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 6047(e), 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

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

D Check box if filing under:
- [ ] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
R.P. LUMBER CO., INC. PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1987

2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)

R.P. LUMBER CO., INC.

514 E. VANDALIA ST.
EDWARDSVILLE, IL 62025-1855

2b Employer Identification Number (EIN) 37-1056629

2c Sponsor's telephone number 618-656-1514

2d Business code (see instructions) 444110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/18/2012	BRUCE RIEDLE
	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 (if same as plan sponsor, enter "Same")
R.P. LUMBER CO., INC.

514 E. VANDALIA ST.
EDWARDSVILLE, IL 62025-1855

3b Administrator's EIN
37-1056629

3c Administrator's telephone number
618-656-1514

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	576
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	442
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	106
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	548
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	548
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	542
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	21
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 3H 3D

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)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

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

a Pension Schedules

(1)	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

b General Schedules

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

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.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
R.P. LUMBER CO., INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
R.P. LUMBER CO., INC.

D Employer Identification Number (EIN)
37-1056629

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

NATIONWIDE FINANCIAL

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

31-4156830

(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?
64	RECORDKEEPER	33950	Yes [X] No [ ]	Yes [ ] No [X]	90246	Yes [ ] No [X]

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

MEEDER ADVISORY SERVICES, INC.

6125 MEMORIAL DRIVE
DUBLIN, OH 43017

31-1332744

(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	INVESTMENT MANAGER	57984	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ROYAL ALLIANCE ASSOC, INC.

ONE WORLD FINANCIAL CENTER
14TH FLOOR
NEW YORK, NY 10281

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	BROKER/ADVISOR	0	Yes [X] No [ ]	Yes [ ] No [X]	33689	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)

BENEFIT PLANS PLUS LLC

10151 CORPORATE SQUARE DR
SUITE 100
ST. LOUIS, MO 63132

43-1829594

(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?
64	CONTRACT ADMINISTRATOR	7030	Yes [X] No [ ]	Yes [ ] No [X]	21842	Yes [ ] No [X]

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

J.W. BOYLE & CO. LTD

2810 FRANK SCOTT PKWY
SUITE 812
BELLEVILLE, IL 62223

37-1287080

(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	ACCOUNTANT/CPA	6800	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONWIDE FINANCIAL	64	90246

(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.
NATIONWIDE FINANCIAL ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 31-4156830	RECORDKEEPING SERVICES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ROYAL ALLIANCE ASSOC, INC.	27	33689

(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.
NATIONWIDE FINANCIAL ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 31-4156830	OTHER COMMISSIONS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
BENEFIT PLANS PLUS LLC	64	21842

(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.
NATIONWIDE FINANCIAL ONE NATIONWIDE PLAZA COLUMBUS, OH 43215 31-4156830	TPA ALLOWANCE PAYMENT

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
R.P. LUMBER CO., INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
R.P. LUMBER CO., INC.

D Employer Identification Number (EIN)
37-1056629

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)	416380	423896
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	583823	663517
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(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)	14703166	14079511
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	15703369	15166924
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	15703369	15166924

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)	525563	
	(B) Participants	2a(1)(B)	711417	
	(C) Others (including rollovers)	2a(1)(C)	20495	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1257475
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	5	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		5
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		-723227
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		534253
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	964935	
(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)		964935
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	6800	
(2) Contract administrator fees	2i(2)	10341	
(3) Investment advisory and management fees	2i(3)	88622	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		105763
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1070698
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-536445
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) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: J.W. BOYLE & CO. LTD. (2) EIN: 37-1287080

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
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		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	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? If "Yes," enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

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)

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 section 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

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
R.P. LUMBER CO., INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
R.P. LUMBER CO., INC.

D Employer Identification Number (EIN)
37-1056629

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): 31-4156830

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 of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**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 item 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 items (a) through (c)

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

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

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

R. P. LUMBER COMPANY, INC.
PROFIT SHARING PLAN

FINANCIAL STATEMENTS

2011 and 2010

R. P. LUMBER COMPANY, INC.
PROFIT SHARING PLAN

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CERTIFIED PUBLIC ACCOUNTANTS
J.W. BOYLE & CO., LTD.
ESTABLISHED 1924

INDEPENDENT AUDITOR'S REPORT

Robert Plummer, Administrator of
the R. P. Lumber Company, Inc. Profit Sharing Plan

We were engaged to audit the financial statements of R.P. Lumber Company, Inc. Profit Sharing Plan as of December 31, 2011 and 2010, and for the years then ended, and the supplemental schedule as of December 31, 2011, as listed in the accompanying table of contents. These financial statements and the supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 9, which was certified by Nationwide Trust Company, trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee, as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements but are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

J. W. Boyle & Co Ltd

J.W. BOYLE & CO., LTD.

July 16, 2012

COPPER BEND CENTRE
2810 FRANK SCOTT PARKWAY WEST, SUITE 812
BELLEVILLE, ILLINOIS 62223-5092

FINANCIAL STATEMENTS

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN

Statements of Net Assets Available for Benefits
December 31, 2011 and 2010

	2011	2010
Assets		
Investments at fair value	$ 14,743,028	$ 15,286,989
Receivables		
Employer contributions	423,896	416,380
Total assets	15,166,924	15,703,369
Liabilities		
Refund of excess contributions	71	4,376
Net assets available for benefits	$ 15,166,853	$ 15,698,993

See notes to financial statements.

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN

Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2011 and 2010

	2011	2010
Additions to net assets attributed to:		
Investment activity		
Net appreciation (depreciation) in fair value of investments (see Note 3)	$ (1,024,040)	$ 1,541,691
Interest and dividends	300,818	299,696
Total investment activity	(723,222)	1,841,387
Contributions		
Employer	525,563	519,695
Participants	735,170	707,134
Total contributions	1,260,733	1,226,829
Total additions	537,511	3,068,216
Deductions from net assets attributed to:		
Benefits paid to participants	963,888	716,655
Administrative expenses	105,763	97,696
Total deductions	1,069,651	814,351
Net increase (decrease)	(532,140)	2,253,865
Net assets available for benefits, beginning of year	15,698,993	13,445,128
Net assets available for benefits, end of year	$ 15,166,853	$ 15,698,993

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

1. Description of plan

The following description of the R. P. Lumber Company, Inc. Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

A. **General** - The Plan is a defined contribution plan covering all full-time employees of the Company who have one year of service, are age twenty-one or older, and worked a minimum of 1,000 hours during the calendar year. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

B. **Contributions** - Each year, participants may contribute up to 50 percent of pretax annual compensation, as defined in the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers various mutual funds as investment options for participants. Effective January 29, 2010, the Company contributes 15 percent of the first 15 percent of compensation that a participant contributes to the Plan. Prior to January 29, 2010, the Company contributed 20 percent of the first 15 percent of compensation that a participant contributed to the Plan. Additional profit sharing amounts may be contributed at the option of the Company's board of directors and are invested as directed by the Participants. Contributions are subject to certain limitations.

C. **Participant accounts** - Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings (losses), and charged with an allocation of administrative expenses unless paid from forfeitures. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

D. **Vesting** - Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company contributions portion of their accounts plus earnings thereon is based on years of credited service. To receive credit for one year of vesting, a participant must have completed at least 1,000 hours of service in a calendar year. A participant is 100 percent vested after six years of credited service.

E. **Payment of benefits** - On termination of service due to death, disability or retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump-sum amount, or in installments. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. In addition, hardship distributions are permitted if certain criteria are met.

F. **Forfeited accounts** - At December 31, 2011 and 2010, forfeited nonvested accounts totaled $35,008 and $29,240, respectively. These accounts will be used to reduce future employer contributions and plan administration fees. Also, in 2011 and 2010, $6,800 and $-0- was used for plan administration fees, respectively.

2. Summary of accounting policies

Basis of accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Reclassifications

Certain amounts in the 2010 financial statements have been reclassified to conform with the 2011 presentation. Such reclassifications had no effect on net income.

Investment valuation and income recognition

Investments are reported at fair value based on the quoted market prices of the underlying securities within each fund at December 31, 2011 and 2010. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

Payments of benefits

Benefits are recorded when paid.

Refunds of excess contributions

At December 31, 2011 and 2010, refunds of excess contributions totaled $71 and $4,376, respectively. These amounts came from excess contributions from highly compensated employees. The corrective refunds were distributed after year-end in order to pass discrimination tests.

Administrative expenses

Certain expenses incurred in connection with the general administration of the Plan and advisory services are paid by the Plan and are recorded in the accompanying statement of changes in net assets available for benefits as administrative expenses. The following presents a breakdown of the administrative expenses for the years ended December 31, 2011 and 2010:

2. Summary of accounting policies (continued)

	2011	2010
Recordkeeping fees	$ 32,279	$ 34,242
Participant investment management fees	58,250	51,209
Contract administration fees	8,434	5,545
Audit fees	6,800	6,700
Total administrative expenses	$ 105,763	$ 97,696

Subsequent events

Subsequent events were evaluated through July 16, 2012, which is the date the financial statements were available to be issued.

3. Investments

The Plan's mutual fund investments (including gains and losses on investments bought, sold, and held during the years 2011 and 2010) appreciated (depreciated) in value by $(1,024,040) and $1,541,691, respectively.

The following presents investments at December 31, 2011, that represent 5 percent or more of the Plan's net assets:

Flex Defn Bal	$1,081,041
Flex Dynmc Growth	1,624,214
Flex Muirfield	1,767,367

The following presents investments at December 31, 2010, that represent 5 percent or more of the Plan's net assets:

Flex Dynmc Growth	$1,951,200
Flex Muirfield	1,955,546
Oppenheimer Devl Market - A	827,309

4. Fair value measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures,* provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

4. Fair value measurements (continued)

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

Mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year-end. There have been no changes in the valuation methodologies used for assets measured at fair value at December 31, 2011 and 2010.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2011 and 2010:

	Investments at Fair Value as of December 31, 2011			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced	$ 2,102,385	$ -	$ -	$ 2,102,385
Bonds	1,934,772	-	-	1,934,772
Cash	663,517	-	-	663,517
International stocks	823,797	-	-	823,797
Large-cap stocks	5,762,902	-	-	5,762,902
Mid-cap stocks	1,027,206	-	-	1,027,206
Short-term bonds	189,275	-	-	189,275
Small-cap stocks	501,728	-	-	501,728
Specialty	1,737,446	-	-	1,737,446
Total mutual funds	14,743,028	-	-	14,743,028
Total investments at fair value	$14,743,028	$ -	$ -	$ 14,743,028

4. Fair value measurements (continued)

	Investments at Fair Value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced	$ 2,009,573	$ -	$ -	$ 2,009,573
Bonds	1,770,159	-	-	1,770,159
Cash	583,824	-	-	583,824
International stocks	1,196,643	-	-	1,196,643
Large-cap stocks	6,041,506	-	-	6,041,506
Mid-cap stocks	1,484,793	-	-	1,484,793
Short-term bonds	187,991	-	-	187,991
Small-cap stocks	890,107	-	-	890,107
Specialty	1,122,393	-	-	1,122,393
Total mutual funds	15,286,989	-	-	15,286,989
Total investments at fair value	$15,286,989	$ -	$ -	$ 15,286,989

5. Distributions payable

At December 31, 2011 and 2010, net assets available for plan benefits included $-0- and $44,642, respectively, for distributions to participants who have requested a distribution from the Plan prior to the end of the Plan year.

6. Plan termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their accounts.

7. Reconciliation of financial statements to Schedule H of Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of Form 5500:

	December 31,	
	2011	2010
Net assets available for benefits per the financial statements	$ 15,166,853	$ 15,698,993
Refund of excess contributions	71	4,376
Net assets available for benefits per Schedule H to the Form 5500	$ 15,166,924	$ 15,703,369

7. Reconciliation of financial statements to Schedule H of Form 5500 (continued)

The following is a reconciliation of employer contributions per the financial statements for the year ended December 31, 2010 to Schedule H of Form 5500:

Employer contributions per the financial statements	$	519,695
Add: Corrective refunds		23
Employer contributions per Schedule H of Form 5500	$	519,718

The following is a reconciliation of participant contributions per the financial statements for the year ended December 31, 2011 to Schedule H of Form 5500:

Participant contributions per the financial statements	$	735,170
Add: Corrective distributions for the year ended December 31, 2011		71
Less: Corrective distributions for the year ended December 31, 2010		(3,329)
Participant contributions per Schedule H of Form 5500	$	731,912

The following is a reconciliation of participant contributions per the financial statements for the year ended December 31, 2010 to Schedule H of Form 5500:

Participant contributions per the financial statements	$	707,134
Add: Corrective distributions for the year ended December 31, 2010		4,376
Add: Corrective refunds		115
Participant contributions per Schedule H of Form 5500	$	711,625

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2011 to Schedule H of Form 5500:

Benefits paid to participants per the financial statements	$	963,888
Add: Corrective distributions for the year ended December 31, 2010		1,047
Benefits paid to participants per Schedule H of Form 5500	$	964,935

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2010 to Schedule H of Form 5500:

7. Reconciliation of financial statements to Schedule H of Form 5500 (continued)

Benefits paid to participants per the financial statements	$ 716,655
Add: Corrective distributions for the year ended December 31, 2009	171
Benefits paid to participants per Schedule H of Form 5500	$ 716,826

8. Tax status

Effective January 1, 2009, the Company amended and restated the Plan. This is a volume submitter profit sharing plan document. The Internal Revenue Service has determined and informed the volume submitter by a letter dated March 31, 2008, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require 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 Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2011, there are no uncertain positions taken or expected to be taken that should require recognition of a liability (or asset) or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

9. Information prepared and certified by trustee

The December 31, 2011 and December 31, 2010, Statements of Net Assets Available for Benefits, the investment activities included on the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2011 and 2010, and the accompanying notes to the financial statements were prepared in part or entirely from information certified as complete and accurate by the Trustee in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The information certified includes the following:

	2011	2010
Mutual funds	$ 14,743,028	$ 15,286,989
Total	$ 14,743,028	$ 15,286,989
Net appreciation (depreciation) in fair value of investments	$ (1,024,040)	$ 1,541,691
Interest and dividends	300,818	299,696
Total investment activity	$ (723,222)	$ 1,841,387

10. Risks and uncertainties

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

SUPPLEMENTAL INFORMATION

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Nationwide	Alger Midcap Growth Inst - I		$ 12,040
	Nationwide	Allber International Growth - A		750
	Nationwide	Allber Smmdcap Value - A		58,362
	Nationwide	Allber Smmdcap Value - K		12,695
	Nationwide	American Century Equity Income Fund - A		91,983
	Nationwide	American Century Income & Growth Fund - A		20,060
	Nationwide	American Century St Govt - A		149,042
	Nationwide	American Century Smallcap Value Adv		43,501
	Nationwide	American Vis - A		3,316
	Nationwide	American Funds - American Bal R5		7,864
	Nationwide	American Funds - Bond Fund Am R5		9,686
	Nationwide	American Funds - Capital Income Builder R5		143,498
	Nationwide	American Funds - Europacific Growth R3		4,940
	Nationwide	American Funds - Europacific Growth R5		87,338
	Nationwide	American Funds - Fundamental Inv R5		38,573
	Nationwide	American Funds - Growth Fund of America R3		2,425
	Nationwide	American Funds - Growth Fund of America R5		189,608
	Nationwide	American Funds - Intermediate Bond Fund of America R5		11,285
	Nationwide	Blackrock Energy Resource Inv A		758
	Nationwide	Blackrock Equity Dividend Inv A		7,441
	Nationwide	Blackrock GNMA Inv A		17,563
	Nationwide	Blackrock Health Scnc Oppr Inv A		21,340
	Nationwide	Blackrock Smallcap Growth II Inv A		6
	Nationwide	Buf Midcap Fund		92,466
	Nationwide	Buf Science & Technology		21,336
	Nationwide	Buf Smallcap Fund		71,210
	Nationwide	Calvert Global Alternative Energy A		701
	Nationwide	Calvert Income A		3
	Nationwide	DWS Rreef Realest Sec - A		163,695
	Nationwide	DWS Largecap Value - A		6,486
	Nationwide	Davis Financial Fund - A		58,796
	Nationwide	Dodge & Cox Income		219,145
	Nationwide	Dodge & Cox International Stock		8,136
	Nationwide	Drey Appreciation Fund		14,031
	Nationwide	Drey Grtr China Fund - A		9,122
	Nationwide	Ev Ww Health Sciences Fund - A		4,241
	Nationwide	Federated Kaufmann Smallcap - A		2,922
	Nationwide	Fidelity Advantage Freedom 2010 - A		13,311
	Sub-total (carried forward)			$ 1,619,675

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Sub-total (brought forward)			$ 1,619,675
	Nationwide	Fidelity Advantage Freedom 2015 - A		19,587
	Nationwide	Fidelity Advantage Freedom 2020 - A		96,210
	Nationwide	Fidelity Advantage Freedom 2025 - A		19,407
	Nationwide	Fidelity Advantage Freedom 2030 - A		12,774
	Nationwide	Fidelity Advantage Freedom 2035 - A		142,394
	Nationwide	Fidelity Advantage Freedom 2040 - A		53,303
	Nationwide	Fidelity Advantage Levr Co Stock - A		3,430
	Nationwide	Flex Aggr Gr		616,781
	Nationwide	Flex Defn Bal		1,081,041
	Nationwide	Flex Dynmc Growth		1,624,214
	Nationwide	Flex Muirfield		1,767,367
	Nationwide	Flex Quantex		97,574
	Nationwide	Flex Strategic Growth		659,839
	Nationwide	Flex Total Return Bond Fund		618,343
	Nationwide	Flex Total Return Utilities Fund		269,547
	Nationwide	Fnkln Income - A		214,118
	Nationwide	Gdmnscs Gr Oppr - A		171,896
	Nationwide	Gdmnscs Midcap Value - A		78,795
	Nationwide	Gdmnscs Short Duration Government - A		111
	Nationwide	Gdmnscs Short Duration Government Inst		46
	Nationwide	Gdmnscs Strcd Smcap Eq - A		21,430
	Nationwide	Gdmnscs Ultra Short Duration Government - A		3,993
	Nationwide	H & W Large Cap Value A		69,079
	Nationwide	Harbor Midcap Growth Inc		6,476
	Nationwide	Heartland Value Pls Inv		29
	Nationwide	Invsco Charter A		15
	Nationwide	Invsco Divrs Divd Inv		28
	Nationwide	Invsco Enrgy Inv		684
	Nationwide	Invsco Gold Prec Mtls Inv		62,227
	Nationwide	Invesco Lsure Inv		21,420
	Nationwide	Invsco Mdcap Cor Eq A		7,917
	Nationwide	Invsco Smcap Eq A		4,084
	Nationwide	Invsco Vk Comstk A		1,108
	Nationwide	Invsco Vk Eq Inc A		2,288
	Nationwide	Invsco Vk Val Opp A		3,204
	Sub-total (carried forward)			$ 9,370,434

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
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Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
Sub-total (brought forward)				$ 9,370,434
	Nationwide	Jpm Midcap Value A		298,261
	Nationwide	Jpm Trsry Agency Sel		31
	Nationwide	Jensen Port J		85,266
	Nationwide	Jnhnck Clsc Value - A		78,002
	Nationwide	Jnhnck High Yield - A		9,199
	Nationwide	Janus Entrp S		6,147
	Nationwide	Janus Frty S		30,369
	Nationwide	Janus Prkns Midcap Value S		7,639
	Nationwide	Lazard Emerging Market Equity Open Fund		14
	Nationwide	Lazard US Midcap Equity Open Fund		690
	Nationwide	MFS Ttl Rtn A		136,411
	Nationwide	MFS Value A		13,948
	Nationwide	Nw Government Bond A		72
	Nationwide	Nw Midcap Market Index A		32,611
	Nationwide	Nw Money Market Inst		663,517
	Nationwide	Nw S & P 500 Index Sc		33,900
	Nationwide	Nw Smallcap Index A		4,065
	Nationwide	Natixis Loomis Sayles Investment Grade Bond A		80
	Nationwide	Neuber Real Estate Tr		2
	Nationwide	Oakmark Equity and Income II		111,440
	Nationwide	Oakmark Fd II		39,259
	Nationwide	Oakmark Global II		34,198
	Nationwide	Oakmark International II		87,163
	Nationwide	Oppenheimer Commodity Strategic Ttl Rtn A		2,004
	Nationwide	Oppenheimer Devl Market - A		585,087
	Nationwide	Opp Global Strat Income A		24,564
	Nationwide	Opp Gold & Spec Minerals - A		10,847
	Nationwide	Opp International Bond A		419,855
	Nationwide	Opp Mn St Smallcap A		51,371
	Nationwide	Opp Value A		10,627
	Nationwide	Payden GNMA Fund		8
	Nationwide	Pimco Allnz NFJ Largecap Value A		66,157
	Nationwide	Pimco Comdty Real Return Strategic A		108,065
	Nationwide	Pimco Emerging Local Bond Inst		121,633
	Nationwide	Pimco Low Dur A		24,736
Sub-total (carried forward)				$12,467,672

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a) Identity of Issue, Borrower Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
Sub-total (brought forward)			$12,467,672
Nationwide	Pimco Real Return A		26,451
Nationwide	Pimco Real Return Inst		106,510
Nationwide	Pimco Ttl Rtn A		497,630
Nationwide	Pimco Ttl Rtn Inst		1,705
Nationwide	Pimco Comdty Real Return Strategic Inst A		5,236
Nationwide	Pioneer Cullen Value - A		6,646
Nationwide	Pioneer Emerging Market A		7,319
Nationwide	Pioneer Equity Income A		21,629
Nationwide	Pioneer Hi Yield A		162,618
Nationwide	Pioneer Midcap Value A		78,050
Nationwide	Pioneer Oak Ridge Small Cap Growth - A		45,835
Nationwide	Pioneer Strategic Income A		240,996
Nationwide	PNC Midcap Value - A		26,995
Nationwide	Prudential Jennison Midcap Growth A		3,198
Nationwide	Prudential Jennison Natural Resource A		27,810
Nationwide	Prudential Jennison Utility A		197,603
Nationwide	RS Global Natural Resource A		21,314
Nationwide	Rdgwrth Intermediate Bond I		13
Nationwide	Rdgwrth Largecap Value Equity I		33
Nationwide	Rdgwrth Midcap Value Equity I		28
Nationwide	Rdgwrth Smallcap Value Equity I		17
Nationwide	Rydex SGI Consumer Products Adv		21,161
Nationwide	Rydex SGI Energy Services Adv		58,267
Nationwide	Rydex SGI Precious Metals Adv		2,603
Nationwide	Rydex SGI Retailing Adv		21,090
Nationwide	Rydex SGI S & P 500 Pure Value H		4,470
Nationwide	Rydex SGI S & P Midcap 400 Pure Growth H		21,208
Nationwide	Rydex SGI S & P Midcap 400 Pure Value H		667
Nationwide	Rydex SGI S & P Smallcap 600 Pure Growth H		21,106
Nationwide	Rydex SGI S & P Smallcap 600 Pure Value H		20,616
Nationwide	Scout International		6,333
Nationwide	Sntnl Government Sec A		61
Nationwide	TCW Ttl Return Bond N		15
Nationwide	Thornburg International Value Pd I		2,503
Nationwide	Thornburg Value Fund Cls I		60,446
Sub-total (carried forward)			$14,185,854

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
Sub-total (brought forward)				$14,185,854
	Nationwide	Van Eck Global Hard Assets A		21,523
	Nationwide	Van Eck International Inv Gold A		43,138
	Nationwide	Vanguard Intermediate Term Treasury Inv		110
	Nationwide	Vanguard Smallcap Value Index Inv		15,620
	Nationwide	Vic Established Value A		28
	Nationwide	Vic Small Co Opp A		6
	Nationwide	Vanguard Equity Income Inv		14
	Nationwide	WFA Common Stock Fund CIA		6,717
	Nationwide	WFA Short Duration Government Bond A		31
	Nationwide	WFA Utility and Telecommunications Fund		21,413
	Nationwide	WR Ivy Asset Strategy Y		27,640
	Nationwide	WR Ivy Balanced Y		21,099
	Nationwide	WR Ivy Dividend Opportunity Y		9,081
	Nationwide	WR Ivy International Core Equity Y		16
	Nationwide	WR Ivy Large Cap Growth Y		22,710
	Nationwide	WR Ivy Science & Technology Y		15
	Nationwide	William Blair Smallcap Growth N		199,910
	Nationwide	Yacktman Focused Fund		168,103
	Total investment			$14,743,028

Note 1: Column (a) is blank as there were no parties-in-interest.

Note 2: In column (d), cost information may be omitted with respect to participant or beneficiary directed transactions under an individual account plan.

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
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	Nationwide	Alger Midcap Growth Inst - I		$ 12,040
	Nationwide	Allber International Growth - A		750
	Nationwide	Allber Smmdcap Value - A		58,362
	Nationwide	Allber Smmdcap Value - K		12,695
	Nationwide	American Century Equity Income Fund - A		91,983
	Nationwide	American Century Income & Growth Fund - A		20,060
	Nationwide	American Century St Govt - A		149,042
	Nationwide	American Century Smallcap Value Adv		43,501
	Nationwide	American Vis - A		3,316
	Nationwide	American Funds - American Bal R5		7,864
	Nationwide	American Funds - Bond Fund Am R5		9,686
	Nationwide	American Funds - Capital Income Builder R5		143,498
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	Nationwide	Blackrock Energy Resource Inv A		758
	Nationwide	Blackrock Equity Dividend Inv A		7,441
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	Nationwide	Blackrock Health Scnc Oppr Inv A		21,340
	Nationwide	Blackrock Smallcap Growth II Inv A		6
	Nationwide	Buf Midcap Fund		92,466
	Nationwide	Buf Science & Technology		21,336
	Nationwide	Buf Smallcap Fund		71,210
	Nationwide	Calvert Global Alternative Energy A		701
	Nationwide	Calvert Income A		3
	Nationwide	DWS Rreef Realest Sec - A		163,695
	Nationwide	DWS Largecap Value - A		6,486
	Nationwide	Davis Financial Fund - A		58,796
	Nationwide	Dodge & Cox Income		219,145
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	Nationwide	Drey Appreciation Fund		14,031
	Nationwide	Drey Grtr China Fund - A		9,122
	Nationwide	Ev Ww Health Sciences Fund - A		4,241
	Nationwide	Federated Kaufmann Smallcap - A		2,922
	Nationwide	Fidelity Advantage Freedom 2010 - A		13,311
	Sub-total (carried forward)			$ 1,619,675

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
Plan #001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
	Sub-total (brought forward)			$ 1,619,675
	Nationwide	Fidelity Advantage Freedom 2015 - A		19,587
	Nationwide	Fidelity Advantage Freedom 2020 - A		96,210
	Nationwide	Fidelity Advantage Freedom 2025 - A		19,407
	Nationwide	Fidelity Advantage Freedom 2030 - A		12,774
	Nationwide	Fidelity Advantage Freedom 2035 - A		142,394
	Nationwide	Fidelity Advantage Freedom 2040 - A		53,303
	Nationwide	Fidelity Advantage Levr Co Stock - A		3,430
	Nationwide	Flex Aggr Gr		616,781
	Nationwide	Flex Defn Bal		1,081,041
	Nationwide	Flex Dynmc Growth		1,624,214
	Nationwide	Flex Muirfield		1,767,367
	Nationwide	Flex Quantex		97,574
	Nationwide	Flex Strategic Growth		659,839
	Nationwide	Flex Total Return Bond Fund		618,343
	Nationwide	Flex Total Return Utilities Fund		269,547
	Nationwide	Fnkln Income - A		214,118
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	Nationwide	Gdmnscs Midcap Value - A		78,795
	Nationwide	Gdmnscs Short Duration Government - A		111
	Nationwide	Gdmnscs Short Duration Government Inst		46
	Nationwide	Gdmnscs Strcd Smcap Eq - A		21,430
	Nationwide	Gdmnscs Ultra Short Duration Government - A		3,993
	Nationwide	H & W Large Cap Value A		69,079
	Nationwide	Harbor Midcap Growth Inc		6,476
	Nationwide	Heartland Value Pls Inv		29
	Nationwide	Invsco Charter A		15
	Nationwide	Invsco Divrs Divd Inv		28
	Nationwide	Invsco Enrgy Inv		684
	Nationwide	Invsco Gold Prec Mtls Inv		62,227
	Nationwide	Invesco Lsure Inv		21,420
	Nationwide	Invsco Mdcap Cor Eq A		7,917
	Nationwide	Invsco Smcap Eq A		4,084
	Nationwide	Invsco Vk Comstk A		1,108
	Nationwide	Invsco Vk Eq Inc A		2,288
	Nationwide	Invsco Vk Val Opp A		3,204
	Sub-total (carried forward)			$ 9,370,434

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
Sub-total (brought forward)				$ 9,370,434
	Nationwide	Jpm Midcap Value A		298,261
	Nationwide	Jpm Trsry Agency Sel		31
	Nationwide	Jensen Port J		85,266
	Nationwide	Jnhnck Clsc Value - A		78,002
	Nationwide	Jnhnck High Yield - A		9,199
	Nationwide	Janus Entrp S		6,147
	Nationwide	Janus Frty S		30,369
	Nationwide	Janus Prkns Midcap Value S		7,639
	Nationwide	Lazard Emerging Market Equity Open Fund		14
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	Nationwide	MFS Ttl Rtn A		136,411
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	Nationwide	Nw Smallcap Index A		4,065
	Nationwide	Natixis Loomis Sayles Investment Grade Bond A		80
	Nationwide	Neuber Real Estate Tr		2
	Nationwide	Oakmark Equity and Income II		111,440
	Nationwide	Oakmark Fd II		39,259
	Nationwide	Oakmark Global II		34,198
	Nationwide	Oakmark International II		87,163
	Nationwide	Oppenheimer Commodity Strategic Ttl Rtn A		2,004
	Nationwide	Oppenheimer Devl Market - A		585,087
	Nationwide	Opp Global Strat Income A		24,564
	Nationwide	Opp Gold & Spec Minerals - A		10,847
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	Nationwide	Payden GNMA Fund		8
	Nationwide	Pimco Allnz NFJ Largecap Value A		66,157
	Nationwide	Pimco Comdty Real Return Strategic A		108,065
	Nationwide	Pimco Emerging Local Bond Inst		121,633
	Nationwide	Pimco Low Dur A		24,736
Sub-total (carried forward)				$12,467,672

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a) Identity of Issue, Borrower Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
Sub-total (brought forward)			$12,467,672
Nationwide	Pimco Real Return A		26,451
Nationwide	Pimco Real Return Inst		106,510
Nationwide	Pimco Ttl Rtn A		497,630
Nationwide	Pimco Ttl Rtn Inst		1,705
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Nationwide	Pioneer Cullen Value - A		6,646
Nationwide	Pioneer Emerging Market A		7,319
Nationwide	Pioneer Equity Income A		21,629
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Nationwide	Pioneer Midcap Value A		78,050
Nationwide	Pioneer Oak Ridge Small Cap Growth - A		45,835
Nationwide	Pioneer Strategic Income A		240,996
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Nationwide	Prudential Jennison Midcap Growth A		3,198
Nationwide	Prudential Jennison Natural Resource A		27,810
Nationwide	Prudential Jennison Utility A		197,603
Nationwide	RS Global Natural Resource A		21,314
Nationwide	Rdgwrth Intermediate Bond I		13
Nationwide	Rdgwrth Largecap Value Equity I		33
Nationwide	Rdgwrth Midcap Value Equity I		28
Nationwide	Rdgwrth Smallcap Value Equity I		17
Nationwide	Rydex SGI Consumer Products Adv		21,161
Nationwide	Rydex SGI Energy Services Adv		58,267
Nationwide	Rydex SGI Precious Metals Adv		2,603
Nationwide	Rydex SGI Retailing Adv		21,090
Nationwide	Rydex SGI S & P 500 Pure Value H		4,470
Nationwide	Rydex SGI S & P Midcap 400 Pure Growth H		21,208
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Nationwide	Rydex SGI S & P Smallcap 600 Pure Growth H		21,106
Nationwide	Rydex SGI S & P Smallcap 600 Pure Value H		20,616
Nationwide	Scout International		6,333
Nationwide	Sntnl Government Sec A		61
Nationwide	TCW Ttl Return Bond N		15
Nationwide	Thornburg International Value Pd I		2,503
Nationwide	Thornburg Value Fund Cls I		60,446
Sub-total (carried forward)			$14,185,854

R. P. LUMBER COMPANY, INC. PROFIT SHARING PLAN
37-1056629
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
(Continued)
December 31, 2011

(a)	Identity of Issue, Borrower Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost (d)	Current Value (e)
Sub-total (brought forward)				$14,185,854
	Nationwide	Van Eck Global Hard Assets A		21,523
	Nationwide	Van Eck International Inv Gold A		43,138
	Nationwide	Vanguard Intermediate Term Treasury Inv		110
	Nationwide	Vanguard Smallcap Value Index Inv		15,620
	Nationwide	Vic Established Value A		28
	Nationwide	Vic Small Co Opp A		6
	Nationwide	Vanguard Equity Income Inv		14
	Nationwide	WFA Common Stock Fund CIA		6,717
	Nationwide	WFA Short Duration Government Bond A		31
	Nationwide	WFA Utility and Telecommunications Fund		21,413
	Nationwide	WR Ivy Asset Strategy Y		27,640
	Nationwide	WR Ivy Balanced Y		21,099
	Nationwide	WR Ivy Dividend Opportunity Y		9,081
	Nationwide	WR Ivy International Core Equity Y		16
	Nationwide	WR Ivy Large Cap Growth Y		22,710
	Nationwide	WR Ivy Science & Technology Y		15
	Nationwide	William Blair Smallcap Growth N		199,910
	Nationwide	Yacktman Focused Fund		168,103
	Total investment			$14,743,028

Note 1: Column (a) is blank as there were no parties-in-interest.

Note 2: In column (d), cost information may be omitted with respect to participant or beneficiary directed transactions under an individual account plan.