTOR	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE GLOBAL STOCK	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE GLOBAL TECHNOLOGY	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%

Schedule C, Line 2(h) Formula Descriptions

Kimberly-Clark Corporation 401(k) & Profit Sharing Plan

EIN: 39-0394230, PN: 016

Plan Year Ending: December 31, 2025

Indirect compensation in the form of sub-transfer agency fees was paid to: Fidelity Investments Institutional Operations Company, EIN: 04-2647786

PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
T ROWE PRICE GROWTH STOCK	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE HEALTH SCIENCES	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE INTL DISCOVERY FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE INTRTD US SM CAP GR EQUITY	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE LATIN AMERICA FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE MID CAP GROWTH	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE MID CAP VALUE	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE NEW ASIA	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE NEW HORIZONS FD INC	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE RET 2030 FD	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE RET 2040 FD	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE RETIREMENT 2035 FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE SHORT TERM BOND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE SMALL CAP VALUE FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE SPECT CONS ALLOCATION	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE U.S EQUITY RESEARCH FD	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE US LARGE CAP CORE FUND	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T ROWE PRICE VALUE	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
T.ROWE PRICE ASIA OPPORTUNITI INVESTOR	4515 PAINTERS MILL RD		OWINGS MILLS	MD	21117	0.15%
TCW EMERGING MKTS INCOME CL I	865 S FIGUERA ST	22ND FL	LOS ANGELES	CA	90071	0.10%
TCW METWEST TOTAL RETURN BOND CLASS I	865 S FIGUEROA ST 1400		LOS ANGELES	CA	90071	0.10%
THE INTERNET FUND	470 PARK AVE SOUTH		NEW YORK	NY	10016	0.40%
THIRD AVENUE REAL ESTATE VALUE INSTL	622 THIRD AVE 32 FL		NEW YORK	NY	10017	0.35%
THIRD AVENUE VALUE INSTL CLASS	622 THIRD AVE 32 FL		NEW YORK	NY	10017	0.35%
THOMPSON BOND FUND	1255 FOURIER DR STE 200		MADISON	WI	53717	0.25%
THORNBURG INCOME BUILDER CL I	2300 NORTH RIDGETOP RD		SANTA FE	NM	87506	0.15%
THORNBURG INTERNAT'L GROWTH FUND CL R5	2300 NORTH RIDGETOP RD		SANTA FE	NM	87506	0.08%
THRIVENT MID CAP STOCK FUND CL S	4321 N. BALLARD ROAD		APPLETON	WI	549190001	0.15%
TIMOTHY PLAN CONSERVATIVE GRWTH A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY PLAN HIGH YIELD BOND CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY PLAN INTERNATIONAL CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%

Schedule C, Line 2(h) Formula Descriptions

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EIN: 39-0394230, PN: 016

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PAYOR NAME	EIN / ADDRESS	ADDRESS 2	CITY	STATE	ZIP CODE	COMPENSATION
TIMOTHY PLAN ISRAEL COMMON VALUES CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY PLAN LARGE / MID CAP GROWTH CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY PLAN LRG/MID CAP VALUE CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY PLAN SM/MID CAP GROWTH FUND CL A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TIMOTHY SMALL CAP VALUE CLASS A	80 ARKAY DR	STE 110	HAUPPAUGE	NY	11788	0.08%
TOEWS TACTICAL INCOME FUND	1750 ZION ROAD		NORTHFIELD	NJ	082251844	0.10%
TOUCHSTONE DIVIDEND EQUITY FUND CL A	303 BROADWAY	STE 1100	CINCINNATI	OH	452024203	0.08%
TOUCHSTONE MID CAP FD CL Y	303 BROADWAY	STE 1100	CINCINNATI	OH	452024203	0.15%
TRANSAMERICA BOND CLASS I	4333 EDGEWOOD RD NE		CEDAR RAPIDS	IA	52499	0.10%
TRANSAMERICA CAPITAL GROWTH CL A	4333 EDGEWOOD RD NE		CEDAR RAPIDS	IA	52499	0.40%
ULTRA SMALL CAP PROFUND INVESTOR SHS	7501 WISCONSIN AVE	STE 1000 E TOWER	BETHESDA	MD	20814	0.40%
VICTORY GLOBAL ENERGY TRANSITION A	4900 TIEDEMAN RD 4TH FL		BROOKLYN	OH	44114	0.40%
VICTORY PRECIOUS METALS AND MINERALS	4900 TIEDEMAN RD 4TH FL		BROOKLYN	OH	44114	0.10%
VICTORY RS VALUE FUND CL A	4900 TIEDEMAN RD 4TH FL		BROOKLYN	OH	44114	0.40%
VICTORY SUSTAINABLE WORLD FUND	4900 TIEDEMAN RD 4TH FL		BROOKLYN	OH	44114	0.10%
VICTORY SYCAMORE ESTABLISHED VALUE A	4900 TIEDEMAN RD 4TH FL		BROOKLYN	OH	44114	0.40%
VIRTUS NFJ DIVIDEND VALUE A	100 SUMMIT LAKE DR 201		GREENFIELD	MA	01301	0.40%
WASATCH INTERNATIONAL GROWTH	505 WAKARA WAY	STE 300	SALT LAKE CITY	UT	84108	0.40%
WASATCH SMALL CAP VALUE	505 WAKARA WAY	STE 300	SALT LAKE CITY	UT	84108	0.40%
WCM FOCUSED EMERGING MARKETS FUND INSTL	2220 EAST ROUTE 66	STE 226	GLENDORA	CA	91740	0.12%
WCM FOCUSED INTL GROWTH FUND INSTL	2220 EAST ROUTE 66	STE 226	GLENDORA	CA	91740	0.12%
WESTWOOD REAL ESTATE INCOME FUND CL A	1 FREEDOM VALLEY DR		OAKS	PA	19456	0.10%
WILLIAM BLAIR SMALL MID CAP GROWTH CL I	222 WEST ADAMS ST	12TH FL	CHICAGO	IL	60606	0.10%

KIMBERLY-CLARK CORPORATION
401(K) AND PROFIT SHARING PLAN
SCHEDULE H, PART IV, 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SPONSOR'S EIN: 39-0394230
PLAN NAME/NUMBER: Kimberly-Clark Corporation 401(K) and Profit Sharing Plan / 016

Identity of Investment Issuer	Description of Investment	December 31, 2025 Fair Value (Thousands of dollars)
The Northern Trust [1]	Collective Fund:	
	Collective Government Short-Term Investment Fund	$ 6,100
		6,100
Columbia Management	Collective Funds:	
	CT Money Market Fund Z	122,285
	CT Stable Government Fund Z	53,907
	CT Stable Income Fund Z	142,208
		318,400
BlackRock	Collective Funds:	
	U.S. Debt Index Fund F	502,153
	Russell 1000 Index Fund F	815,804
	Russell 1000 Value Index Fund F	486,483
	Russell 1000 Growth Index Fund F	910,396
	Russell 2000 Index Fund F	207,673
	MSCI ACWI ex-U.S. IMI Index Fund F	638,742
	LifePath Index Target Conservative Fund F	135,902
	LifePath Index 2030 Fund F	80,433
	LifePath Index 2035 Fund F	184,192
	LifePath Index 2040 Fund F	98,184
	LifePath Index 2045 Fund F	154,997
	LifePath Index 2050 Fund F	92,204
	LifePath Index 2055 Fund F	90,863
	LifePath Index 2060 Fund F	44,445
	LifePath Index 2065 Fund F	17,230
	LifePath Index 2070 Fund F	1,281
		4,460,982
K-C[1]	Kimberly-Clark Corporation Common Stock	125,975
Fidelity [1]	Self-Directed Brokerage Account	521,437
The Northern Trust [1]	Notes receivable from participants rate of interest (4.25% - 9.5%) maturity dates (January 2026 - December 2035)	39,018
Total Investments		$ 5,471,912

[1] Sponsor and/or issuer known to be a party-in-interest to the Plan.
Cost is not presented as all investments are participant directed.
See accompanying independent auditor's report.