

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
	☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ an amended return/report ☐ the final return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☒
D	Check box if filing under: ☒ Form 5558 ☐ special extension (enter description) ☐ automatic extension ☐ the DFVC program
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan <u>MASONITE CORPORATION RETIREMENT PLAN</u>
1b	Three-digit plan number (PN) ▶ <u>100</u>
	1c Effective date of plan <u>01/01/2002</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>MASONITE CORPORATION</u> <u>1242 5TH AVENUE</u> <u>TAMPA, FL 33602</u>
2b	Employer Identification Number (EIN) <u>64-0198020</u>
2c	Plan Sponsor's telephone number <u>866-554-4054</u>
2d	Business code (see instructions) <u>321900</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2022	THELECIA JOHNSON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☐ Same as Plan Sponsor MASONITE CORPORATION ADVISORY COMMITTEE ONE TAMPA CITY CENTER 201 NORTH FRANKLIN ST., SUITE 300 TAMPA, FL 33602		3b Administrator's EIN 59-3666648	
		3c Administrator's telephone number 813-877-2726	
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	781
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..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested			
		6a(1)	287
		6a(2)	0
		6b	0
		6c	0
		6d	0
		6e	0
		6f	0
		6g	
		6h	0
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: 1A 1B 1I 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

▶ **Round off amounts to nearest dollar.**

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

A Name of plan <u>MASONITE CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>100</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>MASONITE CORPORATION</u>	D Employer Identification Number (EIN) <u>64-0198020</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>	
2 Assets:	
a Market value	2a <u>88006401</u>
b Actuarial value	2b <u>80022451</u>
3 Funding target/participant count breakdown	
a For retired participants and beneficiaries receiving payment.....	(1) Number of participants <u>272</u> (2) Vested Funding Target <u>42116223</u> (3) Total Funding Target <u>42116223</u>
b For terminated vested participants.....	<u>228</u> <u>6641518</u> <u>6641518</u>
c For active participants	<u>287</u> <u>11890156</u> <u>12411708</u>
d Total.....	<u>787</u> <u>60647897</u> <u>61169449</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b
5 Effective interest rate	5 <u>5.52</u> %
6 Target normal cost.....	
a Present value of current plan year accruals.....	6a <u>4855</u>
b Expected plan-related expenses	6b <u>320000</u>
c Total (line 6a + line 6b)	6c <u>324855</u>

Statement by Enrolled Actuary

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

SIGN HERE		<u>09/30/2022</u>
Signature of actuary		Date
<u>VANESSA SOSKIND</u>		<u>20-06307</u>
Type or print name of actuary		Most recent enrollment number
<u>MERCER</u>		<u>813-207-6333</u>
Firm name		Telephone number (including area code)
<u>3031 NORTH ROCKY POINT DRIVE WEST</u> <u>SUITE 700</u> <u>TAMPA, FL 33607333607</u>		
Address of the firm		

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

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

Schedule SB (Form 5500) 2021
v. 201209

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>12.89</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1464972
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.31</u> %		77790
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		1542762
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	130.82 %
15 Adjusted funding target attainment percentage	15	122.34 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	118.10 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
11/10/2021	3950000				
Totals ▶			18(b)	3950000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3772131

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

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

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.36 %	3rd segment: 6.11 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes	☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	324855	
b Excess assets, if applicable, but not greater than line 31a	31b	324855	
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	0		0
b Waiver amortization installment	0		0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	3772131	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	3772131	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:	
a Schedule elected	☐ 2 plus 7 years ☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan MASONITE CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ▶	100
C Plan sponsor's name as shown on line 2a of Form 5500 MASONITE CORPORATION	D Employer Identification Number (EIN) 64-0198020	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
CHARLES SCHWAB & CO. INC. AND AFFIL
94-1737782

(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)

MERCER US INC

13-2834414

(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?
28 50	NONE	1139464	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHWAB RETIREMENT PLAN SERVICES, INC

34-1479833

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50 64	NONE	207128	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HILL WARD & HENDERSON PA

59-2678550

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	56077	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)

AFS ADVISORS LLC

27-4398433

(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?
28 50	NONE	40000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WINDHAM BRANNON PC

58-1763439

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	15750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHARLES SCHWAB & CO., INC.

94-1737782

(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?
59	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	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
CHARLES SCHWAB & CO. INC. AND AFFIL	59	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
SEE ATTACHMENT 06-1349805	SEE ATTACHMENT	

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan MASONITE CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ►	100
C Plan sponsor's name as shown on line 2a of Form 5500 MASONITE CORPORATION		
D Employer Identification Number (EIN) 64-0198020		

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	-329415	243701
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1600000	0
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	142	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	0	0
(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)	86792910	1
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	88063637 243702
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	0 0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	88063637 243702

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers).....	2a(1)(C)	
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	0
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	276
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	
	(F) Other	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	276
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	2243629
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	2243629
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(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)		-3721151
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		-1477246
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	84817103	
(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)		84817103
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)	1251292	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)	274294	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		1525586
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		86342689
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-87819935
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: WINDHAM BRANNON, LLC

(2) EIN: 58-1763439

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
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.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
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			
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 0.			
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)			
5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)	
5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 440213.			

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 2021 This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan MASONITE CORPORATION RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 100
C Plan sponsor's name as shown on line 2a of Form 5500 MASONITE CORPORATION		D Employer Identification Number (EIN) 64-0198020
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 84-1233483		
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		3 423
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2021 v. 201209		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

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

a Enter the number of employers who withdrew during the preceding plan year.....

16a

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

16b

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

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

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

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

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

**Masonite Corporation
Retirement Plan**

Financial Statements
December 31, 2021 and 2020

Masonite Corporation Retirement Plan

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INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee and participants of the
Masonite Corporation Retirement Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements

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

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from a qualified institution as of December 31, 2021, and for the year then ended, stating that the certified investment information, as described in Note 3 to the financial statements is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section of the report,

- the amounts and disclosures in the accompanying 2021 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (GAAP); and
- the certified investment information in the accompanying 2021 financial statements agrees to, or is derived from, in all material respects, the information prepared and certified by a qualified institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section of our report. We are required to be independent of the Plan and to meet our ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the 2021 financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is substantial likelihood that, individually or in the aggregate, they would influence the judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgement and maintain professional skepticism throughout the audit.

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

Our audit did not extend to the certified investment information except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2021 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2021 financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

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

Emphasis of Matter – Plan Termination and Use of Liquidation Basis of Accounting

As discussed in Note 1 to the financial statements, the Board of Directors of the Masonite Corporation voted to terminate the Plan on February 15, 2021, effective March 31, 2021, and management determined liquidation was imminent. As a result, the Plan has changed its basis of accounting from the going concern basis used in presenting the 2020 financial statements to the liquidation basis used in presenting the 2021 financial statements. Our opinion is not modified with respect to this matter.

Other Matter – 2021 Supplemental Schedule Required by ERISA

The 2021 supplemental schedule, Schedule H, Line 4j – Schedule of Reportable Transactions, is presented for purposes of additional analysis and is not a required part of the 2021 financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the 2021 financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing

procedures applied in the audit of the 2021 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2021 financial statements or to the 2021 financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion,

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

Other Matter – Report on the 2020 Financial Statements

We were engaged to audit the statement of net assets available for benefits of the Plan as of December 31, 2020 and the related statement of changes in net assets available for benefits for the year the ended. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information certified by the qualified institution. Our audit report, dated October 8, 2021, indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an opinion and accordingly, we did not express an opinion on the 2020 financial statements, and (b) the form and content of the information included in the 2020 financial statements other than that derived from the information certified by the qualified institution were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Windham Brannon, LLC

October 14, 2022

Masonite Corporation Retirement Plan

Statements of Net Assets Available for Benefits December 31, 2021 (in Liquidation) and December 31, 2020 (Ongoing)

	2021 (in Liquidation)	2020 (Ongoing)
Assets		
Non-interest bearing cash	\$ 243,701	\$ -
Investments, at fair value		
Mutual funds	-	86,792,910
Money market fund	-	142
Total investments, at fair value	-	86,793,052
Employer contributions receivable	-	1,600,000
Total assets	243,701	88,393,052
Liabilities		
Amounts payable for investments purchased	-	329,415
Net assets available for benefits	\$ 243,701	\$ 88,063,637

Masonite Corporation Retirement Plan

Statements of Changes in Net Assets Available for Benefits For the Years Ended December 31, 2021 (in Liquidation) and December 31, 2020 (Ongoing)

	2021 (in Liquidation)	2020 (Ongoing)
Additions		
Net change in fair value of investments	\$ (1,477,249)	\$ 9,974,069
Employer contributions	3,950,000	1,600,000
Total additions	2,472,751	11,574,069
Deductions		
Benefit payments	88,767,102	3,826,269
Administrative expenses	1,525,585	356,534
Total deductions	90,292,687	4,182,803
Net (decrease) increase	(87,819,936)	7,391,266
Net assets available for benefits		
Beginning of year	88,063,637	80,672,371
End of year	\$ 243,701	\$ 88,063,637

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

1. Description of the Plan

The following description of the Masonite Corporation Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions. Masonite Corporation, the Plan Sponsor, is owned 100% by Masonite International, Inc. (the Company).

General

The Plan is a non-contributory defined benefit plan covering the following groups: salaried employees at the Company locations who were active employees on August 31, 2001, and who were participants in the International Paper Company Retirement Plan, which merged into the Plan on January 1, 2002; salaried administrative, clerical or office employees at most locations of the Company; and hourly Laurel, Mississippi, union employees. All nonunion employees hired by or transferred to the Company on or after November 1, 2002 are not eligible to participate in the Plan, except for Laurel, Mississippi, for which the date is April 15, 2011. Eligibility is contingent upon hire date, age and service, which varies by location. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan has been amended in prior years to freeze benefit accruals for all participants beginning January 1, 1999 to December 31, 2003, except for Laurel, Mississippi, for which the date is April 15, 2013.

Plan Termination

On February 15, 2021, the Board of Directors of the Company approved the termination of the Plan effective March 31, 2021 (Termination Date). All required filings with the Department of Labor (DOL) and the Pension Benefit Guaranty Corporation (PBGC) have been made and notices of intent to terminate the Plan were sent to all participants in 2021. Effective with the Plan's termination, all participants with an account balance remaining in the Plan became fully vested, regardless of status or years of service. As a result of termination, the assets of the Plan were allocated for the payment of participant benefits in accordance with ERISA and the Plan document. In 2021, the Plan allowed active and terminated vested participants to elect their form of distribution from the Plan and made lump sum distributions to electing participants. Furthermore, in November 2021, the Plan paid \$61,134,000 to purchase annuity contracts from Banner Life Insurance Company to provide benefits to retirees currently receiving payments and active or terminated vested participants electing to receive their future benefits via an annuity. Effective with the Plan's termination, all participants with an account balance remaining in the Plan will become fully vested, regardless of status or years of service. The remaining assets in the Plan at December 31, 2021 will first be used to pay Plan expenses and any remaining amount will be returned to the Company.

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

In accordance with accounting principles generally accepted in the United States, the Plan changed its basis of accounting from the going concern basis to the liquidation basis at the Termination Date.

Contributions

Prior to the Termination Date, all contributions to the Plan were accounted for on the accrual basis and were made by the Plan Sponsor based upon actuarially determined annual funding requirements of the Plan, and in a manner consistent with the requirements of ERISA. The Plan met the minimum funding requirements of ERISA for the years ended December 31, 2021 and 2020.

Benefit Payments

Prior to the Termination Date, upon attainment of the normal retirement age of 65, each participant was entitled to an accrued benefit based on years of credited service through the applicable freeze date multiplied by a monthly dollar multiplier or a percentage of compensation, depending upon employment location. The benefit calculation considered certain previous, noncontributory retirement benefits earned by the participant from the Company or any of its related entities.

Prior to the Termination Date, the Plan permitted early retirement at reduced benefit payments for those participants who have reached age 55 and had at least ten years of service prior to the applicable freeze date.

Unless otherwise elected in accordance with Plan provisions, a married participant received the benefits in the form of a joint and survivor annuity. Unmarried participants, unless otherwise waived in accordance with Plan provisions, received the benefits in the form of a life annuity.

Death and Disability Benefits

Prior to the Termination Date, in the event of death prior to normal retirement age, a participant's beneficiary was entitled to receive a death benefit equal to the actuarial equivalent of the participant's accrued benefit at the date of death. Participants were entitled to disability benefits should they become totally disabled prior to normal retirement age.

In addition to any benefit payable under any optional form of benefit available to beneficiaries of Laurel, Mississippi participants, the Plan provided for a lump sum death benefit. Effective February 24, 2011, the Plan was amended to increase the lump sum death benefit from \$3,000 to \$5,000 available to a participant's beneficiary.

Vesting

Upon termination of the Plan, all participants became fully vested.

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

Administrative Expenses

The Plan is responsible for paying all administrative expenses not paid by the Company. In 2021 and 2020, the Plan paid all trustee fees, investment management fees, and other administrative expenses of the Plan. Payments made by the Plan to service providers of the Plan qualify for party-in-interest transactions. PBGC premiums were paid by the Company in 2021 and 2020. The Company does not expect reimbursement for these expenses.

2. Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated Plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Valuation of Investments

The Plan's investments are stated 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.

Net change in fair value of investments includes realized and unrealized gains and losses, interest and dividends on those investments.

Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated Plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated Plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on credited service hours and annual compensation or a monthly dollar multiplier, depending on the location of the participants. The accumulated plan benefits for active employees are based on their credit service and a monthly dollar multiplier or compensation. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included to the extent they are deemed attributable to service rendered to the valuation date.

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

Management evaluates events occurring subsequent to the date of the financial statements in determining the accounting for and disclosure of transactions and events that affect the financial statements. Subsequent events have been evaluated through October 14, 2022, which is the date the financial statements were available to be issued.

3. Information Certified by the Qualified Institution

All investment information in the accompanying financial statements and supplemental schedule, including investments held at December 31, 2021 and 2020, and net change in fair value of investments for the years then ended, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by, Charles Schwab Trust Bank, the Plan's qualified institution.

4. Investments

Investments are exposed to several risks, such as market, interest rate, currency and credit risks. Market risks include U.S. and global events which could impact the value of Plan investments. Such events would include healthcare crises, such as a pandemic, international conflicts, supply chain disruptions, global monetary policy decisions, significant exogenous economic influences, significant cybersecurity attacks, etc. It is at least reasonably possible that changes in their fair values will occur in the near term and that such changes could materially affect participants' account balances.

The Financial Accounting Standards Board established 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 into three levels. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities, and the lowest priority to unobservable inputs. The three levels of the fair value hierarchy are described as follows:

Level 1 – unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access

Level 2 – other observable data, including quoted prices for identical assets in inactive markets

Level 3 – unobservable inputs

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

Observable inputs are those based on market data obtained from sources independent of the Plan, and unobservable inputs reflect the Plan's own assumptions based on the best information available. The input levels are not necessarily an indication of the risk or liquidity associated with financial instruments at that level but rather the degree of judgment used in determining those values.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020.

Investments in mutual funds and the money market fund are stated at quoted market prices for the identical security in an active market (Level 1).

The investments at December 31, 2021 and 2020 are comprised of the following:

	Level 1	
	2021	2020
Mutual funds	\$ -	\$ 86,792,910
Money market fund	-	142
Total	\$ -	\$ 86,793,052

5. Benefit Obligations

As of the beginning of the Plan year, the actuarial present value of accumulated Plan benefits has been determined by an independent consulting actuary, and is the amount that results from applying actuarial assumptions to adjust the accumulated Plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected dates of payment. The significant actuarial assumptions used in the valuation of the Plan were: (a) termination of participants at a range of rates based on employee age and years of service, (b) retirements occurring at various times between the ages of 55 and 70, (c) an assumed prescribed mortality rate under Section 417(e) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants, and (d) an assumed interest rate of 3.5% as of January 1, 2021. As of the beginning of the Plan year, there were 287 active participants, 272 terminated vested participants and 228 retired participants receiving benefits.

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

Under the previously discussed assumptions, the actuarial present value of accumulated Plan benefits at January 1, 2021 are as follows:

Actuarial present value of accumulated benefits:	
Retired participants and beneficiaries currently receiving benefits	\$ 48,515,606
Terminated vested participants	9,146,961
Active participants	16,029,682
Total vested accumulated benefits	73,692,249
Nonvested benefits	764,088
Total actuarial present value of accumulated Plan benefits	\$ 74,456,337

Changes in the actuarial present value of accumulated Plan benefits from January 1, 2020 to January 1, 2021 consist of the following:

Actuarial present value of accumulated Plan benefits at January 1, 2020	\$ 56,159,494
Changes due to:	
Investment gains	(882,595)
Increase for interest in the discount period	3,591,781
Assumption changes	19,552,743
Benefits paid	(3,965,086)
Actuarial present value of accumulated Plan benefits at January 1, 2021	\$ 74,456,337

The changes in assumptions relate to decreasing the interest rate from 6.65% to 3.50% and updating the mortality table used for lump sum actuarial equivalence from the 2020 Applicable Mortality Table under Code Section 417(e) to the 2021 Applicable Mortality Table under Code Section 417(e)

The Plan's Adjusted Funding Target Attainment Percentage (AFTAP), calculated under provisions of the Internal Revenue Code (IRC), was 122.34% at January 1, 2021. Accordingly, there were no restrictions on distributions.

Plan contributions are made and the actuarial present value of accumulated Plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Masonite Corporation Retirement Plan

Notes to Financial Statements

December 31, 2021 and 2020

6. Income Tax Status

The Plan obtained its latest determination letter on April 18, 2017, in which the Internal Revenue Service stated that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the IRC and has no income subject to unrelated business income tax. The Plan's income tax returns for the past three years are subject to examination by taxing authorities and may change upon examination.

7. Party-In-Interest Transactions

The Plan held a money market fund and mutual fund managed by Charles Schwab Trust Bank, the qualified institution of the Plan. Therefore, transactions in these investments qualified as party-in-interest transactions.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 249

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
-----	-----	-----	-----	-----	-----
PIMCO INVESTMENT GRADE CR BD INST					
TICKER: PIGIX					
=====					
12/31/20	14,578.946	SOLD	11.29	0.00	164,596.30
1/ 8/21	2,091,482.114	PURCHASED	11.14	0.00	-23,299,110.75
1/11/21	1,213,084.785	PURCHASED	11.11	0.00	-13,477,371.96
1/14/21	253.061	SOLD	11.14	0.00	2,819.10
1/22/21	652.639	SOLD	11.16	0.00	7,283.45
1/29/21	15,761.346	PURCHASED	0.00	0.00	-175,581.40
1/29/21	28,598.233	SOLD	11.14	0.00	318,584.32
2/ 1/21	252.780	SOLD	11.15	0.00	2,818.50
2/11/21	252.915	SOLD	11.15	0.00	2,820.00
2/12/21	2,263.824	SOLD	11.10	0.00	25,128.45
2/26/21	19,100.595	PURCHASED	0.00	0.00	-208,578.50
2/26/21	29,609.504	SOLD	10.92	0.00	323,335.78
3/ 1/21	258.943	SOLD	10.90	0.00	2,822.48
3/ 8/21	932.295	SOLD	10.74	0.00	10,012.85
3/15/21	1,307.807	SOLD	10.75	0.00	14,058.93
3/16/21	2,736.828	SOLD	10.75	0.00	29,420.90
3/25/21	14,748.505	SOLD	10.75	0.00	158,546.43
3/31/21	20,156.137	PURCHASED	0.00	0.00	-216,073.79
3/31/21	29,193.411	SOLD	10.72	0.00	312,953.37
4/ 1/21	4,412.156	SOLD	10.78	0.00	47,563.04
4/ 6/21	216,580.491	PURCHASED	10.80	0.00	-2,339,069.30
4/ 9/21	434.236	SOLD	10.80	0.00	4,689.75
4/22/21	6,442.110	SOLD	10.87	0.00	70,025.74
4/30/21	22,547.626	PURCHASED	0.00	0.00	-244,190.79
4/30/21	29,916.575	SOLD	10.83	0.00	323,996.51

See Independent Auditor's Report

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Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 250

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE -----	SHARES/PV -----	PURCHASE/SALE PRICE -----	TRANSACTION EXPENSE -----	PURCHASE/SALE PROCEEDS -----	COST/ADJUSTED HISTORICAL COST -----	
5/ 5/21	267.928	SOLD	10.86	0.00	2,909.70	2,993.79
5/17/21	533.376	SOLD	10.81	0.00	5,765.79	5,959.88
5/21/21	179.151	SOLD	10.83	0.00	1,940.21	2,001.81
5/27/21	13,245.989	SOLD	10.86	0.00	143,851.44	148,009.00
5/28/21	18,943.975	PURCHASED	0.00	0.00	-205,731.57	205,731.57
5/28/21	29,923.761	SOLD	10.86	0.00	324,972.04	334,339.86
6/ 2/21	7,104.593	SOLD	10.88	0.00	77,297.97	79,380.02
6/14/21	12,867.344	SOLD	10.95	0.00	140,897.42	143,767.56
6/18/21	418.957	SOLD	11.00	0.00	4,608.53	4,681.03
6/30/21	20,566.444	PURCHASED	0.00	0.00	-226,025.22	226,025.22
6/30/21	29,916.846	SOLD	10.99	0.00	328,786.14	334,247.06
7/13/21	68,249.318	SOLD	11.00	0.00	750,742.50	762,518.00
7/14/21	217.217	SOLD	11.05	0.00	2,400.25	2,426.86
7/26/21	170.501	SOLD	11.07	0.00	1,887.45	1,904.93
7/29/21	670.665	SOLD	11.09	0.00	7,437.68	7,493.03
7/30/21	21,822.537	PURCHASED	0.00	0.00	-242,230.16	242,230.16
7/30/21	29,158.269	SOLD	11.10	0.00	323,656.79	325,765.39
8/ 4/21	261.452	SOLD	11.14	0.00	2,912.58	2,921.02
8/ 5/21	259.118	SOLD	11.11	0.00	2,878.80	2,894.95
8/ 6/21	586.774	SOLD	11.04	0.00	6,477.98	6,555.62
8/12/21	569.969	SOLD	11.00	0.00	6,269.66	6,367.87
8/24/21	260.316	SOLD	11.06	0.00	2,879.10	2,908.33
8/25/21	4,067.525	SOLD	11.03	0.00	44,864.80	45,443.67
8/31/21	19,345.079	PURCHASED	0.00	0.00	-214,343.47	214,343.47
8/31/21	29,112.197	SOLD	11.08	0.00	322,563.14	325,243.39
9/ 1/21	11,655.768	SOLD	11.08	0.00	129,145.91	130,219.01
9/10/21	1,924,316.014	SOLD	11.06	0.00	21,282,935.11	21,498,585.67
9/28/21	1,173,242.095	SOLD	10.90	0.00	12,788,338.84	13,107,538.22
9/30/21	16,834.639	PURCHASED	0.00	0.00	-183,497.56	183,497.56

See Independent Auditor's Report

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Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 251

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST	
-----	-----	-----	-----	-----	-----	
10/25/21	25,202.509	PURCHASED	10.79	0.00	-271,935.07	271,935.07
10/29/21	12,871.858	PURCHASED	0.00	0.00	-139,273.50	139,273.50
11/ 2/21	4,069,225.334	SOLD	10.82	0.00	44,029,018.11	45,442,913.43
11/30/21	866.035	PURCHASED	0.00	0.00	-9,353.18	9,353.18
12/ 1/21	866.035	SOLD	10.82	0.00	9,370.50	9,353.18
12/31/21	0.082	PURCHASED	0.00	0.00	-0.88	0.88
				0.00	124,018,651.44	

VANGUARD FED MONEY MKT FD INVEST SHR
TICKER: VMFXX

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1/ 8/21	142.390	SOLD	1.00	0.00	142.39	142.39
3/19/21	846.000	PURCHASED	1.00	0.00	-846.00	846.00
3/25/21	0.720	SOLD	1.00	0.00	0.72	0.72
3/25/21	846.000	PURCHASED	1.00	0.00	-846.00	846.00
3/31/21	6.970	SOLD	1.00	0.00	6.97	6.97
4/ 1/21	1.050	SOLD	1.00	0.00	1.05	1.05
4/ 6/21	1,683.260	SOLD	1.00	0.00	1,683.26	1,683.26
9/ 3/21	6,016.540	PURCHASED	1.00	0.00	-6,016.54	6,016.54
9/10/21	2,750.000	SOLD	1.00	0.00	2,750.00	2,750.00
9/10/21	22,939,482.850	PURCHASED	1.00	0.00	-22,939,482.85	22,939,482.85
9/16/21	7,406.810	SOLD	1.00	0.00	7,406.81	7,406.81
9/16/21	1,600,000.000	PURCHASED	1.00	0.00	-1,600,000.00	1,600,000.00
9/28/21	1,291,693.620	SOLD	1.00	0.00	1,291,693.62	1,291,693.62
9/30/21	118.560	PURCHASED	0.00	0.00	-118.56	118.56
9/30/21	334,327.980	SOLD	1.00	0.00	334,327.98	334,327.98
10/ 1/21	19,311,987.400	SOLD	1.00	0.00	19,311,987.40	19,311,987.40
10/ 6/21	67,166.000	SOLD	1.00	0.00	67,166.00	67,166.00

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 252

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
10/ 7/21	20,123.790	SOLD	1.00	0.00	20,123.79
10/11/21	234,995.810	SOLD	1.00	0.00	234,995.81
10/12/21	3,190,235.610	SOLD	1.00	0.00	3,190,235.61
10/14/21	10,000.000	SOLD	1.00	0.00	10,000.00
10/15/21	25,964.290	SOLD	1.00	0.00	25,964.29
10/18/21	15,478.450	SOLD	1.00	0.00	15,478.45
10/25/21	557,427.250	PURCHASED	1.00	-557,427.25	557,427.25
10/29/21	28.670	PURCHASED	0.00	-28.67	28.67
10/29/21	355,793.650	SOLD	1.00	0.00	355,793.65
11/ 2/21	59,070,332.280	PURCHASED	1.00	-59,070,332.28	59,070,332.28
11/ 3/21	471,312.710	SOLD	1.00	0.00	471,312.71
11/ 9/21	297.500	SOLD	1.00	0.00	297.50
11/10/21	58,833,872.530	SOLD	1.00	0.00	58,833,872.53
11/30/21	129.210	PURCHASED	0.00	-129.21	129.21
12/ 1/21	129.210	SOLD	1.00	0.00	129.21
				0.00	168,350,597.11

VANGUARD LONG TERM INV GRADE ADM SHS
TICKER: VWETX

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
12/31/20	13,961.313	SOLD	11.79	0.00	164,603.88
1/ 8/21	2,036,063.365	SOLD	11.40	0.00	23,211,122.36
1/11/21	1,183,263.561	SOLD	11.39	0.00	13,477,371.96
1/14/21	15.813	SOLD	11.44	0.00	180.90
1/22/21	40.711	SOLD	11.46	0.00	466.55
1/29/21	3,973.568	PURCHASED	0.00	-45,378.15	45,378.15
1/29/21	1,786.979	SOLD	11.42	0.00	20,407.30
2/ 1/21	15.879	SOLD	11.43	0.00	181.50

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN
ACCOUNT NUMBER: 801496
REPORTING PERIOD: 12/31/20 TO 12/31/21
PAGE : 253

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
-----	-----	-----	-----	-----	-----
2/11/21	15.915 SOLD	11.31	0.00	180.00	186.64
2/12/21	142.828 SOLD	11.21	0.00	1,601.10	1,674.98
2/26/21	1,218.219 PURCHASED	0.00	0.00	-13,363.86	13,363.86
2/26/21	1,826.307 SOLD	10.97	0.00	20,034.59	21,417.58
3/ 1/21	16.316 SOLD	10.88	0.00	177.52	191.31
3/ 8/21	58.638 SOLD	10.61	0.00	622.15	687.54
3/15/21	81.972 SOLD	10.56	0.00	865.62	961.14
3/16/21	172.181 SOLD	10.54	0.00	1,814.79	2,018.86
3/25/21	929.040 SOLD	10.60	0.00	9,847.83	10,893.17
3/31/21	438.712 PURCHASED	0.00	0.00	-4,624.02	4,624.02
3/31/21	1,252.858 PURCHASED	0.00	0.00	-13,205.12	13,205.12
3/31/21	1,257.287 PURCHASED	0.00	0.00	-13,251.81	13,251.81
3/31/21	1,838.014 SOLD	10.54	0.00	19,372.67	21,536.72
4/ 1/21	275.939 SOLD	10.68	0.00	2,947.01	3,233.28
4/ 6/21	218,037.420 SOLD	10.72	0.00	2,337,361.14	2,554,828.46
4/ 9/21	13.564 SOLD	10.70	0.00	145.13	158.93
4/22/21	200.671 SOLD	10.83	0.00	2,173.26	2,351.34
4/30/21	744.923 PURCHASED	0.00	0.00	-8,007.92	8,007.92
4/30/21	932.146 SOLD	10.75	0.00	10,020.57	10,919.37
5/ 5/21	8.346 SOLD	10.82	0.00	90.30	97.77
5/17/21	16.655 SOLD	10.67	0.00	177.71	195.10
5/21/21	5.583 SOLD	10.71	0.00	59.79	65.40
5/27/21	414.338 SOLD	10.78	0.00	4,466.56	4,853.65
5/28/21	621.297 PURCHASED	0.00	0.00	-6,703.79	6,703.79
5/28/21	933.415 SOLD	10.79	0.00	10,071.55	10,931.87
6/ 2/21	221.846 SOLD	10.79	0.00	2,393.72	2,598.19
6/14/21	403.064 SOLD	10.96	0.00	4,417.58	4,720.56
6/18/21	12.977 SOLD	11.21	0.00	145.47	151.98
6/30/21	597.332 PURCHASED	0.00	0.00	-6,666.23	6,666.23

See Independent Auditor's Report



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 254

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE	PRICE	TRANSACTION	PURCHASE/SALE	COST/ADJUSTED
-----	-----		-----	EXPENSE	PROCEEDS	HISTORICAL COST
-----	-----		-----	-----	-----	-----
6/30/21	933.103	SOLD	11.16	0.00	10,413.43	10,926.86
7/13/21	67,210.610	PURCHASED	11.17	0.00	-750,742.51	750,742.51
7/14/21	8.859	SOLD	11.26	0.00	99.75	102.64
7/26/21	6.989	SOLD	11.31	0.00	79.05	80.98
7/29/21	27.517	SOLD	11.35	0.00	312.32	318.81
7/30/21	681.542	PURCHASED	0.00	0.00	-7,762.76	7,762.76
7/30/21	1,190.076	SOLD	11.39	0.00	13,554.96	13,787.80
8/ 4/21	10.673	SOLD	11.47	0.00	122.42	123.65
8/ 5/21	10.613	SOLD	11.42	0.00	121.20	122.96
8/ 6/21	24.137	SOLD	11.27	0.00	272.02	279.64
8/12/21	23.307	SOLD	11.17	0.00	260.34	270.03
8/24/21	10.680	SOLD	11.32	0.00	120.90	123.73
8/25/21	166.762	SOLD	11.26	0.00	1,877.74	1,932.05
8/31/21	751.949	PURCHASED	0.00	0.00	-8,512.06	8,512.06
8/31/21	1,193.476	SOLD	11.32	0.00	13,510.15	13,826.37
9/ 1/21	476.177	SOLD	11.33	0.00	5,395.09	5,516.49
9/10/21	146,338.140	SOLD	11.32	0.00	1,656,547.74	1,695,321.71
9/28/21	1,271,908.984	PURCHASED	11.07	0.00	-14,080,032.46	14,080,032.46
9/30/21	750.034	PURCHASED	0.00	0.00	-8,295.38	8,295.38
10/25/21	75,328.094	SOLD	11.01	0.00	829,362.32	837,835.42
10/29/21	3,607.091	PURCHASED	0.00	0.00	-40,363.35	40,363.35
11/ 2/21	1,345,376.938	SOLD	11.18	0.00	15,041,314.17	14,964,175.13
11/30/21	230.081	PURCHASED	0.00	0.00	-2,588.41	2,588.41
12/ 1/21	230.081	SOLD	11.27	0.00	2,593.01	2,588.41
12/31/21	0.018	PURCHASED	0.00	0.00	-0.20	0.20
T				0.00	71,888,775.15	

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.

Schedule SB, line 26 — Schedule of Active Participant Data

Attained age	Years of credited service										
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	Total
Under 25											
25–29											
30–34			1								1
35–39		3	5								8
40–44		3	16	3	1						23
45–49		3	16	11	7						37
50–54		10	19	13	10						52
55–59		6	16	27	17	4					70
60–64		3	10	22	14	2	4	5	12		72
65–69			1	2	2	2	3	2	4	2	18
70 & up			3	1	1			1			6
Total		28	87	79	52	8	7	8	16	2	287

In each cell, the number is the count of active participants for each age/service combination.

Service is frozen for all participants.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Actuarial assumptions for January 1, 2021 funding valuation**

Discount rate sponsor elections		
• Segment rates or full yield curve	Segment	
• Look-back months	4	
	Stabilized	Nonstabilized
• First 5 years	4.75%	2.22%
• Next 15 years	5.36%	3.38%
• Over 20 years	6.11%	3.92%
Mortality sponsor elections		
• Healthy participants	Section 430(h)(3) prescribed separate static annuitant and nonannuitant mortality tables. These tables are based on the RP-2014 mortality tables with improvements beyond 2006 removed with static mortality improvements based on the IRS methodology and projection scale MP-2019.	
• Disabled participants	Same as healthy participants.	
417(e) lump sums	Liabilities are determined based on the underlying annuity used by the plan to determine the lump sum amount, rather than valuing the lump sum payment. This annuity is valued based on funding interest rates rather than 417(e) rates and current year 417(e) unisex mortality.	
Other economic assumptions		
• Salary increases	Not applicable	
• Flat-dollar benefit increases	None	
• Social Security wage base	Not applicable	
• Expected investment return	2.58% per year for 2021, 5.43% per year for 2020, and 5.75% per year for 2019.	
• Expenses	\$320,000 added to current year normal cost.	

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

Demographic assumptions			
• Withdrawal	2003 SOA Select and Ultimate Table, (≥ 10 years). See table of sample rates		
• Disability incidence	1985 Pension Disability Table Class 1 (gender specific). See table of sample rates		
• Retirement age	See table of sample rates		
• Benefit commencement age for			
— Future vested deferred	Laurel Hourly: Age 60; All others: Age 62		
— Current vested deferred	Laurel Hourly: Age 60; All others: Age 62		
— Deferred beneficiaries	Participant's age 65		
• Spouse assumptions			
Percentage married	Male participants	Female participants	
— Mohawk and PSD	80%	80%	
— All others	80%	50%	
— Spouse age difference	3 years younger	3 years older	
Form of payment	Lump sum	Single life	50% J&S
• Active retirements			
— Mohawk	80%	10%	10%
— All others	0%	50%	50%
• Future vested deferred			
— Mohawk	80%	10%	10%
— All others	0%	50%	50%
• Future disabilities	0%	100%	0%
• Future deaths	0%	0%	100%
• Current vested deferred	0%	50%	50%
Unpredictable contingent event assumptions	Not applicable		

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Table of Sample Rates****Representative Withdrawal Rates**

Attained age	Percentage
25	8.75%
30	4.84%
35	5.02%
40	4.15%
45	3.73%
50	3.49%
55	0.00%

Retirement Rates

Attained age	Percentage
55	5.00%
56	1.00%
57	1.00%
58	1.00%
59	1.00%
60	1.00%
61	1.00%
62	30.00%
63	30.00%
64	30.00%
65	30.00%
66	40.00%
67	25.00%
68	40.00%
69	40.00%
70 and above	100.00%

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Disability Sample Rates (per 1,000 employees)**

Attained age	Males	Females
25	0.40	0.50
30	0.50	0.80
35	0.70	1.40
40	1.20	2.10
45	2.00	3.20
50	3.60	5.30
55	7.20	9.50
60	12.60	11.60

Rationale for Economic Assumptions

- **Expected Investment Return:** This assumption is based on the median simulated investment return using capital market assumptions published in Mercer Investment Consulting's Capital Markets Outlook for the plan's current target asset mix, net of an adjustment for investment expenses assumed to be paid from plan assets.
- **Expenses:** This assumption is based on the average of actual prior three years expenses (excluding PBGC premiums) paid by the trust plus expected PBGC premiums for the current year.

Rationale for Demographic Assumptions

- **Withdrawal:** Termination rates were developed based on an experience study undertaken in 2014 using data from January 1, 2010 to January 1, 2014. The plan sponsor believes that this period will be representative of anticipated future experience.
- **Disability incidence:** The disability incidence is based on the Conference of Consulting Actuaries 1985 Pension Disability Study Class 1 rates, a commonly used table based on a study of Social Security disability experience. The plan sponsor is not aware of any factors that would cause the expected disability incidence for their plan population to differ substantially from that of the Social Security experience.
- **Retirement age:** The retirement rates are based on an experience study undertaken in 2014 using data from January 1, 2010 to January 1, 2014 and the expectation that the future retirement patterns and circumstances of the employer will not differ significantly from the period studied.
- **Benefit commencement age for vested deferred participants:** The benefit commencement age is based on an experience study undertaken in 2014 using data from January 1, 2010 to January 1, 2014 and the expectation that future retirement patterns and circumstances for the employer will not differ significantly from the period studied.
- **Spouse assumption:** Because the employer does not have enough credible experience to analyze spousal demographics, the assumptions regarding percent married/spouse age difference at benefit commencement are based on the actuary's experience with many plans and discussions with employer representatives.
- **Form of payment:** The optional payment elections are based on an experience study conducted in 2014 based on data from January 1, 2010 to January 1, 2014 and the expectation that future patterns will not differ significantly from the period studied.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Actuarial Methods for Funding****Asset Methods**

The asset valuation method is an average of the adjusted market value for each year during the last two years preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110 percent and no less than 90 percent of the fair market value, as defined in IRC Section 430.

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant Methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break-in-service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does not have any insurance contracts.

Minimum Funding Methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- This plan provides benefits that are not a function of a participant's accrued benefit or years of service. This benefit is allocated to funding target based on the ratio of the participant's service at the beginning of the plan year to their service at each decrement age and is allocated to target normal cost based on the proportionate benefit attributable to the increase in the participant's service and compensation during the plan year.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 249

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
-----	-----	-----	-----	-----	-----
PIMCO INVESTMENT GRADE CR BD INST TICKER: PIGIX					
=====					
12/31/20	14,578.946	SOLD	11.29	0.00	164,596.30
1/ 8/21	2,091,482.114	PURCHASED	11.14	0.00	-23,299,110.75
1/11/21	1,213,084.785	PURCHASED	11.11	0.00	-13,477,371.96
1/14/21	253.061	SOLD	11.14	0.00	2,819.10
1/22/21	652.639	SOLD	11.16	0.00	7,283.45
1/29/21	15,761.346	PURCHASED	0.00	0.00	-175,581.40
1/29/21	28,598.233	SOLD	11.14	0.00	318,584.32
2/ 1/21	252.780	SOLD	11.15	0.00	2,818.50
2/11/21	252.915	SOLD	11.15	0.00	2,820.00
2/12/21	2,263.824	SOLD	11.10	0.00	25,128.45
2/26/21	19,100.595	PURCHASED	0.00	0.00	-208,578.50
2/26/21	29,609.504	SOLD	10.92	0.00	323,335.78
3/ 1/21	258.943	SOLD	10.90	0.00	2,822.48
3/ 8/21	932.295	SOLD	10.74	0.00	10,012.85
3/15/21	1,307.807	SOLD	10.75	0.00	14,058.93
3/16/21	2,736.828	SOLD	10.75	0.00	29,420.90
3/25/21	14,748.505	SOLD	10.75	0.00	158,546.43
3/31/21	20,156.137	PURCHASED	0.00	0.00	-216,073.79
3/31/21	29,193.411	SOLD	10.72	0.00	312,953.37
4/ 1/21	4,412.156	SOLD	10.78	0.00	47,563.04
4/ 6/21	216,580.491	PURCHASED	10.80	0.00	-2,339,069.30
4/ 9/21	434.236	SOLD	10.80	0.00	4,689.75
4/22/21	6,442.110	SOLD	10.87	0.00	70,025.74
4/30/21	22,547.626	PURCHASED	0.00	0.00	-244,190.79
4/30/21	29,916.575	SOLD	10.83	0.00	323,996.51

See Independent Auditor's Report

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TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 250

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE -----	SHARES/PV -----	PURCHASE/SALE PRICE -----	TRANSACTION EXPENSE -----	PURCHASE/SALE PROCEEDS -----	COST/ADJUSTED HISTORICAL COST -----	
5/ 5/21	267.928	SOLD	10.86	0.00	2,909.70	2,993.79
5/17/21	533.376	SOLD	10.81	0.00	5,765.79	5,959.88
5/21/21	179.151	SOLD	10.83	0.00	1,940.21	2,001.81
5/27/21	13,245.989	SOLD	10.86	0.00	143,851.44	148,009.00
5/28/21	18,943.975	PURCHASED	0.00	0.00	-205,731.57	205,731.57
5/28/21	29,923.761	SOLD	10.86	0.00	324,972.04	334,339.86
6/ 2/21	7,104.593	SOLD	10.88	0.00	77,297.97	79,380.02
6/14/21	12,867.344	SOLD	10.95	0.00	140,897.42	143,767.56
6/18/21	418.957	SOLD	11.00	0.00	4,608.53	4,681.03
6/30/21	20,566.444	PURCHASED	0.00	0.00	-226,025.22	226,025.22
6/30/21	29,916.846	SOLD	10.99	0.00	328,786.14	334,247.06
7/13/21	68,249.318	SOLD	11.00	0.00	750,742.50	762,518.00
7/14/21	217.217	SOLD	11.05	0.00	2,400.25	2,426.86
7/26/21	170.501	SOLD	11.07	0.00	1,887.45	1,904.93
7/29/21	670.665	SOLD	11.09	0.00	7,437.68	7,493.03
7/30/21	21,822.537	PURCHASED	0.00	0.00	-242,230.16	242,230.16
7/30/21	29,158.269	SOLD	11.10	0.00	323,656.79	325,765.39
8/ 4/21	261.452	SOLD	11.14	0.00	2,912.58	2,921.02
8/ 5/21	259.118	SOLD	11.11	0.00	2,878.80	2,894.95
8/ 6/21	586.774	SOLD	11.04	0.00	6,477.98	6,555.62
8/12/21	569.969	SOLD	11.00	0.00	6,269.66	6,367.87
8/24/21	260.316	SOLD	11.06	0.00	2,879.10	2,908.33
8/25/21	4,067.525	SOLD	11.03	0.00	44,864.80	45,443.67
8/31/21	19,345.079	PURCHASED	0.00	0.00	-214,343.47	214,343.47
8/31/21	29,112.197	SOLD	11.08	0.00	322,563.14	325,243.39
9/ 1/21	11,655.768	SOLD	11.08	0.00	129,145.91	130,219.01
9/10/21	1,924,316.014	SOLD	11.06	0.00	21,282,935.11	21,498,585.67
9/28/21	1,173,242.095	SOLD	10.90	0.00	12,788,338.84	13,107,538.22
9/30/21	16,834.639	PURCHASED	0.00	0.00	-183,497.56	183,497.56

See Independent Auditor's Report



TRUST BANK

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EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 251

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST	
10/25/21	25,202.509	PURCHASED	10.79	0.00	-271,935.07	271,935.07
10/29/21	12,871.858	PURCHASED	0.00	0.00	-139,273.50	139,273.50
11/ 2/21	4,069,225.334	SOLD	10.82	0.00	44,029,018.11	45,442,913.43
11/30/21	866.035	PURCHASED	0.00	0.00	-9,353.18	9,353.18
12/ 1/21	866.035	SOLD	10.82	0.00	9,370.50	9,353.18
12/31/21	0.082	PURCHASED	0.00	0.00	-0.88	0.88
			0.00	124,018,651.44		

VANGUARD FED MONEY MKT FD INVEST SHR
TICKER: VMFXX

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST	
1/ 8/21	142.390	SOLD	1.00	0.00	142.39	142.39
3/19/21	846.000	PURCHASED	1.00	0.00	-846.00	846.00
3/25/21	0.720	SOLD	1.00	0.00	0.72	0.72
3/25/21	846.000	PURCHASED	1.00	0.00	-846.00	846.00
3/31/21	6.970	SOLD	1.00	0.00	6.97	6.97
4/ 1/21	1.050	SOLD	1.00	0.00	1.05	1.05
4/ 6/21	1,683.260	SOLD	1.00	0.00	1,683.26	1,683.26
9/ 3/21	6,016.540	PURCHASED	1.00	0.00	-6,016.54	6,016.54
9/10/21	2,750.000	SOLD	1.00	0.00	2,750.00	2,750.00
9/10/21	22,939,482.850	PURCHASED	1.00	0.00	-22,939,482.85	22,939,482.85
9/16/21	7,406.810	SOLD	1.00	0.00	7,406.81	7,406.81
9/16/21	1,600,000.000	PURCHASED	1.00	0.00	-1,600,000.00	1,600,000.00
9/28/21	1,291,693.620	SOLD	1.00	0.00	1,291,693.62	1,291,693.62
9/30/21	118.560	PURCHASED	0.00	0.00	-118.56	118.56
9/30/21	334,327.980	SOLD	1.00	0.00	334,327.98	334,327.98
10/ 1/21	19,311,987.400	SOLD	1.00	0.00	19,311,987.40	19,311,987.40
10/ 6/21	67,166.000	SOLD	1.00	0.00	67,166.00	67,166.00

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN

ACCOUNT NUMBER: 801496

REPORTING PERIOD: 12/31/20 TO 12/31/21

PAGE : 252

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
10/ 7/21	20,123.790	SOLD	1.00	0.00	20,123.79
10/11/21	234,995.810	SOLD	1.00	0.00	234,995.81
10/12/21	3,190,235.610	SOLD	1.00	0.00	3,190,235.61
10/14/21	10,000.000	SOLD	1.00	0.00	10,000.00
10/15/21	25,964.290	SOLD	1.00	0.00	25,964.29
10/18/21	15,478.450	SOLD	1.00	0.00	15,478.45
10/25/21	557,427.250	PURCHASED	1.00	-557,427.25	557,427.25
10/29/21	28.670	PURCHASED	0.00	-28.67	28.67
10/29/21	355,793.650	SOLD	1.00	355,793.65	355,793.65
11/ 2/21	59,070,332.280	PURCHASED	1.00	-59,070,332.28	59,070,332.28
11/ 3/21	471,312.710	SOLD	1.00	471,312.71	471,312.71
11/ 9/21	297.500	SOLD	1.00	297.50	297.50
11/10/21	58,833,872.530	SOLD	1.00	58,833,872.53	58,833,872.53
11/30/21	129.210	PURCHASED	0.00	-129.21	129.21
12/ 1/21	129.210	SOLD	1.00	129.21	129.21
			0.00	168,350,597.11	

VANGUARD LONG TERM INV GRADE ADM SHS
TICKER: VWETX

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
12/31/20	13,961.313	SOLD	11.79	0.00	164,603.88
1/ 8/21	2,036,063.365	SOLD	11.40	0.00	23,211,122.36
1/11/21	1,183,263.561	SOLD	11.39	0.00	13,477,371.96
1/14/21	15.813	SOLD	11.44	0.00	180.90
1/22/21	40.711	SOLD	11.46	0.00	466.55
1/29/21	3,973.568	PURCHASED	0.00	-45,378.15	45,378.15
1/29/21	1,786.979	SOLD	11.42	0.00	20,407.30
2/ 1/21	15.879	SOLD	11.43	0.00	181.50

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.



TRUST BANK

Masonite Corporation Retirement Plan
Schedule H, Line 4j - Schedule of Reportable Transactions
EIN: 64-0198020 Plan Number: 100
For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN
ACCOUNT NUMBER: 801496
REPORTING PERIOD: 12/31/20 TO 12/31/21
PAGE : 253

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
BY ISSUE
COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE -----	SHARES/PV -----	PURCHASE/SALE PRICE -----	TRANSACTION EXPENSE -----	PURCHASE/SALE PROCEEDS -----	COST/ADJUSTED HISTORICAL COST -----	
2/11/21	15.915	SOLD	11.31	0.00	180.00	186.64
2/12/21	142.828	SOLD	11.21	0.00	1,601.10	1,674.98
2/26/21	1,218.219	PURCHASED	0.00	0.00	-13,363.86	13,363.86
2/26/21	1,826.307	SOLD	10.97	0.00	20,034.59	21,417.58
3/ 1/21	16.316	SOLD	10.88	0.00	177.52	191.31
3/ 8/21	58.638	SOLD	10.61	0.00	622.15	687.54
3/15/21	81.972	SOLD	10.56	0.00	865.62	961.14
3/16/21	172.181	SOLD	10.54	0.00	1,814.79	2,018.86
3/25/21	929.040	SOLD	10.60	0.00	9,847.83	10,893.17
3/31/21	438.712	PURCHASED	0.00	0.00	-4,624.02	4,624.02
3/31/21	1,252.858	PURCHASED	0.00	0.00	-13,205.12	13,205.12
3/31/21	1,257.287	PURCHASED	0.00	0.00	-13,251.81	13,251.81
3/31/21	1,838.014	SOLD	10.54	0.00	19,372.67	21,536.72
4/ 1/21	275.939	SOLD	10.68	0.00	2,947.01	3,233.28
4/ 6/21	218,037.420	SOLD	10.72	0.00	2,337,361.14	2,554,828.46
4/ 9/21	13.564	SOLD	10.70	0.00	145.13	158.93
4/22/21	200.671	SOLD	10.83	0.00	2,173.26	2,351.34
4/30/21	744.923	PURCHASED	0.00	0.00	-8,007.92	8,007.92
4/30/21	932.146	SOLD	10.75	0.00	10,020.57	10,919.37
5/ 5/21	8.346	SOLD	10.82	0.00	90.30	97.77
5/17/21	16.655	SOLD	10.67	0.00	177.71	195.10
5/21/21	5.583	SOLD	10.71	0.00	59.79	65.40
5/27/21	414.338	SOLD	10.78	0.00	4,466.56	4,853.65
5/28/21	621.297	PURCHASED	0.00	0.00	-6,703.79	6,703.79
5/28/21	933.415	SOLD	10.79	0.00	10,071.55	10,931.87
6/ 2/21	221.846	SOLD	10.79	0.00	2,393.72	2,598.19
6/14/21	403.064	SOLD	10.96	0.00	4,417.58	4,720.56
6/18/21	12.977	SOLD	11.21	0.00	145.47	151.98
6/30/21	597.332	PURCHASED	0.00	0.00	-6,666.23	6,666.23

See Independent Auditor's Report



TRUST BANK

Masonite Corporation Retirement Plan
 Schedule H, Line 4j - Schedule of Reportable Transactions
 EIN: 64-0198020 Plan Number: 100
 For the Year Ended December 31, 2021

MASONITE CORPORATION RETIREMENT PLAN
 ACCOUNT NUMBER: 801496
 REPORTING PERIOD: 12/31/20 TO 12/31/21
 PAGE : 254

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
 BY ISSUE
 COMPUTED ON A 12/31/20 VALUE OF \$86,463,639.11

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST	
-----	-----	-----	-----	-----	-----	
6/30/21	933.103	SOLD	11.16	0.00	10,413.43	10,926.86
7/13/21	67,210.610	PURCHASED	11.17	0.00	-750,742.51	750,742.51
7/14/21	8.859	SOLD	11.26	0.00	99.75	102.64
7/26/21	6.989	SOLD	11.31	0.00	79.05	80.98
7/29/21	27.517	SOLD	11.35	0.00	312.32	318.81
7/30/21	681.542	PURCHASED	0.00	0.00	-7,762.76	7,762.76
7/30/21	1,190.076	SOLD	11.39	0.00	13,554.96	13,787.80
8/ 4/21	10.673	SOLD	11.47	0.00	122.42	123.65
8/ 5/21	10.613	SOLD	11.42	0.00	121.20	122.96
8/ 6/21	24.137	SOLD	11.27	0.00	272.02	279.64
8/12/21	23.307	SOLD	11.17	0.00	260.34	270.03
8/24/21	10.680	SOLD	11.32	0.00	120.90	123.73
8/25/21	166.762	SOLD	11.26	0.00	1,877.74	1,932.05
8/31/21	751.949	PURCHASED	0.00	0.00	-8,512.06	8,512.06
8/31/21	1,193.476	SOLD	11.32	0.00	13,510.15	13,826.37
9/ 1/21	476.177	SOLD	11.33	0.00	5,395.09	5,516.49
9/10/21	146,338.140	SOLD	11.32	0.00	1,656,547.74	1,695,321.71
9/28/21	1,271,908.984	PURCHASED	11.07	0.00	-14,080,032.46	14,080,032.46
9/30/21	750.034	PURCHASED	0.00	0.00	-8,295.38	8,295.38
10/25/21	75,328.094	SOLD	11.01	0.00	829,362.32	837,835.42
10/29/21	3,607.091	PURCHASED	0.00	0.00	-40,363.35	40,363.35
11/ 2/21	1,345,376.938	SOLD	11.18	0.00	15,041,314.17	14,964,175.13
11/30/21	230.081	PURCHASED	0.00	0.00	-2,588.41	2,588.41
12/ 1/21	230.081	SOLD	11.27	0.00	2,593.01	2,588.41
12/31/21	0.018	PURCHASED	0.00	0.00	-0.20	0.20
				0.00	71,888,775.15	

See Independent Auditor's Report

Charles Schwab Trust Bank, 2360 Corporate Circle, Henderson, NV 89074
 Investment Products: Not FDIC Insured. No Bank guarantee. May lose value.

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2021**This Form is Open to Public
Inspection**For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan MASONITE CORPORATION RETIREMENT PLAN		B Three-digit plan number (PN) ▶	100
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF MASONITE CORPORATION		D Employer Identification Number (EIN) 64-0198020	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500	

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>			
2 Assets:			
a Market value		2a	88,006,401
b Actuarial value		2b	80,022,451
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	272	42,116,223	42,116,223
b For terminated vested participants.....	228	6,641,518	6,641,518
c For active participants	287	11,890,156	12,411,708
d Total.....	787	60,647,897	61,169,449
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions		4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....		4b	
5 Effective interest rate	5		5.52%
6 Target normal cost			
a Present value of current plan year accruals.....		6a	4,855
b Expected plan-related expenses		6b	320,000
c Total (line 6a + line 6b)		6c	324,855

Statement by Enrolled Actuary

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

**SIGN
HERE**

VSS

Signature of actuary

VANESSA SOSKIND

Type or print name of actuary

MERCER

Firm name

3031 NORTH ROCKY POINT DRIVE WEST
SUITE 700

TAMPA FL 33607-3333607

Address of the firm

09/30/2022

Date

2006307

Most recent enrollment number

813-207-6333

Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.****Schedule SB (Form 5500) 2021
v. 201209**

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>12.89%</u>	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1,464,972
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.31%</u>		77,790
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		1,542,762
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	130.82%
15 Adjusted funding target attainment percentage	15	122.34%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	118.10%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
11/10/2021	3,950,000				
Totals ▶			18(b)	3,950,000	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years	19a
b Contributions made to avoid restrictions adjusted to valuation date	19b
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 3,772,131
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	
c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year	
(1) 1st	(2) 2nd
(3) 3rd	(4) 4th

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.36 %	3rd segment: 6.11 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):												
a Target normal cost (line 6c)	31a	324,855										
b Excess assets, if applicable, but not greater than line 31a	31b	324,855										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment	0	0	b Waiver amortization installment	0	0
	Outstanding Balance	Installment										
a Net shortfall amortization installment	0	0										
b Waiver amortization installment	0	0										
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33											
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0										
		Carryover balance	Prefunding balance									
35 Balances elected for use to offset funding requirement		0	0									
36 Additional cash requirement (line 34 minus line 35)	36	0										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	3,772,131										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	3,772,131										
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0										
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0										
40 Unpaid minimum required contributions for all years	40	0										

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:	
a Schedule elected	☐ 2 plus 7 years ☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

MASONITE CORPORATION RETIREMENT PLAN
Schedule C, Part I, Line 3 - Service Provider Indirect Compensation Information
December 31, 2021

EIN: 64-0198020

Plan Number: 100

Received by Charles Schwab & Co., Inc. (EIN#94-1737782)

Fund Family/Provider	EIN	Formula
Allianz Global Investors	06-1349805	Rate of 0.02% of average daily balance of asset(s)

Schedule SB, line 22 — Description of Weighted Average Retirement Age

Each employee is assumed to retire in accordance with the table of retirement rates. The average retirement age is 63.

Age	Retirement Percent	Lx	#Ret	#Ret x Age
55	5.0%	10,000	500	27,500
56	1.0%	9,500	95	5,320
57	1.0%	9,405	94	5,361
58	1.0%	9,311	93	5,400
59	1.0%	9,218	92	5,439
60	1.0%	9,126	91	5,475
61	1.0%	9,034	90	5,511
62	30.0%	8,944	2,683	166,360
63	30.0%	6,261	1,878	118,330
64	30.0%	4,383	1,315	84,146
65	30.0%	3,068	920	59,822
66	40.0%	2,147	859	56,693
67	25.0%	1,288	322	21,582
68	40.0%	966	387	26,285
69	40.0%	580	232	16,003
70 and above	100.0%	348	348	24,352
Sum			10,000	633,579
Average Age				63.36

The weighted average retirement age is the total for #Ret x Age divided by the total for #Ret, rounded to the nearest age. It should be noted that while only integral values are shown in the table, the full content of each cell, including decimal portions, is used in the calculations.

Schedule SB, Part V — Summary of Plan Provisions**Summary of major plan provisions**

Effective date and plan year	Original plan: January 1, 2002 Plan year: Calendar year
Status of the plan	<u>For employees at the Laurel, Mississippi location only:</u> The plan is closed to employees hired or rehired on or after April 15, 2011. Effective April 15, 2011 benefit accruals are frozen for participants under age 50 on April 15, 2011. Effective April 15, 2013, benefit accruals are frozen for participants age 50 or over on April 15, 2011. <u>For employees at all other locations:</u> The plan is closed to employees hired by or transferred to Masonite Corporation on or after November 1, 2002 (June 1, 2001 for PSD, January 1, 2003 for Mohawk). Benefit accruals were frozen effective December 31, 2003 (June 1, 2001 for PSD)
Significant events that occurred during the year	Masonite Corporation terminated the Masonite Corporation Retirement Plan effective March 31, 2021. All Plan assets are expected to be distributed before the end of 2021.

Schedule SB, Part V — Summary of Plan Provisions**LAUREL HOURLY (BENEFIT SCHEDULES 1 AND 2)****Definitions**

• Covered employees	Hourly employees of Masonite Corporation at the Laurel Mississippi location employed on a non-temporary basis. Both employees not covered by a collective bargaining agreement and employees covered by a collective bargaining agreement are included.
• Participation	An eligible employee becomes a participant on the date of hire. The plan is closed to employees hired or rehired on or after April 15, 2011.
• Employee contributions	None.
• Vesting service	The total period or periods of employment, calculated in years and months, from date of hire with Masonite or predecessor companies to severance date.
• Credited service	The number of whole and partial years in all periods of service.
• Accrued benefit	Normal Retirement Benefit earned as of date of calculation.

Normal retirement

• Eligibility	Age 65
• Benefit	The monthly benefit is equal to years of credited service at Normal Retirement Date times the monthly benefit multiplier in effect at Normal Retirement Date, as follows: • \$15.00 from January 15, 1999 to January 15, 2005 • \$18.00 from January 16, 2005 to January 15, 2007 • \$19.00 from January 16, 2007 to January 15, 2008 • \$22.00 from January 16, 2008 to January 15, 2009 • \$24.00 from January 16, 2009 to January 15, 2010 • \$25.00 from January 16, 2010. Effective July 1, 2007 and for participants terminating or retiring on or after July 1, 2007 and before January 16, 2008 with 30 or more years of vesting service and 62 or more years of age, the applicable monthly benefit multiplier is \$22.00. Effective September 1, 2008 and for participants terminating or retiring on or after September 1, 2008 and before January 16, 2009 with 30 or more years of vesting service and 62 or more years of age, the applicable monthly benefit multiplier is \$24.00. Effective November 14, 2008 and for participants terminating or retiring on or after November 14, 2008 and before January 16, 2010, the applicable monthly benefit multiplier is \$24.00. Effective April 15, 2011, benefit accruals are frozen for participants under the age of 50 on April 15, 2011. Effective April 15, 2013, benefit accruals are frozen for participants age 50 or over on April 15, 2011.

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Early retirement	
• Eligibility	Age 55 and 10 years of vesting service.
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction is 5/9 of 1% for each month prior to age 65 for ages 60 to 65 and 5/18 of 1% for each month prior to age 60 for ages 55 to 60. Effective July 1, 2007, a participant with 30 or more years of vesting service and 62 or more years of age may retire early with an unreduced benefit. Effective January 16, 2010, the service requirement for unreduced early retirement changes from 30 to 25.
Late retirement	
• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit determined as of late retirement date. Benefits are not payable until actual retirement.
Deferred vested	
• Eligibility	5 years of vesting service.
• Benefit	Accrued benefit calculated as of the date of termination of employment payable at Normal Retirement Date. Participants who completed 10 years of service may elect to commence benefits prior to Normal Retirement Date. Reduction factors are the same as for early retirement.
Disability	
• Eligibility	At least 10 years of vesting service and permanent and continuous disability for the rest of the life of the participant as determined by a qualified physician. The condition must have occurred while an active employee and continued for at least 6 consecutive months.
• Benefit	Accrued benefit calculated as of date of disability with no reduction for early commencement.
Pre-retirement death	
• Eligibility	5 years of vesting service and death before pension commencement.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – Lump sum death benefit (see below). <u>Married Participant</u> - Lump sum death benefit (see below) plus the survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
• Lump sum death benefit	\$3,000 payable to the beneficiary of a participant (single or married) who dies after becoming eligible for Normal, Early, Late or Disability Retirement

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	benefits. Effective February 24, 2011, the \$3,000 amount increases to \$5,000.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity; 50%, 75% and 100% joint and survivor annuity, 5, 10, 15 and 20-year certain and life annuity; Social Security level income option to age 62 or to age 65 on a single life annuity; Social Security level income option to age 62 on a 50% joint and survivor annuity; lump sum actuarial equivalents of \$5,000 or less.
• Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: 1983 Group Annuity Mortality Table setback one year for the participant and five years for the beneficiary Interest: 7% per year
Miscellaneous	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Schedule SB, Part V — Summary of Plan Provisions**DANVILLE AND LISBON FALLS HOURLY (BENEFIT SCHEDULE 3)****Definitions**

• Covered employees	Hourly-paid employees at the Danville, VA and Lisbon Falls, ME locations of Masonite Corporation, hired prior to November 1, 2002, employed on a non-temporary basis and not covered by a collective bargaining agreement.
• Participation	An eligible employee becomes a participant on the January 1 or July 1 following or coincident with completion of one year of eligibility service. One year of eligibility service is one year of elapsed time commencing from date of hire. Employees hired by or transferred to Masonite Corporation on or after November 1, 2002 are not eligible to participate. Benefit accruals were frozen effective December 31, 2003.
• Employee contributions	Employee contributions were mandatory from January 1, 1988 until December 31, 1998. Employee contributions were equal to 1% of pay. Credited service was earned only during months for which the participant made the applicable contributions.
• Vesting service	The total period or periods of employment, calculated in years and months, from date of hire with Masonite or predecessor companies to severance date.
• Credited service	The number of whole and partial years in all periods of service from the later of date of hire or January 1, 1988. Periods of employment prior to January 1, 1999 in which the employee declined to make mandatory employee contributions are excluded from years of credited service.
• Compensation	Compensation includes base salary, overtime, shift differentials, incentive compensation and safety and suggestion awards paid in cash. Relocation expenses, reimbursements, tuition refunds and other special forms of compensation are excluded.
• Final average compensation	Average of 36 consecutive months for which compensation was the highest during the 120 months immediately preceding the earlier of termination of employment or most recent transfer to an ineligible group. Months in which the employee had no compensation or in which the employee made no contributions are excluded.
• Primary Social Security benefit	For pre-1999 service, estimated age 65 Social Security primary insurance amount based on zero future compensation from date of termination or retirement, and past compensation based on a 6% backward salary scale (unless the participant elects to provide actual earnings history).
• Accrued benefit	Normal Retirement Benefit earned as of date of calculation.

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Normal retirement																			
• Eligibility	Age 65																		
• Benefit	For participants who participated in the prior contributory plan, the benefit payable at Normal Retirement Date is equal to (1) plus (2), but not less than (3) as follows: Frozen benefit for service as of December 31, 1998. 1. The frozen accrued benefit is the greater of (a) and (b) below: a. 1.6% of final monthly average compensation times years of credited service as of December 31, 1998 minus 50% of the monthly Primary Social Security Benefit times the ratio (not more than 1.0) of years of credited service as of December 31, 1998 over years of credited service projected to Normal Retirement Date. b. 1% of final monthly average compensation times years of credited service as of December 31, 1998. 2. \$18.00 multiplied by years of credited service on or after January 1, 1999. 3. The “Grandfathered Rate” multiplied by years of credited service. “Grandfathered Rate” means a rate that has been calculated as of December 31, 1998 using final average compensation and Primary Social Security Benefit as of December 31, 1998. This rate represents one year of benefit accrual under the pre-1999 formula. For participants hired after December 31, 1998 or participants who opted out of the prior contributory plan, the monthly benefit is \$18.00 times years of credited service. Benefit accruals were frozen effective December 31, 2003.																		
Early retirement																			
• Eligibility	Age 55 and 10 years of vesting service.																		
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date The benefits from (2) and (3) in the Normal Retirement Benefit formula are reduced each month prior to age 62 according to the following schedule: <table> <tr> <th>Commencement age</th><th>Percentage of accrued benefit</th></tr> <tr> <td>62</td><td>100%</td></tr> <tr> <td>61</td><td>94%</td></tr> <tr> <td>60</td><td>87%</td></tr> <tr> <td>59</td><td>83%</td></tr> <tr> <td>58</td><td>78%</td></tr> <tr> <td>57</td><td>73%</td></tr> <tr> <td>56</td><td>69%</td></tr> <tr> <td>55</td><td>65%</td></tr> </table>	Commencement age	Percentage of accrued benefit	62	100%	61	94%	60	87%	59	83%	58	78%	57	73%	56	69%	55	65%
Commencement age	Percentage of accrued benefit																		
62	100%																		
61	94%																		
60	87%																		
59	83%																		
58	78%																		
57	73%																		
56	69%																		
55	65%																		

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The early retirement benefit must be greater than the frozen benefit for service as of December 31, 1998 reduced by the smallest reduction factor produced by (A), (B) or (C) below: A. $\frac{1}{2}$ of 1% for each month prior to normal retirement date. B. $\frac{1}{4}$ of 1% for each month prior to normal retirement date (only applies if age plus service is at least 82 and age is at least 62 at early retirement). C. $\frac{1}{4}$ of 1% for each month prior to age 62 (only applies if age plus credited service is at least 90 at early retirement). There is no early retirement reduction for participants retiring or terminating with 20 or more years of vesting service and 61 or more years of age.	
Late retirement	
• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and late retirement date. Benefits are not payable until actual retirement.
Deferred vested	
• Eligibility	5 years of vesting service. On August 31, 2003, all active participants as of this date became 100% vested.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and date of termination of employment. Benefit is payable at Normal Retirement Date. Participants with 10 years of vesting service at date of termination may elect to commence benefits early. Benefit is reduced for early commencement as follows: The benefits from (2) and (3) in the Normal Retirement Benefit formula are reduced by $\frac{2}{3}$ of 1% for each month prior to age 65 and $\frac{1}{3}$ of 1% for each month prior to age 60. The benefit must be greater than the frozen benefit for service as of December 31, 1998 reduced by the smallest reduction factor produced by (A), (B) or (C) below: A. $\frac{1}{2}$ of 1% for each month prior to normal retirement date. B. $\frac{1}{4}$ of 1% for each month prior to normal retirement date (only applies if age plus service is at least 82 and age is at least 62 at commencement date). C. $\frac{1}{4}$ of 1% for each month prior to age 62 (only applies if age plus credited service is at least 90 at commencement date).
Disability	
• Eligibility	At least 10 years of vesting service. Physically or mentally disabled for at least six consecutive months. Physician must determine condition is expected to continue for at least 60 more months or result in death.

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• Benefit	Monthly accrued benefit as of date of disability reduced by the company-paid portion of disability payments made under any federal or state law except fixed statutory payments for the loss of, or 100% loss of use of, any bodily member. The benefit calculated will not be offset by Primary Social Security benefits until the date participant is eligible for Social Security disability benefits.
Pre-retirement death	
• Eligibility	5 years of vesting service. On August 31, 2003, all active participants as of this date became 100% vested.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – Return of employee contributions plus interest. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – Return of employee contributions plus interest. <u>Married Participant</u> – Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity; 50%, 75% and 100% joint and survivor annuity, 5, 10, 15 and 20-year certain and life annuity; Social Security level income option to age 62 or to age 65 on a single life annuity; Social Security level income option to age 62 on a 50% joint and survivor annuity; lump sum actuarial equivalents of \$5,000 or less; return of employee contributions with interest with reduced benefit. Lump sums are calculated on a deferred-to age 65 basis for benefits not eligible for immediate payment and on an immediate basis for benefits that are immediately payable.
• Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: 1983 Group Annuity Mortality Table setback one year for the participant and five years for the beneficiary. Interest: 7% per year

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Miscellaneous	
• Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually.
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Schedule SB, Part V — Summary of Plan Provisions**SALARIED CONTRIBUTORY FOR SERVICE PRIOR TO 1999 (BENEFIT SCHEDULE 4)****Definitions**

• Covered employees	Salaried employees of Masonite Corporation (including administrative, clerical or office employees), employed on a non-temporary basis, who elected to make employee contributions to the International Paper plan prior to January 1, 1999.
• Participation	Eligible employee becomes a participant on the January 1 or July 1 following or coincident with completion of one year of eligibility service. One year of eligibility service is one year of elapsed time commencing from date of hire. This schedule only applies to contributory service prior to December 31, 1998.
• Employee contributions	Elective employee contributions were allowed from January 1, 1988 until December 31, 1998. Employee contributions equaled 1% of compensation. Participants were allowed to go in and out of contributory mode, with adjustment to the participant's membership service for years in which the participant did not contribute to the plan.
• Vesting service	The total period or periods of employment, calculated in whole years, from date of hire with Masonite or predecessor companies to severance date.
• Credited service	The number of whole and partial years in all periods of service. Credited service was earned only during months for which the participant made the applicable employee contributions.
• Compensation	Total compensation paid for services rendered to the company while an employee including base salary, shift premiums, overtime, gain-sharing, incentive compensation awards and variable compensation awards earned in the calendar year, plus severance payments paid on a periodic basis, and Sections 401(k) and 125 deferrals. Compensation does not include awards or income related to stock option plans or stock bonus plans, imputed income, moving expenses, relocation allowances, lump sum severance pay, salary paid due to long term disability or leave of absence, lump sum earned vacation allowance on termination, pay in lieu of vacation or holiday, foreign service premiums or allowances, tax equalization payments, other expense reimbursements or other employer paid contributions to this plan or any other employee benefit plan on behalf of the employee, or any other kind of deferred compensation. For the period from January 1, 1988 to December 31, 1998, compensation is only considered for periods during which the participant made required employee contributions.

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• Final average contributory compensation	For purposes of determining accrued benefits as of December 31, 1998, final average contributory compensation is 1/36th of the compensation received by the participant during the 36 consecutive months for which compensation was the highest during the final 120 months of service. If less than 36 months were worked prior to 1999, total compensation earned prior to 1999 divided by total number of months worked is used. Months in which the participant did not contribute or does not have compensation are excluded.
• Primary Social Security benefit	For pre-1999 service, estimated age 65 Social Security primary insurance amount based on zero future compensation following the determination date, and past compensation based on a 6% backward salary scale (unless the Participant elects to provide actual earnings history).
• Accrued benefit	Normal Retirement Benefit earned as of date of calculation.
Normal retirement	
• Eligibility	Age 65
• Benefit	The accrued benefit as of December 31, 1998 is equal to (A) minus (B) but not less than (C): A. 1.60% of final average contributory compensation as of December 31, 1998 times years of credited service as of December 31, 1998. B. 50% of the Primary Social Security benefit as of December 31, 1998 times the ratio of years of credited service as of December 31, 1998 to projected years of credited service at Normal Retirement Date. C. 1.0% of final average contributory compensation as of December 31, 1998 times years of credited service as of December 31, 1998.
Early retirement	
• Eligibility	Age 55 and 10 years of vesting service.
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction is the smallest reduction factor produced by (A), (B), (C) or (D) below: A. $\frac{1}{2}$ of 1% for each month prior to age 65. B. $\frac{1}{4}$ of 1% for first 36 months and $\frac{1}{2}$ of 1% for remaining months by which commencement precedes age 65 (only applies if a Participant as of December 31, 1987). C. $\frac{1}{4}$ of 1% for each month prior to age 62 (only applies if age plus vesting service as of December 31, 1998 is at least 90). D. $\frac{1}{4}$ of 1% for each month prior to age 65 (only applies if age plus vesting service as of December 31, 1998 is at least 82 and age is at least 62 at retirement).

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Late retirement	
• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit as of the earlier of December 31, 1998 and late retirement date. Benefits are not payable until actual retirement.
Deferred vested	
• Eligibility	5 years of service. On August 31, 2003, all active participants as of this date became 100% vested.
• Benefit	Accrued benefit as of the earlier of December 31, 1998 or date of termination of employment. Benefit is payable at Normal Retirement Date. Participants with 10 years of vesting service at date of termination may elect to commence benefits early. The reduction is the same as the one for early retirement benefits.
Disability	
• Eligibility	Permanent and continuous disability as determined by a qualified physician.
• Benefit	Accrued benefit as of December 31, 1998.
Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – Return of employee contributions plus interest for participant's who die before commencing benefits. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – Return of employee contributions plus interest for participant's who die before commencing benefits. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 75% and 100% joint and survivor annuity, 5, 10, 15 and 20-year certain and life annuity, Social Security level income option to age 62 or to age 65 on a single life annuity, Social Security level income option to age 62 on a 50% joint and survivor annuity; lump sum actuarial

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	equivalents of \$5,000 or less; return of employee contributions with interest with reduced benefit.
Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: 1983 Group Annuity Mortality Table setback one year for the participant and five years for the beneficiary. Interest: 7% per year
Miscellaneous	
Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually.
Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Schedule SB, Part V — Summary of Plan Provisions**SALARIED FOR SERVICE AFTER 1998 AND NON-CONTRIBUTORY FOR SERVICE PRIOR TO 1999 (BENEFIT SCHEDULES 5 AND 6)**

Definitions	
• Covered employees	Salaried employees of Masonite Corporation (including administrative, clerical or office employees), employed on a non-temporary basis.
• Participation	Eligible employee becomes a participant at age 21 and one year of eligibility service. One year of eligibility service is one year of elapsed time commencing from date of hire. For employees hired after January 1, 1988 or who did not waive the right to make employee contributions prior to January 1, 1988, participation in the plan is the later of January 1, 1999 or the date the eligible employee satisfies their requirements. Employees hired on or after November 1, 2002 are not eligible to participate in the plan. Benefit accruals were frozen effective December 31, 2003.
• Employee contributions	None.
• Vesting service	Prior to January 1, 1988, according to the provisions of the Retirement Income Plan for Salaried Employees of Masonite Corporation. After January 1, 1988, the total period or periods of employment, calculated in years and months, from date of hire with Masonite or predecessor companies to severance date. Periods while disabled are included.
• Credited service	The number of whole and partial years in all periods of service earned while a non-contributory participant. Service while disabled is included.
• Compensation	Total compensation paid for services rendered to the company while an employee including base salary, shift premiums, overtime, gain-sharing, incentive compensation awards and variable compensation awards earned in the calendar year, plus severance payments paid on a periodic basis, and Sections 401(k) and 125 deferrals. Compensation does not include awards or income related to stock option plans or stock bonus plans, imputed income, moving expenses, relocation allowances, lump sum severance pay, salary paid due to long term disability or leave of absence, lump sum earned vacation allowance on termination, pay in lieu of vacation or holiday, foreign service premiums or allowances, tax equalization payments, other expense reimbursements or other employer paid contributions to this plan or any other employee benefit plan on behalf of the employee, or any other kind of deferred compensation.

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• Final average compensation	For service prior to January 1, 1999, final average compensation is the average of the compensation during the 60 consecutive months for which compensation was the highest during the final 120 months of service. For service after 1998, the average of the participant's annual compensation received for the highest five consecutive complete calendar years out of the last ten calendar years. Compensation for a partial calendar year in the year of termination is not considered. Compensation for a partial calendar year in the year of hire shall be considered if the number of complete calendar years of service is less than five. In such case, the total of such compensation shall be divided by an amount that reflects the partial year of earnings in the first year.
• Primary Social Security benefit	For pre-1999 service, estimated age 65 Social Security primary insurance amount based on zero future compensation from date of termination or retirement, and past compensation based on a 6% backward salary scale (unless the participant elects to provide actual earnings history). For post-1998 service, estimated age 65 Social Security primary insurance amount based on constant future compensation from date of termination or retirement, and past compensation based on national average wage increases (unless the participant elects to provide actual earnings history).
• Accrued benefit	Normal Retirement Benefit earned as date of calculation.
Normal retirement	
• Eligibility	Age 65
• Benefit	<u>For service prior to 1999:</u> The greater of (A) and (B) below where: A. equals the sum of (i) and (ii) minus (iii) below: i. 1.50% of final average compensation times years of credited service (maximum of 30 years). ii. 1.00% of final average compensation times years of credited service in excess of 30. iii. 1.67% of the primary social security benefit times years of credited service (maximum of 30 years). B. 1.00% of final average compensation times years of credited service (maximum of 30 years). <u>For service after 1998:</u> The result of (1) less (2) below but not less than (3): 1. 1.67% of final average compensation times years of credited service. 2. 1.67% of the primary social security benefit times years of credited service projected to age 65 (maximum of 50% of primary social security benefit) times years of credited service at date of

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	determination divided by years of credited service projected to age 65. 3. 1.00% of final average compensation times years of credited service. Benefit accruals were frozen effective December 31, 2003.
Early retirement	
• Eligibility	Age 55 and 10 years of vesting service.
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction for benefits for service prior to 1999 is 3% per year from age 65 to age 62 and 6% per year from age 62 to age 55. The reduction for benefits for service after 1998 is 4% per year from age 62, with no reduction for retirement after attainment of age 61 with 20 years of vesting service.
Late retirement	
• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and late retirement date. Benefits are not payable until actual retirement.
Deferred vested	
• Eligibility	5 years of vesting service. On August 31, 2003, all active participants as of this date became 100% vested.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and date of termination of employment. Benefit is payable at Normal Retirement Date. Participants with 10 years of vesting service at date of termination may elect to commence benefits early. The reduction for benefits for service prior to 1999 is 3% per year from age 65 to age 62 and 6% per year from age 62 to age 55. The reduction for benefits for service after 1998 is 8% per year from age 65 to age 60 and 4% per year from age 60 to age 55.
Disability	
• Eligibility	Total and permanent disability as determined by a qualified physician.
• Benefit	Normal retirement benefit including years while disabled in credited service and calculating compensation during the period of disability based on the earnings rate in effect immediately prior to disability. If disabled with 10 or more years of vesting service (including years on disability) and 55 or more years of age may start disability benefits early. If less than 10 years of vesting service prior to date of disability, accrual of vesting and credited service while disabled is limited to 10 years.

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Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 75% and 100% joint and survivor annuity, 5, 10, 15 and 20-year certain and life annuity, Social Security level income option to age 62 or to age 65 on a single life annuity, Social Security level income option to age 62 on a 50% joint and survivor annuity; lump sum actuarial equivalents of \$5,000 or less.
• Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: 1983 Group Annuity Mortality Table setback one year for the participant and five years for the beneficiary Interest: 7% per year

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Miscellaneous

- | | |
|------------------------|--|
| • Maximum compensation | Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. |
| • Maximum benefits | Annual benefits may not exceed the limits in IRC Section 415. |
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Schedule SB, Part V — Summary of Plan Provisions**TOWANDA HOURLY (BENEFIT SCHEDULE 7)****Definitions**

• Covered employees	Hourly-paid employees at the Towanda, PA location, hired prior to November 1, 2002 and working on a non-temporary basis and not covered by a collective bargaining agreement.
• Participation	Employee becomes a participant on the January 1 following or coincident with completion of one year of eligibility service. One year of eligibility service is one year of elapsed time commencing from date of hire The Towanda location was divested on March 31, 2002.
• Employee contributions	None.
• Vesting service	The total period or periods of employment, calculated in whole years from date of hire with Masonite or predecessor companies to severance date.
• Credited service	The number of whole and partial years in all periods of service. Service prior January 15, 1968 is excluded.
• Accrued benefit	Normal Retirement Benefit earned as of date of calculation.

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Normal retirement	
• Eligibility	Age 65
• Benefit	A monthly amount equal to (A) plus the greatest of (B), (C) or (D) as follows: A. \$18.00 times years of credited service commencing with the later of the eligible employee's date of hire or January 15, 1966 and ending with the earlier of September 30, 1990 or the eligible employee's severance from service date; B. (i) minus (ii), but not less than zero as follows: i. \$18.00 times years of credited service commencing with the later of the eligible employee's date of hire or October 1, 1990 and ending with the eligible employee's severance from service date, but in no event later than March 28, 2002; minus ii. The Annuity Value of the December 31, 2000 company Fixed Contribution Account. C. (i) minus (ii) but not less than zero plus (iii) as follows: i. \$12.00 times years of credited service commencing with the later of the eligible employee's date of hire or October 1, 1990 and ending with the earlier of the eligible employee's severance from service date or December 31, 1998; minus ii. the Annuity Value of the December 31, 1999 Company Fixed Contribution Account; plus iii. \$18.00 times years of credited service commencing with the later of the eligible employee's date of hire or January 1, 1999 and ending with the earlier of the eligible employee's severance from service date or December 31, 1999 D. (i) minus (ii) but not less than zero plus (iii) as follows: i. \$12.00 times years of credited service commencing with the later of the eligible employee's date of hire or October 1, 1990 and ending with the earlier of the eligible employee's severance from service date or December 31, 1998; minus ii. The Annuity Value of the December 31, 2000 Company Fixed Contribution Account; plus iii. \$18.00 times years of credited service commencing with the later of the eligible employee's date of hire or January 1, 1999 and ending with the earlier of the eligible employee's severance from service date or December 31, 2000. For purposes of section (C) above, the Annuity Value of the December 31, 1999 Company Fixed Contribution Account means the Company Fixed Contribution Account as of December 31, 1999 increased by interest only to the participant's Normal Retirement Date and then converted to a monthly annuity value payable at age 65. Interest shall be calculated at 4.00% compounded annually. The annuity value at Normal Retirement

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Date shall be calculated by using the PBGC rates with an immediate rate of 4.00% and the UP1984 Unisex Mortality Table.

For purposes of sections (B) and (D) above, the Annuity Value of the December 31, 2000 Company Fixed Contribution Account means the Company Fixed Contribution Account as of December 31, 2000 increased by interest only to the participant's Normal Retirement Date and then converted to a monthly annuity value payable at age 65. Interest shall be calculated at 6.26% compounded annually. The annuity value at Normal Retirement Date shall be calculated by using an interest assumption of 6.26% and the GAM83 unisex Mortality table.

For purposes of sections (B), (C) and (D) above, the Company Fixed Contribution Account means the individual account of an eligible employee held in the Masonite Savings Plan for Hourly Employees which represents the weekly contributions made by the International Paper Company (Company Fixed Contributions) and earnings thereon, Company Fixed Contributions were discontinued as of December 31, 1998.

Benefit accruals stopped March 31, 2002.

Early retirement

- Eligibility Age 55 and 10 years of vesting service.
- Benefit

Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date.

 - The reduction for the accrued benefit attributable to service prior to October 1, 1990 is 5/9 of 1% for each month commencement of benefits precedes age 65.
 - The reduction for the accrued benefit attributable to service on or after October 1, 1990 is 6% per year for each year prior to age 62.

There is no early retirement reduction for participants retiring or terminating with 20 or more years of vesting service and 61 or more years of age.

The annuity value of the Company Fixed Contribution Account is also reduced before offsetting.

Late retirement

- Eligibility Work past Normal Retirement Date.
- Benefit

Accrued benefit as of the earlier of March 31, 2002 and late retirement date. Benefits are not payable until actual retirement.

Deferred vested

- Eligibility

5 years of vesting service.

All participants employed by International Paper on August 31, 2001 and transferred to Masonite International on September 1, 2001 are 100% vested.
- Benefit

Accrued benefit as of the earlier of March 31, 2002 and date of termination of employment payable at Normal Retirement Date.

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	Participants with 10 years of service at date of termination may elect to commence benefits early. The reduction for the accrued benefit attributable to service prior to October 1, 1990 is 5/9 of 1% for each month commencement of benefits precedes age 65. The reduction for the accrued benefit attributable to service on or after October 1, 1990 is 8% per year for each year prior to age 65 to age 60 and 4% per year for each year prior to age 60 to age 55. The annuity value of the Company Fixed Contribution Account is also reduced before offsetting with the same reduction factors used for early retirement benefits.
Disability	
• Eligibility	Permanent and continuous disability during the remainder of participant's life, as determined by a qualified physician.
• Benefit	If the participant has 10 or more years of vesting service prior to disability, then the participant may retire and receive the accrued benefit earned to date of disability without a reduction for early commencement. If the participant has less than 10 years of vesting service, then the accrued benefit is actuarially reduced to reflect commencement prior to age 65.
Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 75% and 100% joint and survivor annuity, 5, 10, 15 and 20-year certain and life annuity, Social Security level income option to age 62 on a single life annuity or on a 50% joint and survivor annuity; lump sum actuarial equivalents of \$5,000 or less. The post-October 1, 1990 accrued benefit may be paid as an actuarially equivalent lump sum at the election of the participant.

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-
- Optional form conversion factors

Lump sums:

Mortality: 417(e) mortality table applicable to the year of determination

Interest: 417(e) segment rates for the month of October of the year prior to the year of determination.

Other:

Mortality: 1983 Group Annuity Mortality Table setback one year for the participant and five years for the beneficiary.

Interest: 7% per year

Miscellaneous

-
- Maximum benefits Annual benefits may not exceed the limits in IRC Section 415.
-

Schedule SB, Part V — Summary of Plan Provisions**MOHAWK SALARIED (BENEFIT SCHEDULE 8)**

Definitions	
• Covered employees	All employees compensated on a salaried basis and all hourly-paid office employees of Mohawk Flush Doors, Inc.
• Participation	An eligible employee becomes a participant upon attainment of age 18. Employees hired on or after January 1, 2003 shall not be eligible to participate in the plan. Benefit accruals were frozen effective December 31, 2003.
• Employee contributions	None.
• Vesting service	A year of vesting service is granted for each Plan Year during which the employee is credited with 1,000 or more hours of service. Years of service with any affiliated employer are included.
• Credited service	Same as vesting service except that years of service before September 9, 1991 are not included.
• Compensation	Total compensation excluding expense allowances, moving expenses, but including Sections 401 (k) and 125 deferrals.
• Final average compensation	Average compensation during the highest five consecutive plan years out of the last ten completed years of participation.
• Covered Compensation	The average (without indexing) of the taxable wage bases in effect for each calendar year during the 35-year period ending with the calendar year in which the participant terminated or retires, automatically adjusted for each Plan year, as the taxable wage base changes.
• Accrued benefit	Normal Retirement Benefit earned as date of calculation.
Normal retirement	
• Eligibility	Age 65
• Benefit	Monthly life annuity equal to the greater of: A. 1.0% of final average compensation plus 0.65% of final average compensation in excess of covered compensation times years of credited service (up to a maximum of 35 years) plus 1.33% of final average compensation times years of credited service over 35. B. \$21.50 times years of credited service. Benefit accruals were frozen effective December 31, 2003.
Early retirement	
• Eligibility	Age 55 and 5 years of vesting service.
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction is 2/3% for each of the first 36 months and 1/3% for each of the next 84 months and actuarially reduced for each month thereafter by which the benefit commencement date precedes Normal Retirement Date.

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	Actuarial reduction is based on 7.5% interest and the UP-1984 Mortality Table.
Late retirement	
• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and late retirement date. Benefits are not payable until actual retirement.
Deferred vested	
• Eligibility	5 years of vesting service. On December 31, 2003, all active participants as of this date became 100% vested.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and date of termination of employment payable at Normal Retirement Date. Participants may elect to commence benefits early (age 55 or later). In this case, the reduction is the same as for Early Retirement.
Disability	
• Eligibility	At least 10 years of service and totally and permanent disabled under the Federal Social Security Acts.
• Benefit	Normal Retirement Benefit based on compensation determined as of the last full calendar year before disability and based on plan years of service to the earlier of December 31, 2003 or Normal Retirement (years while disabled are included). Participant may elect to commence early. In this case, the years of service are as of the earlier of December 31, 2003 or Early Retirement Date and the reduction is the same as for Early Retirement.
Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.

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• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 75% and 100% joint and survivor annuity, 10-year certain and life annuity, lump sum.
• Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: UP-1984 Mortality Table. Interest: 7.5% per year.
Miscellaneous	
• Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually.
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Schedule SB, Part V — Summary of Plan Provisions**MOHAWK HOURLY (BENEFIT SCHEDULE 9)****Definitions**

• Covered employees	All employees of Mohawk Flush Doors, Inc. who are regularly employed as hourly-rated employees at the Northumberland plant.
• Participation	An eligible employee becomes a participant upon attainment of age 18. Employees hired on or after January 1, 2003 are not eligible to participate in the plan. Benefit accruals were frozen effective December 31, 2003.
• Employee contributions	None.
• Vesting service	A year of vesting service is granted for each Plan Year during which the employee is credited with 1,000 or more hours of service. Years of service with any affiliated employer are included.
• Credited service	Same as vesting service except that years of service before September 9, 1991 are not included.
• Accrued benefit	Normal Retirement Benefit earned as of date of calculation.

Normal retirement

• Eligibility	Age 65.
• Benefit	Monthly benefit multiplier times years of credited service. The monthly benefit multiplier is as follows: • \$18.50 effective July 1, 1998 • \$19.50 effective July 1, 2000 • \$20.50 effective July 1, 2001 • \$21.50 effective July 1, 2002 Benefit accruals were frozen effective December 31, 2003.

Early retirement

• Eligibility	Age 55 and 5 years of vesting service.
• Benefit	Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction is 2/3% for each of the first 36 months and 1/3% for each of the next 84 months and actuarially reduced for each month thereafter by which the benefit commencement date precedes Normal Retirement Date.

Late retirement

• Eligibility	Work past Normal Retirement Date.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and late retirement date. Benefits are not payable until actual retirement.

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Deferred vested	
• Eligibility	5 years of vesting service. On December 31, 2003, all active participants as of this date became 100% vested.
• Benefit	Accrued benefit as of the earlier of December 31, 2003 and date of termination of employment payable at Normal Retirement Date. Participants may elect to commence benefits early (age 55 or later with 10 years or service). In this case, the reduction is the same as for Early Retirement.
Disability	
• Eligibility	At least 10 years of service and totally and permanent disabled under the Federal Social Security Acts.
• Benefit	Normal Retirement Benefit based on the benefit multiplier in effect at the time of the participant's disability and based on the plan years of service to the earlier of December 31, 2003 or Normal Retirement (years while disabled are included). Participant may elect to commence early. In this case, the years of service are as of the earlier of December 31, 2003 or Early Retirement Date and the reduction is the same as for Early Retirement.
Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 75% and 100% joint and survivor annuity, 10-year certain and life annuity, lump sum.
• Optional form conversion factors	<u>Lump sums</u> : Mortality: 417(e) mortality table applicable to the year of determination

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	Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: UP-1984 Mortality Table. Interest: 7.5% per year.
Miscellaneous	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Schedule SB, Part V — Summary of Plan Provisions**PSD, INC. RETIREMENT PLAN (BENEFIT SCHEDULE 10)****Definitions**

- | | |
|--------------------------|--|
| • Covered employees | All employees employed at Richmond, Indiana covered by a collective bargaining agreement between PSD, Inc. and the Machinists and Aerospace Local #2532 which provides for participation in this plan. |
| • Participation | <p>Any employee who is employed at Richmond, Indiana covered by a collective bargaining agreement between PSD, Inc. and the Machinists and Aerospace Local #2532 which provides for participation in this plan shall participate after completion of one month of service.</p> <p>Any employee who was a participant in the Amerimax Companies Retirement Income Plan covered under Appendix V on June 2, 1997 and who became an employee of PSD, Inc. on June 3, 1997 shall automatically participate.</p> <p>The plan is closed to new employees effective June 1, 2001.</p> |
| • Employee contributions | None. |
| • Vesting service | A year of vesting service is granted for each plan year during which the employee has 1,000 or more hours of service. |
| • Credited service | Same as vesting service. Credited service is frozen June 1, 2001. |
| • Accrued benefit | Normal Retirement Benefit earned as of date of calculation. |

Normal retirement

- | | |
|---------------|--|
| • Eligibility | Age 65. |
| • Benefit | <p>Monthly benefit is equal to \$12.00 times years of credited service effective June 3, 1997. Effective February 28, 1999, the monthly benefit multiplier increased to \$14.00.</p> <p>Benefit accruals were frozen effective June 1, 2001.</p> |

Early retirement

- | | |
|---------------|---|
| • Eligibility | Age 60 and 5 years of vesting service. |
| • Benefit | Accrued benefit as of Early Retirement Date reduced from Normal Retirement Date to Early Retirement Date. The reduction is equal to 6/10 of 1% for each month by which the Benefit Commencement Date precedes Normal Retirement Date. |

Late retirement

- | | |
|---------------|---|
| • Eligibility | Work past Normal Retirement Date. |
| • Benefit | Accrued benefit as of the earlier of June 1, 2001 and late retirement date. Benefits are not payable until actual retirement. |

Deferred vested

- | | |
|---------------|---|
| • Eligibility | 5 years of vesting service. |
| • Benefit | Accrued benefit as of the earlier of June 1, 2001 and date of termination of employment. Payments deferred until age 60 or later. |

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Disability	
• Eligibility	15 years of vesting service and age 50, but prior to age 65. Total and permanent disability while actively employed.
• Benefit	\$12.00 per month times years of credited service after June 3, 1997 plus the years of service from date of disability to the participant's age 65. The amount is reduced by any Worker's Compensation benefits or any state disability benefits which were paid by Company contributions or premiums. Effective February 28, 1999 the monthly benefit multiplier increased to \$14.00. Begins on the first day of the month after determination of disability. Upon approval of a disability benefit under the Federal Social Security Act or upon attaining age 65 after receiving a Disability Retirement Benefit, the amount of the benefit is recalculated to include only the actual years of service as of the date of disability.
Pre-retirement death	
• Eligibility	5 years of vesting service.
• Benefit prior to early retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> – Surviving spouse receives income for life equal to 50% of the benefit which would be payable if the participant had separated from service on the earlier of the date of death or the date of termination, survived to his earliest retirement date, retired with an immediate 50% qualified joint and survivor annuity, and died on the day after his earliest retirement date.
• Benefit after early retirement and before normal retirement	<u>Unmarried Participant</u> – No benefit. <u>Married Participant</u> - Survivor annuity portion of the immediate 50% qualified joint and survivor annuity had the participant retired on the day before the date of death.
Form of benefits	
• Automatic form for unmarried participants	Single life annuity.
• Automatic form for married participants	Actuarially equivalent 50% qualified joint and survivor annuity.
• Optional forms	Single life annuity, 50%, 66 2/3% joint and survivor annuity; lump sum actuarial equivalents of \$5,000 or less.

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Optional form conversion factors	<u>Lump sums:</u> Mortality: 417(e) mortality table applicable to the year of determination Interest: 417(e) segment rates for the month of October of the year prior to the year of determination. <u>Other:</u> Mortality: UP-1984 Mortality Table. Interest: 5.5% per year.
Miscellaneous	
Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415.

Benefits included or excluded

Unless noted below, all benefits provided by the plan, as amended and restated effective January 1, 2016, are included in this valuation:

- **Most recent plan amendments included:** All amendments through January 1, 2021 have been included in this valuation.
- **Plan amendments excluded:** None.
- **Late retirement increases:**
 - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement; therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70½. No late retirement increases are included in the valuation for current participants over age 70½.
 - *Deferred vested participants:* No late retirement increases are included in the valuation.
- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.
- **IRC Section 436 benefit restrictions:**
 - *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits that occurred before the valuation date but includes contingent event benefits which are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
 - *Plan amendments:* See above.
 - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.

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- Benefit accruals: The plan's funding target does not reflect any limitation on benefit accruals.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.
- **Scheduled benefit increases:** Not applicable.

Plan provision changes since prior valuation

None.

Schedule SB, line 24 — Change in Actuarial Assumptions

- The administrative expense load assumption was updated from \$300,000 to \$320,000.
- The mortality table used for lump sum actuarial equivalence was updated to the 2021 Applicable Mortality Table under Code Section 417(e).