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

2018

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
B & B LUMBER COMPANY, INC. PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1984

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)
B & B LUMBER COMPANY, INC.

PO BOX 420
JAMESVILLE, NY 13078

2b Employer Identification Number (EIN)
16-1035246

2c Plan Sponsor's telephone number
315-492-1786

2d Business code (see instructions)
321210

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.	09/16/2019	BRIGHAM BOOHER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/16/2019	BRIGHAM BOOHER
	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:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	161
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)**	147
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	138
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	14
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	152
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	
f	Total. Add lines **6d** and **6e**.	**6f**	152
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	150
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	10
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2J 2K 3D 3H

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

4B

9a Plan funding arrangement (check all that apply)

(1)	[X]	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)	[X]	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)	[X]	1	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[ ]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 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 A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
B & B LUMBER COMPANY, INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
B & B LUMBER COMPANY, INC.

D Employer Identification Number (EIN)
16-1035246

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-1590850	65935	006275669, ETC		01/01/2018	12/31/2018

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
1	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSEPH WARREN YOUNG III
250 S CLINTON ST
SUITE 300
SYRACUSE, NY 13202-1497

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	542
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	**6d**	

Specify nature of costs ▶

e Type of contract: (1) [X] individual policies (2) [ ] group deferred annuity

(3) [ ] other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ [ ]

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) [ ] deposit administration (2) [ ] immediate participation guarantee

(3) [ ] guaranteed investment (4) [ ] other ▶

b	Balance at the end of the previous year			**7b**	
c	Additions: (1) Contributions deposited during the year	**7c(1)**			
	(2) Dividends and credits	**7c(2)**			
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below)	**7c(5)**			
	▶				
	(6) Total additions			**7c(6)**	
d	Total of balance and additions (add lines **7b** and **7c(6)**).			**7d**	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below)	**7e(4)**			
	▶				
	(5) Total deductions			**7e(5)**	
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.			**10b**	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Service Provider Information

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

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
B & B LUMBER COMPANY, INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
B & B LUMBER COMPANY, INC.

D Employer Identification Number (EIN)
16-1035246

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

FIDELITY INVESTMENTS
500 SALEM STREET
SMITHFIELD, RI 02917

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

STRATEGIC FINANCIAL SERVICES
114 BUSINESS PARK DRIVE
UTICA, NY 13502

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

THE BARTER GROUP
205 S SALINA ST
SUITE 300
SYRACUSE, NY 13202

(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)

UBS FINANCIAL SERVICES, INC.

1285 AVENUE OF THE AMERICAS
NEW YORK, NY 10019

13-2638166

(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		32012	Yes [ ] No [X]	Yes [X] No [ ]		Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
B & B LUMBER COMPANY, INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
B & B LUMBER COMPANY, INC.

D Employer Identification Number (EIN)
16-1035246

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)	74907	17044
(2) Participant contributions	1b(2)	29	
(3) Other	1b(3)	21470	8482
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1278773	1112352
(2) U.S. Government securities	1c(2)	1583610	1098109
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	3217053	1088841
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	9212000	6302202
(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)	706366	624885
(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)	4049503	2605605
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	15836	16401

			(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	20159547	12873921
	Liabilities			
g	Benefit claims payable	1g	327	0
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	327	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	20159220	12873921

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)	192944	
	(B) Participants	2a(1)(B)	385767	
	(C) Others (including rollovers)	2a(1)(C)	898	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		579609
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	22870	
	(B) U.S. Government securities	2b(1)(B)	26786	
	(C) Corporate debt instruments	2b(1)(C)	67050	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	39183	
	(F) Other	2b(1)(F)	-18	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		155871
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	170118	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	59097	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		229215
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	6796210	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	7067401	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-271191
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	-453002	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-453002

		(a) Amount	(b) Total
(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)		-155510
c Other income	2c		566
d Total income. Add all **income** amounts in column (b) and enter total	2d		85558
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7332815	
(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)		7332815
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	38042	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		38042
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		7370857
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-7285299
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] Unqualified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: EVANS AND BENNETT, LLP **(2)** EIN: 15-0551397

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
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? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

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

2018

This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
B & B LUMBER COMPANY, INC. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
B & B LUMBER COMPANY, INC.

D Employer Identification Number (EIN)
16-1035246

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**

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): 16-1612002 _____

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

14 Enter the number of 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 line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

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

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

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

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

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN

JAMESVILLE, NEW YORK

AUDITED FINANCIAL STATEMENTS

AND SUPPLEMENTARY INFORMATION

YEARS ENDED DECEMBER 31, 2018 AND 2017

CONTENTS

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Evans and Bennett, LLP
CERTIFIED PUBLIC ACCOUNTANTS
2112 Erie Blvd. East Suite 100
Syracuse, New York 13224
(315) 474-3986
FAX # (315) 474-0716

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator and Participants
B & B Lumber Company, Inc.
Profit Sharing Plan
Jamesville, New York

Report on the Financial Statements

We have audited the accompanying financial statements of B & B Lumber Company, Inc. Profit Sharing Plan, which comprise the statements of net assets available for plan benefits as of December 31, 2018 and 2017, and the related statement of changes in net assets available for plan benefits for the years then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with U. S. generally accepted accounting principles; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with U. S. generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements 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, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for plan benefits of B & B Lumber Company, Inc. Profit Sharing Plan as of December 31, 2018 and 2017, and the changes in its net assets available for plan benefits for the years then ended in accordance with U. S. generally accepted accounting principles.

Other Matter

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedules appearing on pages 11 through 18 are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's 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 audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements taken as a whole.

Evans and Bennett LLP
Certified Public Accountants
Syracuse, NY

July 9, 2019

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR PLAN BENEFITS

DECEMBER 31,

ASSETS

	2018	2017
Nonparticipant-directed investments at fair value:		
Cash	$ 2,128	$ 134,651
Registered investment -money market funds	1,118,346	1,144,121
Registered investment companies	2,605,605	4,049,504
Common stocks	6,302,203	9,212,000
U.S. government securities	1,098,109	1,583,610
Corporate bonds	1,088,841	3,217,053
Life insurance - cash value	16,401	15,836
	12,231,633	19,356,775
Receivables:		
Employer's contributions	8,181	74,907
Participant contributions	9,548	29
Participants' loans receivable	624,885	706,366
Participants' monthly loan payments	-	21,470
	642,614	802,772
Total assets	12,874,247	20,159,547

LIABILITIES

Accrued expenses	327	327
Total liabilities	327	327
Net assets available for benefits	$12,873,920	$20,159,220

The accompanying notes are an integral part of these financial statements

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS

YEARS ENDED DECEMBER 31,

	2018	2017
ADDITIONS		
Additions to net assets attributed to:		
Investment income:		
Interest and dividends	$ 345,904	$ 433,294
Participant loan interest	39,183	39,035
Net appreciation (depreciation) in investments	(879,138)	1,496,486
	(494,051)	1,968,815
Contributions:		
Employer	192,944	251,438
Employee	385,767	386,467
Rollover	898	-
	579,609	637,905
Total additions	85,558	2,606,720
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	7,332,816	2,043,534
Administrative expenses	38,042	43,190
Total deductions	7,370,858	2,086,724
Net increase (decrease)	(7,285,300)	519,996
Net assets available for benefits:		
Beginning of year	20,159,220	19,639,224
End of year	$ 12,873,920	$ 20,159,220

The accompanying notes are an integral part of these financial statements

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2018

Note 1. Description of Plan

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

General

The Plan is a 401(k) profit sharing plan covering the employees of B & B Lumber Company, U-Cut Enterprises, Premier Hardwood Products and The B&B Albany Pallet Company, Inc. Employees are eligible to participate in the employer matching and profit sharing features of the Plan after completion of one year of service. Length of service is based on 1,000 hours per year. Employees must be over 18 years of age to participate in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each participant may elect to have a specified portion of his/her compensation for a Plan year allocated to his/her account up to a maximum of $18,500 per year plus an additional $6,000 for participants over 50 years old. The employer may make a matching contribution on the amount deferred by participants. The Company may also make annual profit sharing contributions at its own discretion.

Contributions received from participants and contributions receivable are net of payments of $7,797 and $0 at December 31, 2018 and 2017, respectively, made in the following year to certain active participants to return to them excess deferral contributions as required to satisfy the relevant nondiscrimination provisions of the Plan.

Participant Accounts

Salary deferral contributions and any matching contributions are allocated to the respective employee's accounts. Employer profit sharing contributions are allocated to each participant based on the ratio to which the participants' compensation bears to the compensation of all eligible participants.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's matching and profit sharing contribution portion of their accounts plus actual earnings thereon is fully vested once they have completed six years of service. If participants die or become disabled before retirement, the entire value of the participant's account becomes vested and non-forfeitable. Participants have the right to designate a beneficiary to receive their benefits should they die.

Note 1. Description of Plan (continued)

Participant Loans

Under the terms of the Plan, participants may borrow up to 50% of the balance of their vested account or $50,000, whichever is less. The loans are secured by the participant's vested account balances and bear interest based on the prime rate as determined by the Plan Trustee (currently 7.5%). Since the loans are fully secured, Management has decided to not create a reserve for bad debt allowance account. Loan terms range up to 5 years. Participant loans receivable are valued at cost, which approximates fair value.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive a lump sum equal to the value of the participant's vested interest in his or her account or annual installments.

Forfeitures

Forfeitures for terminated non-vested participants' accounts attributable to employer profit sharing contributions, employer-matching contributions and related earnings will be used to reduce employer contributions.

Note 2. Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with U.S. 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.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion of fair value measurements.

The Plan's stock investments are stated at quoted market prices. The fair value of corporate bonds and U.S. government securities are valued using a market approach on yields currently available on comparative securities of issuers with similar ratings. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. The life insurance is valued at the cash value of the policy.

Note 2. Summary of Significant Accounting Policies (continued)

Investment Valuation and Income Recognition (continued)

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.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

The Plan sponsor, which is a party-in-interest, absorbs all non-investment and administrative costs of the Plan. These expenses, which are not reflected in accompanying financial statements, constitute exempt party-in-interest transactions under ERISA. Investment expenses are deducted from investment earnings allocated to participant accounts.

Concentration of Credit Risk

The Plan maintains its cash equivalents in accounts, which, at times may exceed federally insured limits. The Plan has not experienced any losses in such accounts. The Plan believes it is not exposed to any significant credit risk on cash equivalents.

Events Occurring After The Reporting Period

The Plan management has evaluated subsequent events through July 9, 2019 the date the financial statements were available to be issued.

Note 3. Investments

The following table presents investments at December 31, 2018 and 2017 that represent 5% or more of the Plan's assets.

Non-participant directed accounts	2018	2017
Ishares MSCI EAFE ETF	$ -	$ 1,090,485
Fidelity short term bond fund	636,574	-

The investments are all nonparticipant directed.

Note 4. Fair Value Measurements

Generally accepted accounting principles establish a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements).

The Plan's investments measured at fair value on a recurring basis were as follows as of December 31, 2018:

	Level 1	Level 2	Level 3	Total
Cash	$ 2,128	$ -	$ -	$ 2,128
Mutual Funds	1,851,733	-	-	1,851,733
Common Stocks	6,302,203	-	-	6,302,203
Exchange Traded Funds	1,872,218	-	-	1,872,218
Life Insurance	-	-	16,401	16,401
Corporate Bonds	-	1,088,841	-	1,088,841
U.S. Government Securities	-	1,098,109	-	1,098,109
Total investments	$ 10,028,282	$2,186,950	$ 16,401	$ 12,231,633

The Plan's investments measured at fair value on a recurring basis were as follows as of December 31, 2017:

	Level 1	Level 2	Level 3	Total
Cash	$ 134,651	$ -	$ -	$ 134,651
Mutual Funds	1,971,558	-	-	1,971,558
Common Stocks	9,212,000	-	-	9,212,000
Exchange Traded Funds	3,222,067	-	-	3,222,067
Life Insurance	-	-	15,836	15,836
Corporate Bonds	-	3,217,053	-	3,217,053
U.S. Government Securities	-	1,583,610	-	1,583,610
Total investments	$ 14,540,276	$4,800,663	$ 15,836	$ 19,356,775

Note 4. Fair Value Measurements (continued)

The following table sets forth a summary of changes in the fair value of the plan's level 3 assets for the years ended December 31:

	2018	2017
Balance beginning of year	$ 15,836	$ 15,226
Realized gains (losses)	-	-
Unrealized gains (losses)	565	610
Purchases, sales, issuances and settlements - net	-	-
Balance end of year	$ 16,401	$ 15,836

Note 5. 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 will become 100% vested in their accounts.

Note 6. Tax Status

The Plan obtained its latest opinion letter on March 31, 2014, in which the Internal Revenue Service stated that the Plan prototype, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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 if the Plan has taken an uncertain position that more likely than not would be sustained upon examination by taxing authorities. The Plan is subject to routine audits by taxing jurisdictions, however there are currently no audits in progress.

Note 7. Terminated Vested Accounts

At December 31, 2018 and 2017, there was $0 allocated to participant accounts who have elected to withdraw from the Plan, but have not been paid.

Note 8. Forfeited Accounts

For the plan years ended December 31, 2018 and 2017, the Plan allocated $9,804 and $14,405, respectively, in forfeited accounts to reduce employer contributions.

Note 9. 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 the Schedule H of Form 5500:

	2018	2017
Net assets available for benefits per the financial statements	$12,873,920	$20,159,220
Benefits payable	-	-
Net assets available for benefits per Schedule H of Form 5500	$12,873,920	$20,159,220

The following is a reconciliation of benefits paid to participants per the financial statements to Form 5500:

	2018	2017
Benefits paid to participants per the financial statements	$ 7,332,816	$ 2,043,534
Amounts allocated to withdrawing participants	-	(1,250)
Benefits paid to participants per Form 5500	$ 7,332,816	$ 2,042,284

Note 10. Risks and Uncertainties

Investment securities are exposed to various risks such as interest rates, 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 the Plan's account balances and the amounts reported on the statement of net assets available for plan assets.

Note 11. Party In Interest Transactions

Loans receivable from Plan participants and the related interest income are considered exempt party in interest transactions.

Note 12. Participant Loan Failure

Management found during the 2017 audit that the Plan failed to follow Internal Revenue Service section 72(P) regarding participant loans. Management has stated that it submitted to the Internal Revenue Service notice under the voluntary correction program a plan to correct these issues. Management expects that these issue will not effect the plan's tax qualification. The costs to correct these issues was paid by the plan sponsors with no cost to the plan.

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN SUPPLEMENTARY INFORMATION

DECEMBER 31, 2018

B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) (b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
CASH	MONEY MARKET	570	570
SCHWAB GOVT MONEY FUND	MONEY MARKET	34,208	34,208
FHLB	1.125% 7/14/21	54,491	53,116
FEDERAL FARM CRE	1.36% 10/28/19	54,831	54,410
TORONTO DOMINIO	1.45% 8/13/19	69,805	69,356
FANNIE MAE	1.5% 10/22/20	68,667	68,674
FEDERAL FARM CRE	1.875% 4/12/22	64,515	63,248
ASTRAZENECA	1.95& 9/18/19	69,205	69,521
NORTHBROOK IL GO 12A	2% 12/1/21	34,110	34,263
FREDDIE MAC	2% 12/11/20	49,676	49,454
FEDERAL FARM CRE	2.05% 10/5/22	64,753	63,332
UST INFL IDX	2.125% 1/15/19	67,164	76,425
AMERICAN EXPRESS	2.2% 3/3/20	69,154	69,251
THE BANK OF NEW YORK	2.2% 3/4/19	70,134	69,916
JPMORGAN CHASE	2.25% 1/23/20	69,264	69,281
QUALCOMM INC	2.25% 5/20/20	69,964	69,024
UNIV NC CHARLOT	2.272% 4/1/19	25,025	24,965
CHEVRON CORP	2.427% 6/24/20	69,710	69,575
WELLS FARGO & CO	2.5% 3/4/21	70,885	68,696
DENTON TX ISD	2.5% 8/15/21	20,000	19,926
BANK OF MONTREAL	2.55% 11/6/22	68,363	67,804
TJX CO	2.75% 6/15/21	69,872	69,313
US BANCORP MTN	3% 3/15/22	69,077	69,423
GENERAL DYNAMICS	3% 5/11/21	69,882	70,016
NATIONAL RURAL UTIL	3% 8/15/21	40,440	38,975
OCCIDENTAL PETR	3.125% 2/15/22	69,374	69,684
PNC FUNDING CORP	3.3% 3/8/22	70,066	69,851
ALBEMARLE CORP	COMMON STOCK	13,151	9,634
ALPHABET INC	COMMON STOCK	29,110	46,602
APPLE INC	COMMON STOCK	7,018	17,351
BOOKING HOLDINGS	COMMON STOCK	9,120	25,836
CH ROBINSON WORLDWD	COMMON STOCK	11,517	13,875
CATERPILLAR INC	COMMON STOCK	5,421	9,530
CHURCH & DWIGHT CO	COMMON STOCK	8,871	13,810
COGNIZANT TECHNOLOGY SOLUTIONS CORP	COMMON STOCK	11,423	18,092
COSTCO WHOLESALE CO	COMMON STOCK	9,063	13,241
DELL TECHNOLOGIES	COMMON STOCK	18,607	2,786
DOLLAR TREE INC	COMMON STOCK	18,844	30,709
EXPEDIA INC	COMMON STOCK	12,333	23,657

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B & B LUMBER COMPANY, INC.

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FACEBOOK INC	COMMON STOCK	25,188	20,319
HEXCEL CORP	COMMON STOCK	12,628	18,636
JOHNSON & JOHNSON	COMMON STOCK	9,420	18,067
K L A TENCOR CORP	COMMON STOCK	16,414	15,661
LAM RESEARCH CORP	COMMON STOCK	19,180	13,617
LINDE PLC	COMMON STOCK	12,259	11,703
MCKESSON CORP	COMMON STOCK	19,084	23,199
MONDELEZ INTERNATIONAL	COMMON STOCK	12,563	19,014
NXP SEMICONDUCTORS	COMMON STOCK	5,457	14,656
ORACLE CORP	COMMON STOCK	15,126	23,704
PROCTOR & GAMBLE CO	COMMON STOCK	12,581	18,384
PRUDENTIAL FINANCIAL INC	COMMON STOCK	14,784	15,087
QUALCOMM INC	COMMON STOCK	18,071	19,919
SCHEIN HENRY INC	COMMON STOCK	11,575	12,956
SKYWORKS SOLUTIONS INC	COMMON STOCK	7,637	20,106
TE CONNECTIVITY LTD	COMMON STOCK	15,750	13,235
ULTA SALON COSMETICS & FRAGRANCE	COMMON STOCK	4,665	12,242
UNION PACIFIC CORP	COMMON STOCK	9,899	20,735
UNITED HEALTH GROUP INC	COMMON STOCK	7,753	37,368
UNITED TECHNOLOGIES CORP	COMMON STOCK	10,880	15,972
VISA INC	COMMON STOCK	6,840	42,881
WALT DISNEY CO	COMMON STOCK	12,100	24,123
XYLEM INC	COMMON STOCK	3,363	10,008
ISHAR EDGE MSCI MLTFAC	MUTUAL FUND	276,091	258,910
ISHARES EDG MSCI MLTFCTR	MUTUAL FUND	612,879	558,608
ISHR EDG MSCI MLTFC USA	MUTUAL FUND	319,466	297,843
ISHARES TIPS BOND ETF	MUTUAL FUND	18,655	19,164
OPPENHEIMER INTERNATIONAL	MUTUAL FUND	109,659	96,813
SPDR BLMBRG BRCLY INV GR	MUTUAL FUND	91,918	91,110
SPDR GOLD SHARES	MUTUAL FUND	104,973	121,250
SPDR S&P BIOTECH ETF	MUTUAL FUND	14,669	21,525
VANECK VECTORS BIOTECH	MUTUAL FUND	9,967	16,608
WISDOMTREE INDIA	MUTUAL FUND	27,332	25,544
SUBTOTAL CHARLES SCHWAB 5144-1652		**3,576,507**	**3,726,366**
CASH	MONEY MARKET	627	627
SCHWAB GOVT MONEY FUND	MONEY MARKET	68,639	68,639

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B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN SUPPLEMENTARY INFORMATION

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B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

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A T & T INC	COMMON STOCK	23,917	20,977
ANTHEM INC	COMMON STOCK	17,816	72,223
APPLE INC	COMMON STOCK	22,699	59,153
BANK OF NEW YORK	COMMON STOCK	24,657	51,071
BB&T CORPORATION	COMMON STOCK	39,837	52,201
BLACKROCK INC	COMMON STOCK	39,114	66,779
BOEING	COMMON STOCK	5,180	22,575
CHEVRON CORP	COMMON STOCK	27,278	39,164
CISCO SYSTEMS	COMMON STOCK	37,483	52,213
COLGATE PALMOLIVE	COMMON STOCK	25,524	27,379
CVS HEALTH CORP	COMMON STOCK	58,430	44,226
DEERE & CO	COMMON STOCK	11,631	22,376
ENBRIDGE INC	COMMON STOCK	18,240	24,087
EXXON MOBIL CORPORATION	COMMON STOCK	26,679	20,798
FASTENAL CO	COMMON STOCK	21,628	27,452
HONEYWELL INTERNATIONAL	COMMON STOCK	10,776	29,066
INTEL CORP	COMMON STOCK	36,144	59,366
JP MORGAN CHASE & CO	COMMON STOCK	29,250	74,679
M&T BANK CORPORATION	COMMON STOCK	37,009	54,389
MEDTRONIC INC	COMMON STOCK	46,555	55,031
MERCK & CO INC	COMMON STOCK	45,877	66,859
MICROSOFT CORPORATION	COMMON STOCK	17,240	65,005
NEXTERA ENERGY	COMMON STOCK	20,782	66,052
PEPSICO INC.	COMMON STOCK	31,383	48,059
PFIZER INC	COMMON STOCK	42,008	63,074
PHILLIPS 66-W/I	COMMON STOCK	41,724	51,259
TJX COMPANIES INC	COMMON STOCK	38,917	46,977
TRAVELERS COMPANIES	COMMON STOCK	30,751	38,320
US BANCORP	COMMON STOCK	46,226	51,641
VENTAS INCORPORATED	COMMON STOCK	24,747	27,830
VERIZON COMMUNICATIONS	COMMON STOCK	31,764	37,949
WAL-MART STORES INC	COMMON STOCK	26,662	34,931
WILLIAMS SONOMA	COMMON STOCK	32,915	30,522
SUBTOTAL CHARLES SCHWAB 5309-8442		**1,060,108**	**1,572,949**
FIDELITY CASH RESERVE MONEY MARKET	MONEY MARKET	619,935	619,935
AT&T CORP	COMMON STOCK	127,288	125,576
CAPITAL ONE FINANCIAL CORP	COMMON STOCK	160,416	166,298

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B & B LUMBER COMPANY, INC.

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2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
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FAIRFAX FINL HLDGS SUB VTG	COMMON STOCK	135,928	127,166
FIDELITY SHORT TERM BOND	MUTUAL FUND	639,284	636,574
GENERAL ELECTRIC CO	COMMON STOCK	197,318	58,289
ING GROEP NV	COMMON STOCK	144,460	190,050
INTL PAPER CO	COMMON STOCK	159,669	137,224
ISHARES SILVER TR ISHARES	COMMON STOCK	229,696	188,760
MICRON TECHNOLOGY	COMMON STOCK	173,968	126,920
MOSAIC CO NEW COM	COMMON STOCK	160,387	186,944
NATIONAL GRID SPON ADR	COMMON STOCK	256,393	191,920
PROSHARES TR ULTRA SHORT QQQ	COMMON STOCK	295,548	149,751
PROSHARES TR SHORT 20+	COMMON STOCK	191,710	123,145
SOUTHERN CO	COMMON STOCK	177,067	175,680
SUBTOTAL FIDELITY		**3,669,069**	**3,204,231**
IS CAP ONE BK (USA)	MONEY MARKET	89,309	89,309
ISA CAPITAL ONE NA	MONEY MARKET	246,045	246,045
SUBTOTAL MERRILL LYNCH		**335,354**	**335,354**
LIQUID ASSETS GOVT FUND	CASH	28,320	28,320
ACCENTURE PLC IRELAND	COMMON STOCK	27,430	38,073
ADOBE SYSTEMS INC	COMMON STOCK	36,247	55,429
ALPHABET INC	COMMON STOCK	92,635	91,956
AMERICAN TOWER CORP	COMMON STOCK	27,102	34,485
AMERIPRISE FINANCIAL	COMMON STOCK	34,248	28,180
BLACKROCK INC	COMMON STOCK	29,911	31,033
COLGATE PALMOLIVE CO	COMMON STOCK	44,851	39,283
COMCAST CORP	COMMON STOCK	27,598	31,292
DANAHER CORP	COMMON STOCK	34,719	41,557
ECOLAB INC	COMMON STOCK	29,135	37,280
FACEBOOK INC	COMMON STOCK	30,984	25,694
GARRETT MOTION	COMMON STOCK	470	395
HOME DEPOT INC	COMMON STOCK	27,752	39,175
HONEYWELL INTL INC	COMMON STOCK	40,198	39,900
INTERCONTINENTAL EXCHANGE GROUP	COMMON STOCK	16,108	25,537
LOWES COMPANIES	COMMON STOCK	25,255	29,740
MEDTRONIC PLC	COMMON STOCK	32,906	38,476
MICROSOFT	COMMON STOCK	88,265	82,170

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B & B LUMBER COMPANY, INC.

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2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
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EIN: 16-1035246 PLAN NUMBER: 001

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(a) (b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
MONDELEZ INTL INC	COMMON STOCK	38,908	35,186
O REILLY AUTOMOTIVE INC	COMMON STOCK	23,072	31,678
PARKER HANNIFIN CORP	COMMON STOCK	41,870	35,794
RED HAT INC	COMMON STOCK	18,838	43,910
RESIDEO TECHNOLOGIES	COMMON STOCK	1,272	1,110
ROCKWELL AUTOMATION INC	COMMON STOCK	14,722	19,562
SCHLUMBERGER NETHERLANDS	COMMON STOCK	49,375	27,096
THERMO FISHER SCIENTIFIC	COMMON STOCK	27,769	44,310
TJX COS INC	COMMON STOCK	22,152	27,918
UNITEDHEALTH GROUP INC	COMMON STOCK	69,335	66,266
UNTD TECHNOLOGIES CORP	COMMON STOCK	26,326	28,324
VISA INC	COMMON STOCK	66,299	81,011
WALT DISNEY CO	COMMON STOCK	47,979	50,878
SUBTOTAL UBS UT 52209 UN		**1,122,049**	**1,231,018**
LIQUID ASSETS GOVT FUND	CASH	19,493	19,493
AT&T INC	2.450% 6/30/20	16,895	16,779
BB&T CORP MED TERM	2.050% 5/10/21	38,273	37,975
BERKSHIRE HATHAWAY FIN	2.75% 3/15/23	29,265	29,450
BK OF NY MELLON CORP	3.55% 9/23/21	29,454	29,335
CCCIT	2.15% 7/15/21	68,099	66,724
CENTERPOINT ENERGY TRANSITION	2.1606% 10/15/21	23,424	23,232
COMERICA BK	2.5% 6/2/20	21,969	21,727
DUKE ENERGY CAROLINAS	3.9% 6/15/21	33,204	31,417
EXXON MOBIL CORP	2.397% 3/6/22	28,076	27,479
HONEYWELL INTL INC	4.25% 3/1/21	34,630	31,874
JOHNSON & JOHNSON COM	2.050% 3/1/23	28,050	27,051
JP MORGAN CHASE & CO	6.3% 4/23/19	24,739	23,225
KIMBERLY CLARK CORP	2.4% 3/1/22	28,992	27,356
METLIFE INC	3.048% 12/15/22	28,445	27,598
NATL RURAL UTILS COOP	2.35% 6/15/20	15,945	15,837
NTHN STATES PWR CO	3.8% 7/25/23	31,292	31,039
NTHN TR CORP NTS B/E	3.375% 8/23/21	18,753	18,129
PEPSICO INC	3.6% 3/1/24	27,329	27,407
PNC BK NTS	2.2% 1/28/19	30,385	29,102
POTOMAC ELEC PWR CO	3.6% 3/15/24	32,114	31,246
PPL ELEC UTILITIES CORP	3.0% 09/15/21	31,689	31,056
PROCTOR & GAMBLE CO	2.3% 2/6/22	28,626	27,565

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B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN SUPPLEMENTARY INFORMATION

DECEMBER 31, 2018

B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) (b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
PRUDENTIAL FINANCIAL	3.5% 5/15/24	37,236	37,203
ST STREET CORP	3.7% 11/20/23	29,663	28,283
SUNTRUST BANKS INC	2.7% 1/27/22	18,107	17,555
TARGET CORP	3.875% 7/15/20	28,490	26,390
UNITED PARCEL SERVICE	3.125% 1/15/21	27,989	27,221
UNTD TECHNOLOGIES CORP	1.95% 11/01/21	32,516	31,678
US BANK NA CINCINNATI	2.125% 10/28/19	39,213	38,725
US TREASURY NOTE	2.75% 2/15/28	16,477	17,088
US TREASURY NOTE	1.25% 10/31/21	134,126	132,430
US TREASURY NOTE	1.75% 5/13/23	109,304	109,495
US TREASURY NOTE	1.875% 09/30/22	63,505	62,607
US TREASURY NOTE	2.0% 6/30/24	91,906	90,435
US TREASURY NOTE	2.0% 2/15/25	118,928	117,045
US TREASURY NOTE	1.5% 8/15/26	84,134	78,413
US TREASURY NOTE	2.25% 8/15/27	63,165	61,937
WALT DISNEY COMPANY	1.85% 7/30/26	26,297	26,624
SUBTOTAL UBS UT 52208 UN		**1,590,197**	**1,555,225**
UBS BANK USA DEP ACCT	CASH	13,329	13,329
ACCENTURE PLC IRELANC	COMMON STOCK	28,045	24,677
BLACKROCK INC	COMMON STOCK	11,953	14,534
CHEVRON CORP	COMMON STOCK	24,605	24,804
CHUBB LTD	COMMON STOCK	14,778	14,597
COCA COLA COM	COMMON STOCK	18,632	19,177
COLGATE PALMOLIVE	COMMON STOCK	17,943	17,082
COMCAST CORP	COMMON STOCK	16,305	17,808
CRANE CO	COMMON STOCK	14,928	12,776
DIAGEO PLC NEW	COMMON STOCK	12,886	16,732
HOME DEPOT INC	COMMON STOCK	29,200	26,288
INTEL CORP	COMMON STOCK	25,174	33,555
JOHNSON & JOHNSON	COMMON STOCK	33,009	34,198
JP MORGAN CHASE	COMMON STOCK	30,419	27,529
LINDE PLC	COMMON STOCK	12,096	11,547
LOCKHEED MARTIN CORP	COMMON STOCK	13,472	10,997
MARSH & MCLENNAN COS	COMMON STOCK	18,356	18,103
MCDONALDS CORP	COMMON STOCK	20,677	22,907
MEDTRONIC PLC	COMMON STOCK	22,952	23,922

See independent auditors' report

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN SUPPLEMENTARY INFORMATION

DECEMBER 31, 2018

B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H, 4I ATTACHMENT
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) (b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
MICROSOFT CORP	COMMON STOCK	30,684	46,722
NEXTERA ENERGY INC	COMMON STOCK	18,358	19,815
NOVARTIS AG SPON	COMMON STOCK	15,503	17,677
REPUBLIC SERVICES	COMMON STOCK	14,770	15,067
ROCKWELL AUTOMATION INC	COMMON STOCK	13,726	11,587
SUNCOR ENERGY INC	COMMON STOCK	19,343	13,845
SUNTRUST BANKS INC	COMMON STOCK	20,826	15,687
TEXAS INSTRUMENTS	COMMON STOCK	23,429	19,184
UNION PACIFIC	COMMON STOCK	20,542	19,905
UNITED TECHNOLOGIES	COMMON STOCK	17,655	14,907
VF CORP	COMMON STOCK	12,934	11,129
SUBTOTAL UBS UT 52207 UN		**586,528**	**590,089**
PARTICIPANT LOANS	5.25% - 7.25%		**624,885**
TOTAL ASSETS			**12,840,117**

See independent auditors' report

B & B LUMBER COMPANY, INC.

PROFIT SHARING PLAN SUPPLEMENTARY INFORMATION

DECEMBER 31, 2018

B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H, 4I attachment
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF WITHIN YEAR

(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 of Acquisitions	(e) Proceeds of Dispositions
APPLE INC	COMMON STOCK	53,118	60,524
BRITISH AMER TOBACCO PLC	COMMON STOCK	18,157	15,781
INVESCO LTD	COMMON STOCK	8,888	6,495
PACCAR INC	COMMON STOCK	33,379	30,802
UNITED PARCEL SERVICE	COMMON STOCK	40,532	38,848
TOTAL ASSETS ACQUIRED AND DISPOSED OF WITHIN YEAR		**154,074**	**152,450**

See independent auditors' report

B&B LUMBER COMPANY, INC. PROFIT SHARING PLAN
2018 FORM 5500, SCHEDULE H ATTACHMENT
PLAN SPONSOR: B&B LUMBER COMPANY, INC.
EIN: 16-1035246 PLAN NUMBER: 001

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) Identity of issue, borrower, lessor, or similar pa	(c) Description of investment including maturity date,rate of	(d) Cost	(e) Current Value
CASH			570.32
SCHWAB GOVT MONEY FUND	MONEY MARKET		34,208.12
FHLB	1.125% 7/14/21	54,491.19	53,116.42
FEDERAL FARM CRE	1.36% 10/28/19	54,831.01	54,409.91
TORONTO DOMINIO	1.45% 8/13/19	69,805.40	69,355.51
FANNIE MAE	1.5% 10/22/20	68,666.65	68,673.92
FEDERAL FARM CRE	1.875% 4/12/22	64,515.10	63,248.45
ASTRAZENECA	1.95& 9/18/19	69,205.25	69,521.34
NORTHBROOK IL GO 12A	2% 12/1/21	34,109.80	34,263.25
FREDDIE MAC	2% 12/11/20	49,676.38	49,453.90
FEDERAL FARM CRE	2.05% 10/5/22	64,752.55	63,332.49
UST INFL IDX	2.125% 1/15/19	67,163.93	76,424.76
AMERICAN EXPRESS	2.2% 3/3/20	69,154.40	69,251.35
THE BANK OF NEW YORK	2.2% 3/4/19	70,133.75	69,916.49
JPMORGAN CHASE	2.25% 1/23/20	69,263.60	69,281.31
QUALCOMM INC	2.25% 5/20/20	69,963.60	69,024.13
UNIV NC CHARLOT	2.272% 4/1/19	25,025.25	24,965.00
CHEVRON CORP	2.427% 6/24/20	69,710.40	69,575.03
WELLS FARGO & CO	2.5% 3/4/21	70,884.80	68,696.18
DENTON TX ISD	2.5% 8/15/21	20,000.00	19,926.20
BANK OF MONTREAL	2.55% 11/6/22	68,362.55	67,804.17
TJX CO	2.75% 6/15/21	69,871.80	69,313.02
US BANCORP MTN	3% 3/15/22	69,076.65	69,422.50
GENERAL DYNAMICS	3% 5/11/21	69,881.80	70,015.68
NATIONAL RURAL UTIL	3% 8/15/21	40,440.00	38,974.76
OCCIDENTAL PETR	3.125% 2/15/22	69,374.06	69,683.95
PNC FUNDING CORP	3.3% 3/8/22	70,065.79	69,850.69
ALBEMARLE CORP	COMMON STOCK	13,150.83	9,633.75
ALPHABET INC	COMMON STOCK	29,109.57	46,602.45
APPLE INC	COMMON STOCK	7,018.16	17,351.40
BOOKING HOLDINGS	COMMON STOCK	9,120.00	25,836.30
CH ROBINSON WORLDWD	COMMON STOCK	11,516.88	13,874.85
CATERPILLAR INC	COMMON STOCK	5,421.06	9,530.25
CHURCH & DWIGHT CO	COMMON STOCK	8,871.38	13,809.60
COGNIZANT TECHNOLOGY SOLUTIONS CORP	COMMON STOCK	11,422.50	18,091.80
COSTCO WHOLESALE CO	COMMON STOCK	9,062.60	13,241.15
DELL TECHNOLOGIES	COMMON STOCK	18,607.45	2,785.59
DOLLAR TREE INC	COMMON STOCK	18,844.04	30,708.80
EXPEDIA INC	COMMON STOCK	12,332.71	23,656.50
FACEBOOK INC	COMMON STOCK	25,187.50	20,318.95
HEXCEL CORP	COMMON STOCK	12,627.85	18,635.50
JOHNSON & JOHNSON	COMMON STOCK	9,420.30	18,067.00
K L A TENCOR CORP	COMMON STOCK	16,413.85	15,660.75
LAM RESEARCH CORP	COMMON STOCK	19,180.18	13,617.00
LINDE PLC	COMMON STOCK	12,258.75	11,703.00
MCKESSON CORP	COMMON STOCK	19,083.55	23,198.70
MONDELEZ INTERNATIONAL	COMMON STOCK	12,563.28	19,014.25
NXP SEMICONDUCTORS	COMMON STOCK	5,457.04	14,656.00
ORACLE CORP	COMMON STOCK	15,126.06	23,703.75
PROCTOR & GAMBLE CO	COMMON STOCK	12,581.35	18,384.00

(a) Identity of issue, borrower, lessor, or similar pa	(c) Description of investment including maturity date,rate of	(d) Cost	(e) Current Value
PRUDENTIAL FINANCIAL INC	COMMON STOCK	14,784.21	15,086.75
QUALCOMM INC	COMMON STOCK	18,071.36	19,918.50
SCHEIN HENRY INC	COMMON STOCK	11,574.78	12,955.80
SKYWORKS SOLUTIONS INC	COMMON STOCK	7,636.92	20,106.00
TE CONNECTIVITY LTD	COMMON STOCK	15,750.00	13,235.25
ULTA SALON COSMETICS & FRAGRANCE	COMMON STOCK	4,665.36	12,242.00
UNION PACIFIC CORP	COMMON STOCK	9,898.94	20,734.50
UNITED HEALTH GROUP INC	COMMON STOCK	7,753.07	37,368.00
UNITED TECHNOLOGIES CORP	COMMON STOCK	10,880.06	15,972.00
VISA INC	COMMON STOCK	6,840.07	42,880.50
WALT DISNEY CO	COMMON STOCK	12,100.00	24,123.00
XYLEM INC	COMMON STOCK	3,363.22	10,008.00
ISHAR EDGE MSCI MLTFAC	MUTUAL FUND	276,090.50	258,910.05
ISHARES EDG MSCI MLTFCTR	MUTUAL FUND	612,879.00	558,607.60
ISHR EDG MSCI MLTFC USA	MUTUAL FUND	319,465.60	297,843.30
ISHARES TIPS BOND ETF	MUTUAL FUND	18,654.83	19,164.25
OPPENHEIMER INTERNATIONAL	MUTUAL FUND	109,659.04	96,813.40
SPDR BLMBRG BRCLY INV GR	MUTUAL FUND	91,918.13	91,110.00
SPDR GOLD SHARES	MUTUAL FUND	104,973.00	121,250.00
SPDR S&P BIOTECH ETF	MUTUAL FUND	14,669.49	21,525.00
VANECK VECTORS BIOTECH	MUTUAL FUND	9,967.17	16,608.00
WISDOMTREE INDIA	MUTUAL FUND	27,331.98	25,544.00
SUB TOTAL CHARLES SCHWAB 5144-1652		**3,541,729.33**	**3,726,366.09**
CASH	MONEY MARKET		626.50
SCHWAB GOVT MONEY FUND	MONEY MARKET		68,639.12
A T & T INC	COMMON STOCK	23,916.90	20,976.90
ANTHEM INC	COMMON STOCK	17,815.99	72,223.25
APPLE INC	COMMON STOCK	22,698.81	59,152.50
BANK OF NEW YORK	COMMON STOCK	24,657.25	51,070.95
BB&T CORPORATION	COMMON STOCK	39,836.82	52,200.60
BLACKROCK INC	COMMON STOCK	39,114.02	66,779.40
BOEING	COMMON STOCK	5,179.65	22,575.00
CHEVRON CORP	COMMON STOCK	27,277.61	39,164.40
CISCO SYSTEMS	COMMON STOCK	37,483.32	52,212.65
COLGATE PALMOLIVE	COMMON STOCK	25,523.75	27,379.20
CVS HEALTH CORP	COMMON STOCK	58,429.90	44,226.00
DEERE & CO	COMMON STOCK	11,631.12	22,375.50
ENBRIDGE INC	COMMON STOCK	18,240.40	24,087.00
EXXON MOBIL CORPORATION	COMMON STOCK	26,678.71	20,797.95
FASTENAL CO	COMMON STOCK	21,627.53	27,452.25
HONEYWELL INTERNATIONAL	COMMON STOCK	10,775.60	29,066.40
INTEL CORP	COMMON STOCK	36,143.50	59,366.45
JP MORGAN CHASE & CO	COMMON STOCK	29,250.12	74,679.30
M&T BANK CORPORATION	COMMON STOCK	37,008.89	54,389.40
MEDTRONIC INC	COMMON STOCK	46,554.75	55,030.80
MERCK & CO INC	COMMON STOCK	45,877.00	66,858.75
MICROSOFT CORPORATION	COMMON STOCK	17,240.30	65,004.80
NEXTERA ENERGY	COMMON STOCK	20,781.84	66,051.60
PEPSICO INC.	COMMON STOCK	31,382.54	48,058.80
PFIZER INC	COMMON STOCK	42,008.41	63,074.25
PHILLIPS 66-W/I	COMMON STOCK	41,724.11	51,259.25
TJX COMPANIES INC	COMMON STOCK	38,917.01	46,977.00
TRAVELERS COMPANIES	COMMON STOCK	30,751.23	38,320.00
US BANCORP	COMMON STOCK	46,226.42	51,641.00
VENTAS INCORPORATED	COMMON STOCK	24,746.73	27,830.25

(a) Identity of issue, borrower, lessor, or similar pa	(c) Description of investment including maturity date,rate of	(d) Cost	(e) Current Value
VERIZON COMMUNICATIONS	COMMON STOCK	31,764.03	37,948.50
WAL-MART STORES INC	COMMON STOCK	26,662.00	34,931.25
WILLIAMS SONOMA	COMMON STOCK	32,915.30	30,522.25
TOTALCHARLES SCHWAB 5309-8442		**990,841.56**	**1,572,949.22**
FIDELITY CASH RESERVE MONEY MARKET	MONEY MARKET		619,934.62
AT&T CORP	COMMON STOCK	127,288.39	125,576.00
CAPITAL ONE FINANCIAL CORP	COMMON STOCK	160,416.11	166,298.00
FAIRFAX FINL HLDGS SUB VTG	COMMON STOCK	135,928.27	127,165.92
FIDELITY SHORT TERM BOND	MUTUAL FUND	639,284.48	636,573.62
GENERAL ELECTRIC CO	COMMON STOCK	197,318.14	58,289.00
ING GROEP NV	COMMON STOCK	144,460.45	190,050.00
INTL PAPER CO	COMMON STOCK	159,668.61	137,224.00
ISHARES SILVER TR ISHARES	COMMON STOCK	229,696.08	188,760.00
MICRON TECHNOLOGY	COMMON STOCK	173,967.75	126,920.00
MOSAIC CO NEW COM	COMMON STOCK	160,386.73	186,944.00
NATIONAL GRID SPON ADR	COMMON STOCK	256,392.55	191,920.00
PROSHARES TR ULTRA SHORT QQQ	COMMON STOCK	295,548.30	149,751.00
PROSHARES TR SHORT 20+	COMMON STOCK	191,710.45	123,145.00
SOUTHERN CO	COMMON STOCK	177,067.35	175,680.00
SUB TOTAL FIDELITY		**3,049,133.66**	**3,204,231.16**
CASH			0.00
BLK TREASURY STGY INST	MONEY MARKET		1.00
IS CAP ONE BK (USA)	MONEY MARKET		81,185.00
ISA CAPITAL ONE NA	MONEY MARKET		246,045.00
SUBTOTAL MERRILL LYNCH		**0.00**	**327,231.00**
LIQUID ASSETS GOVT FUND	CASH		28,319.64
ACCENTURE PLC IRELAND	COMMON STOCK	27,430.12	38,072.70
ADOBE SYSTEMS INC	COMMON STOCK	36,246.88	55,428.80
ALPHABET INC	COMMON STOCK	92,635.03	91,956.48
AMERICAN TOWER CORP	COMMON STOCK	27,101.89	34,485.42
AMERIPRISE FINANCIAL	COMMON STOCK	34,247.50	28,179.90
BLACKROCK INC	COMMON STOCK	29,910.64	31,032.78
COLGATE PALMOLIVE CO	COMMON STOCK	44,851.03	39,283.20
COMCAST CORP	COMMON STOCK	27,597.60	31,291.95
DANAHER CORP	COMMON STOCK	34,718.64	41,557.36
ECOLAB INC	COMMON STOCK	29,134.60	37,279.55
FACEBOOK INC	COMMON STOCK	30,983.58	25,693.64
GARRETT MOTION	COMMON STOCK	470.42	394.88
HOME DEPOT INC	COMMON STOCK	27,752.06	39,174.96
HONEYWELL INTL INC	COMMON STOCK	40,197.56	39,900.24
INTERCONTINENTAL EXCHANGE GROUP	COMMON STOCK	16,107.60	25,536.87
LOWES COMPANIES	COMMON STOCK	25,254.94	29,739.92
MEDTRONIC PLC	COMMON STOCK	32,905.67	38,476.08
MICROSOFT	COMMON STOCK	88,265.18	82,170.13
MONDELEZ INTL INC	COMMON STOCK	38,908.42	35,186.37
O REILLY AUTOMOTIVE INC	COMMON STOCK	23,071.93	31,678.36
PARKER HANNIFIN CORP	COMMON STOCK	41,870.39	35,793.60
RED HAT INC	COMMON STOCK	18,837.95	43,910.00
RESIDEO TECHNOLOGIES	COMMON STOCK	1,272.10	1,109.70
ROCKWELL AUTOMATION INC	COMMON STOCK	14,722.24	19,562.40
SCHLUMBERGER NETHERLANDS	COMMON STOCK	49,374.86	27,096.08

(a) Identity of issue, borrower, lessor, or similar pa	(c) Description of investment including maturity date,rate of	(d) Cost	(e) Current Value
THERMO FISHER SCIENTIFIC	COMMON STOCK	27,769.02	44,310.42
TJX COS INC	COMMON STOCK	22,152.25	27,917.76
UNITEDHEALTH GROUP INC	COMMON STOCK	69,335.25	66,265.92
UNTD TECHNOLOGIES CORP	COMMON STOCK	26,325.75	28,323.68
VISA INC	COMMON STOCK	66,298.88	81,011.16
WALT DISNEY CO	COMMON STOCK	47,979.05	50,877.60
SUBTOTAL UBS UT 52209 UN		**1,093,729.03**	**1,231,017.55**
LIQUID ASSETS GOVT FUND	CASH		19,493.39
AT&T INC	2.450% 6/30/20	16,895.28	16,778.83
BB&T CORP MED TERM	2.050% 5/10/21	38,273.43	37,975.47
BERKSHIRE HATHAWAY FIN	2.75% 3/15/23	29,265.30	29,450.40
BK OF NY MELLON CORP	3.55% 9/23/21	29,453.85	29,334.95
CCCIT	2.15% 7/15/21	68,098.80	66,723.96
CENTERPOINT ENERGY TRANSITION	2.1606% 10/15/21	23,423.50	23,231.77
COMERICA BK	2.5% 6/2/20	21,969.42	21,726.76
DUKE ENERGY CAROLINAS	3.9% 6/15/21	33,204.10	31,416.95
EXXON MOBIL CORP	2.397% 3/6/22	28,076.44	27,478.64
HONEYWELL INTL INC	4.25% 3/1/21	34,629.79	31,873.58
JOHNSON & JOHNSON COM	2.050% 3/1/23	28,049.56	27,050.80
JP MORGAN CHASE & CO	6.3% 4/23/19	24,739.03	23,224.94
KIMBERLY CLARK CORP	2.4% 3/1/22	28,992.04	27,355.72
METLIFE INC	3.048% 12/15/22	28,445.48	27,597.92
NATL RURAL UTILS COOP	2.35% 6/15/20	15,944.64	15,836.80
NTHN STATES PWR CO	3.8% 7/25/23	31,291.84	31,039.36
NTHN TR CORP NTS B/E	3.375% 8/23/21	18,752.76	18,129.24
PEPSICO INC	3.6% 3/1/24	27,329.40	27,407.43
PNC BK NTS	2.2% 1/28/19	30,385.33	29,102.37
POTOMAC ELEC PWR CO	3.6% 3/15/24	32,114.14	31,246.14
PPL ELEC UTILITIES CORP	3.0% 09/15/21	31,688.51	31,056.11
PROCTOR & GAMBLE CO	2.3% 2/6/22	28,625.80	27,564.88
PRUDENTIAL FINANCIAL	3.5% 5/15/24	37,236.43	37,203.13
ST STREET CORP	3.7% 11/20/23	29,662.95	28,282.80
SUNTRUST BANKS INC	2.7% 1/27/22	18,106.56	17,555.22
TARGET CORP	3.875% 7/15/20	28,489.50	26,390.26
UNITED PARCEL SERVICE	3.125% 1/15/21	27,989.28	27,221.13
UNTD TECHNOLOGIES CORP	1.95% 11/01/21	32,515.89	31,678.35
US BANK NA CINCINNATI	2.125% 10/28/19	39,213.33	38,724.66
US TREASURY NOTE	2.75% 2/15/28	16,477.39	17,087.72
US TREASURY NOTE	1.25% 10/31/21	134,126.40	132,429.68
US TREASURY NOTE	1.75% 5/13/23	109,303.91	109,494.74
US TREASURY NOTE	1.875% 09/30/22	63,505.23	62,607.36
US TREASURY NOTE	2.0% 6/30/24	91,905.88	90,435.06
US TREASURY NOTE	2.0% 2/15/25	118,927.63	117,044.51
US TREASURY NOTE	1.5% 8/15/26	84,133.59	78,412.50
US TREASURY NOTE	2.25% 8/15/27	63,164.53	61,937.28
WALT DISNEY COMPANY	1.85% 7/30/26	26,297.40	26,623.80
SUBTOTAL UBS UT 52208 UN		**1,570,704.34**	**1,555,224.61**
UBS BANK USA DEP ACCT	CASH		13,329.27
ACCENTURE PLC IRELANC	COMMON STOCK	28,044.74	24,676.75
BLACKROCK INC	COMMON STOCK	11,953.22	14,534.34
CHEVRON CORP	COMMON STOCK	24,604.88	24,804.12
CHUBB LTD	COMMON STOCK	14,778.14	14,597.34

(a) Identity of issue, borrower, lessor, or similar pa	(c) Description of investment including maturity date,rate of	(d) Cost	(e) Current Value
COCA COLA COM	COMMON STOCK	18,632.30	19,176.75
COLGATE PALMOLIVE	COMMON STOCK	17,943.07	17,082.24
COMCAST CORP	COMMON STOCK	16,304.65	17,808.15
CRANE CO	COMMON STOCK	14,928.15	12,775.86
DIAGEO PLC NEW	COMMON STOCK	12,885.87	16,732.40
HOME DEPOT INC	COMMON STOCK	29,199.59	26,288.46
INTEL CORP	COMMON STOCK	25,173.68	33,554.95
JOHNSON & JOHNSON	COMMON STOCK	33,009.01	34,198.25
JP MORGAN CHASE	COMMON STOCK	30,418.86	27,528.84
LINDE PLC	COMMON STOCK	12,095.67	11,546.96
LOCKHEED MARTIN CORP	COMMON STOCK	13,472.17	10,997.28
MARSH & MCLENNAN COS	COMMON STOCK	18,356.41	18,103.25
MCDONALDS CORP	COMMON STOCK	20,677.00	22,906.53
MEDTRONIC PLC	COMMON STOCK	22,952.12	23,922.48
MICROSOFT CORP	COMMON STOCK	30,683.73	46,722.20
NEXTERA ENERGY INC	COMMON STOCK	18,358.21	19,815.48
NOVARTIS AG SPON	COMMON STOCK	15,502.75	17,676.86
REPUBLIC SERVICES	COMMON STOCK	14,770.20	15,066.81
ROCKWELL AUTOMATION INC	COMMON STOCK	13,726.00	11,586.96
SUNCOR ENERGY INC	COMMON STOCK	19,342.87	13,845.15
SUNTRUST BANKS INC	COMMON STOCK	20,826.24	15,686.84
TEXAS INSTRUMENTS	COMMON STOCK	23,428.52	19,183.50
UNION PACIFIC	COMMON STOCK	20,541.70	19,905.12
UNITED TECHNOLOGIES	COMMON STOCK	17,655.40	14,907.20
VF CORP	COMMON STOCK	12,933.53	11,129.04
SUBTOTAL UBS UT 52207 UN		**573,198.68**	**590,089.38**
PARTICIPANT LOANS	5.25% - 7.25%		**624,884.72**
TOTAL ASSETS			**12,831,993.73**

Schedule H, line 4i

Schedule of Assets (Acquired and Disposed of Within Year).

For the plan year beginning **01/01/2018** and ending **12/31/2018**

Name of plan

B & B Lumber Company, Inc. Profit Sharing Plan

Employer Identification Number

16-1035246

Three-digit plan number ► **001**

(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)** Costs of acquisitions	**(d)** Proceeds of dispositions
APPLE INC	**COMMON STOCK**	**53,118**	**60,524**
BRITISH AMER TOBACCO PLC	**COMMON STOCK**	**18,157**	**15,781**
INVESCO LTD	**COMMON STOCK**	**8,888**	**6,495**
PACCAR INC	**COMMON STOCK**	**33,379**	**30,802**
UNITED PARCEL SERVICE	**COMMON STOCK**	**40,532**	**38,848**

Schedule H, line 4i
Schedule of Assets (Held At End of Year)

For the plan year beginning **01/01/2018** and ending **12/31/2018**

Name of plan
B & B Lumber Company, Inc. Profit Sharing Plan

Employer Identification Number
16-1035246

Three-digit plan number ► **001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	SEE ATTACHED			