

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>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).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

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

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

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

<p>1a Name of plan <u>A&B INDIVIDUAL DEFERRED COMPENSATION AND PROFIT SHARING PLAN FOR SALARIED NON-BARGAINING EMPLOYEES</u></p> <p>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>ALEXANDER & BALDWIN, LLC, SERIES T</u></p> <p><u>822 BISHOP STREET</u> <u>HONOLULU, HI 96813</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p> <p>1c Effective date of plan <u>07/01/2012</u></p> <p>2b Employer Identification Number (EIN) <u>81-4753934</u></p> <p>2c Plan Sponsor's telephone number <u>808-525-6611</u></p> <p>2d Business code (see instructions) <u>531190</u></p>
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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.	10/14/2025	CARNEY KIM
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	265
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(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) 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)	115
	6a(2)	103
	6b	8
	6c	135
	6d	246
	6e	1
	6f	247
	6g(1)	254
6g(2)	244	
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:
 2F 2G 2J 2K 2S 2T 3H 2E 2R

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)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> 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
- (4) **DCG** (Individual Plan Information) – Number Attached _____
- (5) **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) **H** (Financial Information)
- (2) **I** (Financial Information – Small Plan)
- (3) **A** (Insurance Information) – Number Attached 0
- (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 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan A&B INDIVIDUAL DEFERRED COMPENSATION AND PROFIT SHARING PLAN FOR SALARIED NON-BARGAINING EMPLOYEES	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ALEXANDER & BALDWIN, LLC, SERIES T	D Employer Identification Number (EIN) 81-4753934	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

CAPFINANCIAL PARTNERS, LLC

26-0058143

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	52583	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65 71	RECORDKEEPER	39774	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	16683	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>A&B INDIVIDUAL DEFERRED COMPENSATION AND PROFIT SHARING PLAN FOR SALARIED NON-BARGAINING EMPLOYEES</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ALEXANDER & BALDWIN, LLC, SERIES T</u>	D Employer Identification Number (EIN) <u>81-4753934</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>A & B LLC, SERIES T MASTER TRUST</u>		
b Name of sponsor of entity listed in (a):	<u>ALEXANDER & BALDWIN, LLC, SERIES T</u>		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
<u>81-4753934-008</u>	<u>M</u>		<u>63317835</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan A&B INDIVIDUAL DEFERRED COMPENSATION AND PROFIT SHARING PLAN FOR SALARIED NON-BARGAINING EMPLOYEES	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ALEXANDER & BALDWIN, LLC, SERIES T	D Employer Identification Number (EIN) 81-4753934

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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	994671	1147421
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	202474	238901
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	56494800	63317835
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	57691945	64704157
Liabilities			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	0	0
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	57691945	64704157

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	1633494	
(B) Participants.....	2a(1)(B)	1357161	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2990655
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	13841	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		13841
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	10078359
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	0
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total	2d	13082855

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5961693
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	5961693
f Corrective distributions (see instructions)	2f	0
g Certain deemed distributions of participant loans (see instructions)	2g	0
h Interest expense	2h	0
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	0
(2) Contract administrator fees	2i(2)	0
(3) Recordkeeping fees	2i(3)	39684
(4) IQPA audit fees	2i(4)	0
(5) Investment advisory and investment management fees	2i(5)	16683
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	0
(8) Legal fees	2i(8)	0
(9) Valuation/appraisal fees	2i(9)	0
(10) Other trustee fees and expenses	2i(10)	0
(11) Other expenses	2i(11)	52583
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	108950
j Total expenses. Add all expense amounts in column (b) and enter total	2j	6070643

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	7012212
l Transfers of assets:		
(1) To this plan	2l(1)	0
(2) From this plan	2l(2)	0

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: **KMH LLP**

(2) EIN: **42-1539623**

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		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.)		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.)		X	
e Was this plan covered by a fidelity bond?	X		5000000
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	
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?		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?		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.)	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	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

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

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

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>A&B INDIVIDUAL DEFERRED COMPENSATION AND PROFIT SHARING PLAN FOR SALARIED NON-BARGAINING EMPLOYEES</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>ALEXANDER & BALDWIN, LLC, SERIES T</u>	D Employer Identification Number (EIN) <u>81-4753934</u>	

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
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): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	
c The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	

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

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

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

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

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

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

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

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

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

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

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
 Yes.
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
 No. Other. Provide explanation: _____

Part VII IRS Compliance Questions

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

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

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

**A&B Individual Deferred Compensation and
Profit Sharing Plan for Salaried
Non-Bargaining Employees**

Financial Statements and Supplemental Schedules
December 31, 2024 and 2023
Together with Independent Auditor's Report

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A Hawaii Limited Liability Partnership

Independent Auditor's Report

To the Retirement Committee of the
A&B Individual Deferred Compensation and
Profit Sharing Plan for Salaried Non-Bargaining Employees:

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

We have performed audits of the financial statements of the A&B Individual Deferred Compensation and Profit-Sharing Plan for Salaried Non-Bargaining Employees (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional

omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

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

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

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

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

Other Matter—Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule H, Line 4(a) – Schedule of Delinquent Participant Contributions for the year ended December 31, 2024 and Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) as of December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

KMH LLP

KMH LLP

Honolulu, Hawaii
October 10, 2025

**A&B Individual Deferred Compensation and
Profit Sharing Plan for Salaried
Non-Bargaining Employees**

Statements of Net Assets Available for Benefits
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Assets:		
Plan interest in the Master Trust	<u>\$ 63,317,835</u>	<u>\$ 56,494,800</u>
Receivables:		
Profit sharing contributions	637,147	487,968
Employer contributions	510,274	506,703
Notes receivable from participants	<u>238,901</u>	<u>202,474</u>
Total receivables	<u>1,386,322</u>	<u>1,197,145</u>
Net assets available for benefits	<u><u>\$ 64,704,157</u></u>	<u><u>\$ 57,691,945</u></u>

See accompanying notes to financial statements.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2024

Additions:

Investment income:

Plan interest in Master Trust investment income	\$ 10,078,359
Interest income from notes receivable from participants	13,841
	10,092,200
Net investment income	10,092,200

Contributions:

Participants	1,357,161
Profit sharing	637,147
Employer	996,347
	2,990,655
Total contributions	2,990,655
Total	13,082,855

Deductions:

Benefits paid to participants	5,961,693
Administrative expenses	108,950
	6,070,643
Total	6,070,643
Net increase	7,012,212

Net Assets Available for Benefits:

Beginning of year	57,691,945
End of year	\$ 64,704,157

See accompanying notes to financial statements.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan

The following description of the A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees (the Plan) is provided for general information purposes only. Members should refer to the Plan document for more complete information.

a. General

The Plan was effective on June 29, 2012. The following companies are members in the Plan:

- Alexander & Baldwin, LLC, Series T (the Company)
- A&B Properties, Inc.
- East Maui Irrigation Company, Limited
- Hawaiian Commercial & Sugar Company
- Kahului Trucking & Storage, Inc.
- McBryde Resources, Inc. (formerly known as Kauai Coffee Company, Inc.)
- Kauai Commercial Company, Inc.
- Kukui'ula Development Company, Inc.

Effective January 1, 2015, the Plan was amended to delete McBryde Resources, Inc. and Kukui'ula Development Company, Inc. There was no impact to the Plan due to this amendment as they have no active employees.

During 2017, Alexander and Baldwin, Inc. completed a conversion process with the requirements to be treated as a real estate investment trust commencing within the year ended December 31, 2017.

Effective January 1, 2020, the Plan was amended to become a Safe-Harbor 401(k) plan by adding a non-elective company contribution.

In February 2023, Kahului Trucking & Storage, Inc. (KT&S) was sold and all KT&S employees were transferred out of the Plan and into the Kahului Trucking & Storage, Inc. 401(k) Plan in June 2023.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan (continued)

a. General (continued)

The assets of the Plan, excluding receivables, are held in the agreement between Alexander & Baldwin, LLC, Series T and Fidelity Management Trust Company (Master Trust). Fidelity Management Trust Company (Fidelity) serves as the trustee for the Master Trust. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

b. Investments

Members direct the investment of their contributions into various investment options offered by the Plan. The investments are held in the Master Trust for the Company's defined contribution plans. The Plan currently offers 26 mutual funds, 4 common collective investment trusts, a stable value fund, and a participant-directed brokerage account, which allows participants to directly invest in stocks or funds other than the Lifecycle or Core Investment Options offered. Participants may invest their allocated profit sharing contributions in the Company's stock.

c. Payment of Benefits

On termination of service due to death, disability, retirement, or termination for other reasons, a member may elect to receive distributions in the form of (1) a lump-sum amount equal to the value of the member's vested interest in his or her account, (2) installments over a period designated by the member, (3) payments based on a calculated life expectancy and desired frequency of payment, or (4) fixed percentage payments based on an annualized fixed percentage to be paid periodically.

d. Profit Sharing Accounts

Member Accounts - Profit-sharing contributions are allocated to each member's account in such proportion as the member's compensation for the year bears to the total compensation paid in that year to all qualified members. Each other Eligible Employee shall become a Member, in accordance with rules prescribed by the Administrator, on the later of (i) June 29, 2012 or (ii) the date he or she becomes an Eligible Employee. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan (continued)

d. Profit Sharing Accounts (continued)

Contributions - Under the Plan's provisions, the annual contribution is determined by the A&B, Inc. Retirement Committee subject to the following specific guidelines:

1. The contribution may not exceed 25 percent of the base compensation paid to all Qualified Profit Sharing Members for such Plan Year, as defined.
2. Amounts do not result in discrimination prohibited by Code Section 401(a)(4).

The Plan recognized profit sharing contributions of \$637,147 for the year ended December 31, 2024 and recorded as a contribution receivable in the statement of net assets available for benefits as of December 31, 2024.

Vesting - Members are vested immediately in their profit-sharing allocations.

e. Individual Deferred Compensation Accounts

Member Accounts - Individual accounts are maintained for each Plan member. An individual may elect to participate in the individual deferred compensation provisions of the Plan on the first day of the following month coinciding with the employee's commencement date. Each member's account is credited with the member's contribution and allocations of Plan earnings, and charged with an allocation of Plan losses and administrative expenses. Allocations are based on member earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Member Contributions - New employees are automatically enrolled at a contribution rate of 3 percent of pretax eligible earnings. Members may, however, elect to stop or change contributions anytime. Each eligible employee must designate a percentage (from 1 percent to 50 percent, in multiples of 1 percent) of their eligible compensation to contribute to the deferred account. Under Plan provisions, the member's contribution may not exceed 50 percent of his or her eligible compensation, up to the maximum permitted by statute.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan (continued)

e. Individual Deferred Compensation Accounts (continued)

Roth Contributions - In lieu of making deferred cash contributions and catch-up contributions on a pretax basis, a member may elect to have some or all of the deferred cash contributions and/or catch-up contributions that otherwise would be contributed to the Plan on a pretax basis designated as Roth contributions or Roth catch-up contributions, as applicable, and included in his or her gross income at the time of deferral. Such election, once made, may only be revoked with respect to deferred cash contributions to be contributed after the effective date of the revocation election.

Matching Contributions - The Company makes discretionary matching contributions. The Company may, in its sole discretion and through a decision ultimately made by its Chief Executive Officer, require each or any Participating Company to contribute on behalf of each of such Participating Company's members an amount up to 3% of Compensation, as defined, for such Plan Year. Effective January 1, 2019, the Plan was also amended to include a true-up contribution provision to members, as defined. In 2024 and 2023, the Company approved matching 100 percent of each pretax and/or Roth after-tax contribution on the first 3 percent of pay that each eligible member contributes. The Plan recognized \$486,073 of Matching Contributions for the year ended December 31, 2024.

Non-elective Company Contributions - Effective January 1, 2020, the Company will make non-elective Company contributions equal to 3% (or such higher percentage as elected by the Participating Company) of the compensation of each qualified member, as defined. The Plan recognized \$510,274 of Non-Elective Company Contributions for the year ended December 31, 2024 and recorded as a contribution receivable in the statement of net assets available for benefits as of December 31, 2024.

Catch-Up Contributions - In accordance with the Internal Revenue Code (IRC), members who are over age 50 or reach age 50 during the Plan year January 1 to December 31 may make additional catch-up contributions up to the maximum amount as prescribed by the IRC.

Vesting - Members are vested immediately in their employee, employer matching, and non-elective deferred compensation accounts, plus earnings thereon.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan (continued)

e. Individual Deferred Compensation Accounts (continued)

Participant Loans - Members may borrow from their accounts a minimum of \$1,000 up to a maximum of \$50,000 or 50 percent of their account balance, whichever is lower. Loans have a maximum term of 5 years for a general purpose loan and 15 years for a loan that is to be used to purchase the principal residence of a member. Loans are secured by the member's account and bear interest at rates commensurate with local prevailing rates at the time funds are borrowed as determined by the Plan Administrator. At December 31, 2024, interest rates on participant loans ranged from 4.25 percent to 9.5 percent, maturing through November 2037.

2. Summary of Significant Accounting Policies

a. Basis of Accounting

The accompanying financial statements of the Plan have been prepared in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

b. Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

c. Risks and Uncertainties

The Plan utilizes various investment securities, including money market funds, mutual funds, common collective investment trusts, and common stock of both the Company and other companies. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such change could materially affect the amounts reported in the financial statements.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

2. Summary of Significant Accounting Policies (continued)

d. Investment Valuation and Income Recognition

The Plan's investments in the Master Trust 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 of the Master Trust. The Plan's Retirement Committee determines the Plan's valuation policies utilizing information provided by investment advisors. See Note 5 for a description of the valuation methods.

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

Management fees and operating expenses charged to the Plan for investments in the registered investment companies are deducted from income earned and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of investment return for such investments.

e. Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are recorded as distributions based on the terms of the Plan document.

f. Administrative Expenses

Administrative expenses of the Plan are paid by either the Plan or the Plan sponsor, as provided in the Plan document.

g. Payment of Benefits

Benefit payments to members are recorded upon distribution.

h. Subsequent Events

The Plan Administrator has evaluated subsequent events through October 10, 2025, the date the financial statements were available to be issued, and it was determined that all subsequent events have been properly accounted for.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

3. Information Certified by Trustee

The following is a summary of the Plan's assets as of December 31, 2024 and 2023, and for the year ended December 31, 2024, included throughout the Plan's financial statements and ERISA-required supplemental schedules, obtained by management and agreed to or derived from information certified by Fidelity Management Trust Company, the trustee of the Plan. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and ERISA-required supplemental schedules related to the following assets:

	Plan's Interest in Master Trust		Total Master Trust Assets	
	2024	2023	2024	2023
Investments - at fair value:				
Mutual funds	\$ 45,796,616	\$ 39,046,896	\$ 50,368,134	\$ 43,333,106
Common collective investment trusts	8,724,369	7,410,229	8,820,908	7,527,415
Stable value fund	3,744,588	4,559,137	4,370,922	5,193,483
Participant-directed brokerage accounts	4,713,418	5,069,860	4,713,477	5,086,428
Common stock	338,844	408,678	338,844	408,678
Investments in Master Trust	<u>63,317,835</u>	<u>56,494,800</u>	<u>68,612,285</u>	<u>61,549,110</u>
Notes receivable from participants	<u>238,901</u>	<u>202,474</u>	<u>238,901</u>	<u>202,474</u>
	<u>\$ 63,556,736</u>	<u>\$ 56,697,274</u>	<u>\$ 68,851,186</u>	<u>\$ 61,751,584</u>

Fidelity also certified to the investment income of the Master Trust of \$10,973,062 and interest on notes receivable from participants of \$14,493. The Plan's investment income and interest on notes receivable from participants at December 31, 2024 amounted to \$10,078,359 and \$13,841, respectively.

The Plan's interest in the Master Trust was approximately 92 percent of the Master Trust's investments and approximately 100 percent of the notes receivable from participants at December 31, 2024 and 2023. The Plan's investment income from the Master Trust represents approximately 92 percent of the Master Trust's investment income.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

4. Investment in Master Trust

The Master Trust is composed of 26 mutual funds, 4 common collective investment trusts, a stable value fund, and a participant-directed brokerage account, which allows participants to directly invest in cash and cash equivalents, stocks or funds other than the Lifecycle or Core Investment Options offered, and the Company's common stock (only available for profit sharing contributions), some of which are specific to individual plans. The assets are invested and records are maintained by each investment fund option. Funds are allocated to the two participating plans (the Plans) in accordance with the Plans' provisions and member allocation elections. The allocation of net assets available for benefits is based on the respective number of units held by the Plans' members as of the Plans' year-end. The allocation of the changes in net assets available for benefits is calculated daily based on the units held by the Plans' members as of that day's end.

At December 31, 2024 and 2023, the assets of the following Plans were combined in the Master Trust:

- A&B Individual Deferred Compensation and Profit Sharing Plan for Bargaining Unit Employees
- A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

The following table summarizes investment balances for the Plan's interest in the Master Trust at December 31, 2024 and 2023:

	Plan's Interest in Master Trust		Total Master Trust Assets	
	2024	2023	2024	2023
Investments - at fair value:				
Mutual funds	\$ 45,796,616	\$ 39,046,896	\$ 50,368,134	\$ 43,333,106
Common collective investment trusts	8,724,369	7,410,229	8,820,908	7,527,415
Stable value fund	3,744,588	4,559,137	4,370,922	5,193,483
Participant-directed brokerage accounts	4,713,418	5,069,860	4,713,477	5,086,428
Common stock	338,844	408,678	338,844	408,678
Total	<u>\$ 63,317,835</u>	<u>\$ 56,494,800</u>	<u>\$ 68,612,285</u>	<u>\$ 61,549,110</u>

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

4. Investment in Master Trust (continued)

The changes in net assets of the Master Trust for the year ended December 31, 2024 is summarized below:

Interest and dividends	\$ 1,892,487
Net appreciation in fair value of investments	<u>9,080,575</u>
Investment income of Master Trust	10,973,062
Distributions net of contributions	<u>(3,909,887)</u>
Increase in net assets	7,063,175
Net assets:	
Beginning of year	<u>61,549,110</u>
End of year	<u><u>\$ 68,612,285</u></u>
Plan interest in Master Trust investment income	<u><u>\$ 10,078,359</u></u>

5. Fair Value Measurements

U.S. GAAP establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under U.S. GAAP are described below:

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

Level 2: Inputs to the valuation methodology include quoted prices for similar assets in active markets; quoted prices for identical or similar assets in inactive markets; inputs other than quoted prices that are observable for the asset; or inputs that are derived principally from or can be corroborated by observable market data by correlation or other means. If the asset has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

5. Fair Value Measurements (continued)

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

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

The 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, 2024 and 2023.

Mutual Funds – Mutual funds are valued at the publicly quoted net asset value of each fund and are categorized as Level 1. The total net asset value is calculated by multiplying the net asset value per share by the number of shares held as of the measurement date.

Participant-directed Brokerage Accounts – Accounts consist of money market funds, mutual funds and common stocks that are valued on the basis of readily determinable market prices and are categorized as Level 1.

Common Stock – Common stock is valued by obtaining quoted prices on recognized and highly liquid exchanges and is categorized as Level 1.

Common Collective Investment Trusts – Common collective investment trusts are valued at net asset value published daily on the Fidelity website and are categorized as Level 1.

Stable Value Fund – The stable value fund is composed of fully benefit-responsive investment contracts that is valued at the net asset value of units of the bank collective trust. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investments for an amount different from the reported net asset value.

Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the stable value fund, the issuer reserves the right to require 12 months' notification in order to ensure that securities liquidations will be carried out in an orderly business manner.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

5. Fair Value Measurements (continued)

The following table sets forth by level within the fair value hierarchy a summary of the Master Trust's investments measured at fair value on a recurring basis at December 31, 2024 and 2023.

Master Trust	December 31, 2024		
	Level 1	Level 2	Total
Investments:			
Mutual funds	\$ 50,368,134	\$ -	\$ 50,368,134
Common collective investment trust	8,820,908	-	8,820,908
Participant-directed brokerage accounts	4,713,477	-	4,713,477
Common stocks	338,844	-	338,844
Total assets in the fair value hierarchy	<u>\$ 64,241,363</u>	<u>\$ -</u>	64,241,363
Galliard Stable Return Fund C (a)			<u>4,370,922</u>
Total Investments			<u>\$ 68,612,285</u>
Master Trust	December 31, 2023		
	Level 1	Level 2	Total
Investments:			
Mutual funds	\$ 43,333,106	\$ -	\$ 43,333,106
Common collective investment trust	7,527,415	-	7,527,415
Participant-directed brokerage accounts	5,086,428	-	5,086,428
Common stocks	408,678	-	408,678
Total assets in the fair value hierarchy	<u>\$ 56,355,627</u>	<u>\$ -</u>	56,355,627
Galliard Stable Return Fund C (a)			<u>5,193,483</u>
Total Investments			<u>\$ 61,549,110</u>

- (a) In accordance with Topic 820, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in the table above are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

5. Fair Value Measurements (continued)

A summary of the Master Trust's investments with a reported net asset value as of December 31, 2024 and 2023 is as follows:

Fair Value Estimated Using Net Asset Value Per Share December 31, 2024					
Investment	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Galliard Stable Return Fund C	\$ 4,370,922	\$ -	Immediate	None	12 months

Fair Value Estimated Using Net Asset Value Per Share December 31, 2023					
Investment	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Galliard Stable Value Fund C	\$ 5,193,483	\$ -	Immediate	None	12 months

6. Plan Termination

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

7. Federal Income Tax Status

The Plan received a favorable determination letter from the IRS on December 7, 2016. The Plan Administrator believes the Plan is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Management is not aware of any uncertain tax positions that would require the Plan to recognize a tax liability (or asset).

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Administration errors, if any, which are insignificant or operational in nature are handled by the Plan Administrator in accordance with applicable IRS correction policies. Plan years from December 31, 2021 are open for examination for federal tax purposes.

8. Distributions

There were no distributions payable to terminated employees included in net assets available for benefits for the years ended December 31, 2024 and 2023.

9. Exempt Party-in-Interest Transactions

Certain Master Trust investments are shares of mutual funds managed by Fidelity. Fidelity is the trustee as defined by the Plan, and therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund. Notes receivable from participants are also considered exempt party-in-interest transactions.

At December 31, 2024 and 2023, the Master Trust held 19,101 and 21,487 shares, respectively, of common stock of the Company, the sponsoring employer, with a cost basis of \$405,295 and \$469,234, respectively. During the year ended December 31, 2024, the Master Trust recorded dividend income of \$19,521, related to the Company's common stock.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Notes to Financial Statements
December 31, 2024 and 2023

10. Nonexempt Transactions

During 2023, the Plan Sponsor deposited participant and employer contributions totaling \$79,933, subsequent to the time frame required by the Department of Labor (DOL). The DOL considers late deposits to be prohibited transactions. The Plan Sponsor remitted lost earnings related to the 2023 plan year and filed the respective Form 5330 with the applicable excise taxes during the year ended December 31, 2024.

Supplemental Schedules

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Employer Identification Number 81-4753934

Plan Number - 001

Schedule H, Item 4(a) - Schedule of Delinquent Participant Contributions

December 31, 2024

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
Check Here if Late Participant Loan Repayments are Included <input checked="" type="checkbox"/>	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
Late Participant Contributions from 2023:				
\$ 79,933	\$ -	\$ 79,933	\$ -	\$ -

Participant deferrals were remitted untimely during the year ended December 31, 2023. The Plan Sponsor remitted lost earnings related to the 2023 plan year and filed the respective Form 5330 with the applicable excise taxes during the year ended December 31, 2024.

See independent auditor's report.

A&B Individual Deferred Compensation and Profit Sharing Plan for Salaried Non-Bargaining Employees

Employer Identification Number 81-4753934

Plan Number - 001

Schedule H, Item 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b) Identity of Issue	(c) Description	(d) Cost	(e) Current Value
	Plan's interest in Master Trust		**	\$ 63,317,835
*	Notes Receivable from Participants	Promissory notes; secured by vested interest; various terms; interest rates ranging from 4.25 to 9.5 percent, maturing at various dates through November 2037.	**	<u>238,901</u>
		Total assets held at end of year		<u><u>\$ 63,556,736</u></u>

* Party-in-interest

** Investments are participant-directed

The above information has been certified by Fidelity Management Trust Company, the Plan's trustee, as complete and accurate.

SUMMARY OF NET TRUST ASSETS

Total Plan Assets as of 12/31/2024

<u>Fund Name</u>	<u>Share Balance 12/31/2024</u>	<u>Historical Cost</u>	<u>Price</u>	<u>Total Market Value</u>
BROKERAGELINK		\$0.00		
COMMON STOCK UNIT		\$1,073,273.79		\$1,844,393.23
CASH		\$1,108,601.22		\$1,315,193.56
FIDELITY FUND CERT. OF DEP.		\$908,893.21		\$908,893.21
		\$352,741.33		\$352,741.33
		\$292,000.00		\$292,196.30
VAN FTSE SOC IDX ADM	1,700.759	\$74,476.45	\$56.40	\$95,922.81
HTFD INTL OP HLS IA	0.000		\$16.16	\$0.00
VANG VAL INDEX INST	97,986.999	\$4,507,295.95	\$66.03	\$6,470,081.54
HTFD INTL OPPS R6	31,326.475	\$603,897.68	\$19.25	\$603,034.64
LOOMIS SM CP GRTH N	11,663.244	\$322,197.84	\$29.66	\$345,931.82
JPM CORE PLUS BND R6	348,315.032	\$2,515,110.01	\$7.12	\$2,480,003.03
DRIEHAUS EM GRTH IS	14,008.853	\$542,741.31	\$37.07	\$519,308.18
TCW MW TOT RTN BD P	0.000		\$8.32	\$0.00
AF EUROPAC GROWTH R6	12,797.629	\$674,409.57	\$53.72	\$687,488.63
MM MID CAP GRTH I	91,851.561	\$2,102,801.19	\$19.33	\$1,775,490.67
C&S REAL ESTATE Z	60,398.919	\$956,302.23	\$17.27	\$1,043,089.33
WM BLR EM MKT LDR R6	0.000		\$9.24	\$0.00
AS SPL SM CAP VAL R6	24,337.916	\$912,271.96	\$40.24	\$979,357.74
GALLIARD STBLE RTN C	60,917.324	\$3,144,573.40	\$61.47	\$3,744,587.91
NT ACWI EX-US INDEX	3,578.291	\$551,231.48	\$188.73	\$675,330.86
NT AGGREG BOND INDEX	10,135.490	\$1,250,545.33	\$125.26	\$1,269,571.48
NT EXT EQ MKT IDX	2,003.498	\$463,285.84	\$370.43	\$742,155.76
NT S&P 500 INDEX	10,290.286	\$3,253,723.54	\$586.70	\$6,037,310.80
A&B STOCK				
□ A&B STOCK STOCK PURCHASE ACCOUNT*	19,100.549	\$405,295.33	\$17.74	\$338,843.74
				\$419.89
FID LOW-PRICED ST K6	80,390.063	\$1,071,101.54	\$14.62	\$1,175,302.72
FID FREEDOM 2005 K6	0.000		\$11.13	\$0.00
FID FREEDOM 2010 K6	2,664.189	\$37,449.53	\$13.83	\$36,845.73
FID FREEDOM 2015 K6	65,234.158	\$804,724.23	\$11.34	\$739,755.35
FID FREEDOM 2020 K6	102,039.944	\$1,577,143.24	\$14.28	\$1,457,130.40
FID FREEDOM 2025 K6	128,677.601	\$1,772,150.38	\$13.56	\$1,744,868.27
FID FREEDOM 2030 K6	155,157.703	\$2,651,962.59	\$17.46	\$2,709,053.49
FID FREEDOM 2035 K6	175,831.051	\$2,569,848.17	\$15.59	\$2,741,206.09
FID FREEDOM 2040 K6	117,471.603	\$1,216,600.37	\$11.50	\$1,350,923.43
FID FREEDOM 2045 K6	127,511.273	\$1,539,625.73	\$13.41	\$1,709,926.17
FID FREEDOM 2050 K6	78,236.356	\$952,438.00	\$13.62	\$1,065,579.17
FID FREEDOM 2055 K6	56,994.185	\$785,878.38	\$15.78	\$899,368.24

SUMMARY OF NET TRUST ASSETS

Total Plan Assets as of 12/31/2024

<u>Fund Name</u>	<u>Share Balance</u> <u>12/31/2024</u>	<u>Historical Cost</u>	<u>Price</u>	<u>Total Market Value</u>
FID FREEDOM 2060 K6	17,775.947	\$226,403.74	\$14.48	\$257,395.71
FID FREEDOM INC K6	967.808	\$10,377.99	\$10.53	\$10,191.02
FID GOVT MMKT K6	304,887.040	\$304,887.04	\$1.00	\$304,887.04
FID FREEDOM 2065 K6	0.000		\$13.25	\$0.00
FID GROWTH CO K6	479,909.771	\$8,098,802.57	\$30.41	\$14,594,056.14
OUTSTANDING LOAN BALANCE				\$238,901.18

			NET ASSETS 12/31/2024:	\$63,556,736.61
				=====

Assets are presented at fair value with the exception to fully benefit responsive investment contracts which are presented at contract value as in previous years. See Chapter 7 of the Fidelity Auditor's Guide for financial statement presentation and disclosure information.

* The stock purchase account may consist of the stock fund and/or the Fidelity Cash Reserves is a money market fund that is used as a plan-level account in the recordkeeping of the purchase and sales of fractional shares of employer stock. Participants cannot invest their account balances in this fund. Please refer to the Auditor's Guide for information about the employer stock purchase account.