

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 03/01/2024 and ending 02/28/2025

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [X] Form 5558 [] automatic extension... 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: PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 03/01/1957
2a Plan sponsor's name (employer, if for a single-employer plan): PARK AEROSPACE CORP.
2b Employer Identification Number (EIN): 11-1734643
2c Plan Sponsor's telephone number: 631-465-3600
2d Business code (see instructions): 551112

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

Form 5500 (2024) v. 240311

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	209
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)	108
	6a(2)	126
	6b	10
	6c	88
	6d	224
	6e	2
	6f	226
	6g(1)	158
	6g(2)	165
h	6h	10
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2H 2J 2T 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)	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.
--	--	---

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

A Name of plan PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 PARK AEROSPACE CORP.	D Employer Identification Number (EIN) 11-1734643	

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

AMERICAN BEACON	4151 AMON CARTER BLVD FORT WORTH, TX 76155
------------------------	---

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

AMERICAN CENTURY	PO BOX 419200 KANSAS CITY, MO 64141
-------------------------	--

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

AMERICAN FUNDS	333 SOUTH HOPE STREET LOS ANGELES, CA 90071
-----------------------	--

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

BARON	767 FIFTH AVENUE 49TH FLOOR NEW YORK, NY 10153
--------------	---

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

FIDELITY

82 DEVONSHIRE ST.
BOSTON, MA 02109

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

JANUS

151 DETROIT ST.
DENVER, CO 80206

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

JP MORGAN

277 PARK AVENUE
NEW YORK, NY 10172

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

T. ROWE

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

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

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

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

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)

NEWPORT GROUP, INC.

27-2037969

(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	RECORDKEEPER	22691	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes <input type="checkbox"/> No <input 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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN BEACON SMALL CAP VALUE FUN 4151 AMON CARTER BLVD., MD 2450 FORT WORTH, TX 76155	10 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	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.	
AMERICAN CENTURY EQUITY GROWTH FUND P.O. BOX 419385 KANSAS CITY, MO 64141	15 BASIS POINTS ANNUALLY-59	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	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.	
AMERICAN CENTURY LARGE COMPANY VALU P.O. BOX 419385 KANSAS CITY, MO 64141	15 BASIS POINTS ANNUALLY-59	

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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN FUNDS - EUROPACIFIC GROWTH 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	5 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN FUNDS - WASHINGTON MUTUAL 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	5 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BARON ASSET FUND 767 FIFTH AVENUE, 49TH FLOOR NEW YORK, NY 10153	15 BASIS POINTS ANNUALLY-60	

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
PNC BANK, NATIONAL ASSOCIATION	52 60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FIDELITY PURITAN FUND 82 DEVONSHIRE ST. BOSTON, MA 02109	10 BASIS POINTS ANNUALLY-52 15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JANUS HENDERSON FLEXIBLE BOND FUND 151 DETROIT STREET DENVER, CO 80206	10 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JP MORGAN EMERGING MARKETS EQUITY F 30 DAN ROAD CANTON, MA 02021	10 BASIS POINTS ANNUALLY-60	

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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE BLUE CHIP GROWTH FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2015 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2020 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2025 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2030 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2035 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2040 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2045 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2050 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
PNC BANK, NATIONAL ASSOCIATION	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2055 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN BEACON SMALL CAP VALUE FUN 4151 AMON CARTER BLVD., MD 2450 FORT WORTH, TX 76155	10 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	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.	
AMERICAN CENTURY EQUITY GROWTH FUND P.O. BOX 419385 KANSAS CITY, MO 64141	15 BASIS POINTS ANNUALLY-59	

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
NEWPORT GROUP, INC.	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.	
AMERICAN CENTURY LARGE COMPANY VALU P.O. BOX 419385 KANSAS CITY, MO 64141	15 BASIS POINTS ANNUALLY-59	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN FUNDS - EUROPACIFIC GROWTH 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	5 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN FUNDS - WASHINGTON MUTUAL 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	5 BASIS POINTS ANNUALLY-60	

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
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BARON ASSET FUND 767 FIFTH AVENUE, 49TH FLOOR NEW YORK, NY 10153	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	52 60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FIDELITY PURITAN FUND 82 DEVONSHIRE ST. BOSTON, MA 02109	10 BASIS POINTS ANNUALLY-52 15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JANUS HENDERSON FLEXIBLE BOND FUND 151 DETROIT STREET DENVER, CO 80206	10 BASIS POINTS ANNUALLY-60	

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
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JP MORGAN EMERGING MARKETS EQUITY FUND 30 DAN ROAD CANTON, MA 02021	10 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE BLUE CHIP GROWTH FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2015 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2035 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2040 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2045 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2035 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2040 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2045 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	

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
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2050 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
NEWPORT GROUP, INC.	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T. ROWE PRICE RETIREMENT 2055 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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.
---	--	---

For calendar plan year 2024 or fiscal plan year beginning 03/01/2024 and ending 02/28/2025

A Name of plan <u>PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN</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>PARK AEROSPACE CORP.</u>	D Employer Identification Number (EIN) <u>11-1734643</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)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>T ROWE PRICE STABLE VALUE FUND A</u>	
b Name of sponsor of entity listed in (a):	<u>T. ROWE PRICE STABLE VALUE COMMON TRUST FUND</u>	
c EIN-PN <u>52-1309931-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>312223</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)

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)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
--	--	--

For calendar plan year 2024 or fiscal plan year beginning 03/01/2024 and ending 02/28/2025	
A Name of plan PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 PARK AEROSPACE CORP.	D Employer Identification Number (EIN) 11-1734643

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	108261	131027
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	9081	7932
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	92308	66706
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	14765	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	1908744	1751745
(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)	760651	312223
(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)	13519352	15250835
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	16413162	17520468
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	16413162	17520468

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)	131027	
(B) Participants.....	2a(1)(B)	264734	
(C) Others (including rollovers).....	2a(1)(C)	1309	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		397070
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(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)		0
(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)	855345	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		855345
(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)		
(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)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		2880
(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)		1300586
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2555881

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1426094	
(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)		1426094
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	100	
(3) Recordkeeping fees	2i(3)	22381	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		22481
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1448575

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		1107306
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: **CARON & BLETZER, PLLC**

(2) EIN: **04-3499945**

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.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	89510
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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
e Was this plan covered by a fidelity bond?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
l Has the plan failed to provide any benefit when due under the plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
--	---	---

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

A Name of plan PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 PARK AEROSPACE CORP.	D Employer Identification Number (EIN) 11-1734643	

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): 75-3182674

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

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

3	
----------	--

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

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

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <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 05 / 19 / 2023 (MM/DD/YYYY) and the Opinion Letter serial number _____.

**PARK AEROSPACE CORP. EMPLOYEES' PROFIT
SHARING AND 401(k) RETIREMENT SAVINGS
PLAN**

FINANCIAL STATEMENTS

February 28, 2025 and February 29, 2024 and
For the Year Ended February 28, 2025



Employee Benefit Plan Audit Specialists

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

CONTENTS

	Page(s)
Independent Auditor's Report	1-4
Financial Statements:	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
Notes to Financial Statements	7-13
Supplemental Schedules:	
Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions	14
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)	15-18

Certain supplemental schedules have been omitted because they are either not required or not applicable.



Independent Auditor's Report

To the Plan Administrator of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings Plan:

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

We have performed audits of the financial statements of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of February 28, 2025 and February 29, 2024, and the related statement of changes in net assets available for benefits for the year ended February 28, 2025, 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 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 qualified institutions as of February 28, 2025 and February 29, 2024 and for the year ended February 28, 2025, stating that the certified investment information, as described in Note F 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 of our report:

- 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 ("GAAP").
- the information in the accompanying financial statements related to assets held by and certified to by qualified institutions 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 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 certifications, 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 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 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 Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the year ended February 28, 2025 and the Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of February 28, 2025, 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. 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 certified information in the supplemental schedules related to assets held by and certified to by qualified institutions 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).

Caron & Bleger, PLLC

Kingston, NH
December 12, 2025

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
February 28, 2025 and February 29, 2024

	February 28, 2025		February 29, 2024	
	Participant Directed	Non-participant Directed	Participant Directed	Non-participant Directed
Assets:		Total		Total
Investments at fair value:				
Mutual funds	\$ 11,501,092	\$ 1,930,032	\$ 10,079,738	\$ 2,080,349
Exchange traded funds	-	1,819,711	-	1,359,265
Common stock	-	1,751,745	-	1,908,744
Common collective trust	312,223	-	760,651	-
Corporate and other bonds	-	-	-	14,765
US government obligations	-	66,706	-	92,308
Total investments at fair value	<u>11,813,315</u>	<u>17,381,509</u>	<u>10,840,389</u>	<u>5,455,431</u>
Receivables:				
Employer contributions	-	131,027	-	108,261
Accrued income	-	7,932	-	9,081
Total receivables	<u>-</u>	<u>138,959</u>	<u>-</u>	<u>117,342</u>
Total assets	<u>11,813,315</u>	<u>17,520,468</u>	<u>10,840,389</u>	<u>16,413,162</u>
Net assets available for benefits	<u>\$ 11,813,315</u>	<u>\$ 17,520,468</u>	<u>\$ 10,840,389</u>	<u>\$ 16,413,162</u>

The accompanying notes are an integral part of the financial statements.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the year ended February 28, 2025

	2025		
	Participant Directed	Non-participant Directed	Total
Additions:			
Investment income:			
Net appreciation in fair value of investments	\$ 1,413,717	\$ 262,914	\$ 1,676,631
Interest and dividends	<u>303,450</u>	<u>178,730</u>	<u>482,180</u>
	1,717,167	441,644	2,158,811
Contributions:			
Participant contributions	264,734	-	264,734
Employer contributions	-	131,027	131,027
Rollover contributions	<u>1,309</u>	<u>-</u>	<u>1,309</u>
	<u>266,043</u>	<u>131,027</u>	<u>397,070</u>
Total additions	1,983,210	572,671	2,555,881
Deductions:			
Benefits paid to participants	993,170	432,924	1,426,094
Administrative expenses	<u>17,114</u>	<u>5,367</u>	<u>22,481</u>
Total deductions	<u>1,010,284</u>	<u>438,291</u>	<u>1,448,575</u>
Net increase	972,926	134,380	1,107,306
Net assets available for benefits:			
Beginning of year	<u>10,840,389</u>	<u>5,572,773</u>	<u>16,413,162</u>
End of year	<u>\$ 11,813,315</u>	<u>\$ 5,707,153</u>	<u>\$ 17,520,468</u>

The accompanying notes are an integral part of the financial statements.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

A. DESCRIPTION OF PLAN:

The following description of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of Park Aerospace Corp. (the "Company") who have completed three months of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). Employees are eligible to participate in the Plan on the next available entry date of the next Plan year following their employment commencement date if they are credited with at least 3 months of services, as defined in the Plan document for the year.

Contributions

Upon meeting eligibility requirements participants may contribute up to 100% of their plan compensation on a pre-tax basis, subject to Internal Revenue Code ("IRC") limitations. Participants who are at least 50 may make an additional "catch up" contribution subject to IRC limitations. Participants may also contribute funds from another qualified plan ("rollover contributions"), subject to certain requirements.

Participant contributions may be matched by the Company at a percentage of the participants' contributions, as determined by the Company. For the plan year ended February 28, 2025, the Company did not make a matching contribution to participants. The Company may also elect to make a discretionary profit sharing contribution into a non-participant directed fund for eligible employees who have at least 1,000 hours of service. Such contributions shall be allocated to those employees in proportion to each participant's compensation from the Company for the plan year. Employees must be employed on the last day of the plan year to be eligible for profit sharing contributions. The Company made a profit sharing contribution of \$149,446 before the utilization of forfeitures for the 2025 plan year.

Participant Accounts

Each participant's account is credited or charged with contributions, investment income, and administrative expenses. Investment income, including realized and unrealized gains and losses, and expenses are allocated to participant's accounts based on each participant's account balance within each fund for participant directed investments. Each participant's account is credited with the participant's proportional allocation of the Plan's earnings, including unrealized gains and losses, and expenses for nonparticipant directed investments. For participant directed investments participants determine the percentage in which contributions are to be invested in each fund. For participant directed investments participants may change their investment options as set forth in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Vesting

Participants are fully vested in that portion of their account which represents their contributions and the income earned thereon. Participants become 100% vested in the Company's contributions and earnings thereon upon death, total and permanent disability, or attainment of normal retirement age. Otherwise, a participant's interest in the Company's contributions and earnings thereon vests according to the following schedule:

<u>Completed Years of Service</u>	<u>Percent Vested</u>
Less than 2 years	0%
Less than 3 years but greater than 2 years	20%
Less than 4 years but greater than 3 years	40%
Less than 5 years but greater than 4 years	60%
Less than 6 years but greater than 5 years	80%
6 years+	100%

Forfeitures

When certain terminations of participation in the Plan occur, the nonvested portion of the participant's account represents a forfeiture, as defined by the Plan. Forfeited balances are first used to restore re-employed participants' accounts. Any remaining forfeitures may be used to pay plan expenses or to reduce company contributions. During 2025, \$29,024 of forfeitures were used to reduce company contributions. Unallocated forfeitures at February 28, 2025 and February 29, 2024 were \$18,438 and \$19,799, respectively.

Unallocated Assets

The Plan holds assets in an unallocated account which receives deposits as a result of a revenue sharing agreement with the trustee. Funds in the account are used to pay qualified plan expenses including investment management fees, trustee fees, audit fees, and legal fees.

Distribution of Benefits

Benefits may be distributed to participants upon termination of employment by reason of retirement, disability, death, or other separation from service. Distributions under the Plan may be made in lump sums or installment payments.

A participant may also request a withdrawal upon attainment of age 59 1/2 or upon demonstration by the participant to the plan administrator that the participant is suffering from "hardship", as defined in the plan document.

Notes Receivable from Participants

Participants may not borrow from their account.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting

The accompanying financial statements have been prepared using 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 and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

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

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

Expenses of the Plan

Some of the administrative expenses, which include participant fees, administrative fees, and delivery fees, incurred by the Plan are paid by the Plan through the unallocated account or by participants in the Plan. Expenses that are paid by the Company are excluded from these financial statements. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

Contributions

Contributions from plan participants and company contributions are recorded in the year in which the participant contributions are withheld from compensation.

Payment of Benefits

Benefits are recorded when paid.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

C. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

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

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

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

Following is a description of the valuation methodologies used by the Plan. There have been no changes in the methodologies used at February 28, 2025 and February 29, 2024.

Mutual funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common stocks, exchange traded funds – Valued at the closing price reported on the active market on which the individual securities are traded.

US Government Obligations – Valued using pricing models maximizing the use of observable inputs for similar securities.

Corporate and other bonds – Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Common collective trust – Valued at the net asset value of units of a collective trust. The net asset value, as provided by the fund manager, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of February 28, 2025 and February 29, 2024:

Description	2025			
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 13,431,124	\$ 13,431,124	\$ -	\$ -
Exchange traded funds	1,819,711	1,819,711	-	-
Common stock	1,751,745	1,751,745	-	-
US government obligations	<u>66,706</u>	<u>-</u>	<u>66,706</u>	<u>-</u>
Total investments in the fair value hierarchy	17,069,286	<u>\$ 17,002,580</u>	<u>\$ 66,706</u>	<u>\$ -</u>
Investments measured at net asset value(1):				
Common collective trust	<u>312,223</u>			
Total investments at fair value	<u>\$ 17,381,509</u>			

Description	2024			
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 12,160,087	\$ 12,160,087	\$ -	\$ -
Exchange traded funds	1,359,265	1,359,265	-	-
Common stock	1,908,744	1,908,744	-	-
Corporate and other bonds	14,765	-	14,765	-
US government obligations	<u>92,308</u>	<u>-</u>	<u>92,308</u>	<u>-</u>
Total investments in the fair value hierarchy	15,535,169	<u>\$ 15,428,096</u>	<u>\$ 107,073</u>	<u>\$ -</u>
Investments measured at net asset value(1):				
Common collective trust	<u>760,651</u>			
Total investments at fair value	<u>\$ 16,295,820</u>			

(1) In accordance with Subtopic 820-10, 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 this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Redemptions for the common collective trust held by the Plan are allowed daily for participants; however, the Plan is subject to a thirty-day redemption notice period that may be waived at the discretion of the trustee. There are no unfunded commitments.

D. RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS:

Section 3(14) of ERISA defines a party in interest to include, among others, fiduciaries or employees of the Plan, any person who provides services to the Plan or an employer whose employees are covered by the Plan. Accordingly, the management of investments held by the trustee and the custodian are considered party in interest transactions.

E. TAX STATUS:

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated May 19, 2023, that the Plan is designed in accordance with applicable sections of the IRC. The Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

F. CERTIFIED INVESTMENTS:

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments held at February 28, 2025 and February 29, 2024, and net appreciation (depreciation) in fair value of investments and interest and dividends for the year ended February 28, 2025, was obtained by management and agreed to or derived from information certified as complete and accurate by Newport Trust Company, LLC, Ascensus, LLC on behalf of Ascensus Trust Company, and PNC Bank, National Association (PNC), the trustee and custodians, respectively, of the Plan.

G. PLAN TERMINATION:

Although the Plan was established with the intention that it will continue indefinitely, the Company retains the right to discontinue its contributions at any time or to terminate the Plan, subject to the provisions of ERISA. In the event of plan termination, all participants will become 100% vested in their accounts.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

H. RISKS AND UNCERTAINTIES:

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

I. SUBSEQUENT EVENTS:

The Plan has evaluated subsequent events through December 12, 2025, the date these financial statements were available for issuance.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
EIN: 11-1734643
Plan Number: 001

SCHEDULE H, LINE 4(a) - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
for the year ended February 28, 2025

Total that Constitute Nonexempt Prohibited Transactions

Plan Year	Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
2023	\$ 47,027	\$ 47,027	\$ -	\$ -	\$ -
2024	42,483	42,483	-	-	-

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
Participant Directed Investments:				
<u>Mutual Funds:</u>				
		1,553 shares	**	\$ 153,164
Baron Asset Fund Institutional R6		6,970 shares	**	395,693
American Funds Europacific Growth R6		57,690 shares	**	1,445,701
Fidelity Puritan Fund		893 shares	**	93,423
Vanguard Explorer Fund Admiral		1,203 shares	**	662,415
Vanguard 500 Index Admiral		40,313 shares	**	354,756
Voya Intermediate Bond R6		2,657 shares	**	890,055
Vanguard Mid Cap Index Admiral		555 shares	**	63,172
Vanguard Small Cap Index Adm		48,513 shares	**	625,823
T Rowe Price Retirement 2015 Fund		7,942 shares	**	151,616
T Rowe Price Retirement 2020 Fund		2,932 shares	**	49,872
T Rowe Price Retirement 2025 Fund		5,992 shares	**	158,020
T Rowe Price Retirement 2030 Fund		6,856 shares	**	148,848
T Rowe Price Retirement 2035 Fund		2,224 shares	**	70,150
T Rowe Price Retirement 2040 Fund		994 shares	**	22,831
T Rowe Price Retirement 2045 Fund		922 shares	**	18,023
T Rowe Price Retirement 2050 Fund		4,683 shares	**	96,198
T Rowe Price Retirement 2055 Fund		1,340 shares	**	22,949
T Rowe Price Retirement 2060 Fund		90 shares	**	1,190
T Rowe Price Retirement 2065 Fund		26,407 shares	**	3,944,067
T Rowe Blue Chip Growth Fund		725 shares	**	62,314
Vanguard MidCap Value Index Admiral		21,353 shares	**	743,287
MFS Massachusetts Investors R6		18,826 shares	**	1,207,500
American Funds Washington Mutual Investors Fund R6		2,657 shares	**	89,875
DFA U.S. Targeted Value Portfolio		135 shares	**	1,306
Vanguard Total Bond Market Index Admiral Fund		928 shares	**	28,844
JPMorgan Emerging Markets Equity Fund R6				<u>11,501,092</u>
Total Mutual Funds				11,501,092
<u>Common Collective Trust:</u>				
T Rowe Price Stable Value Fund		312,223 shares	**	<u>312,223</u>
Total Participant Directed Investments				11,813,315
Non-Participant Directed Investments:				
<u>Mutual Funds:</u>				
		10,428 shares	236,300	234,636
Federated Hermes International Fund		245,585 shares	245,585	246,524
* PNC Govt Money Market Fund #07 PKIXX PNC		8,063 shares	8,063	8,063
* PNC Govt Money Market Fund #07 PKIXX PCA LCV Div Focus		19,939 shares	19,939	19,939
* PNC Govt Money Market Fund #07 PKIXX PCG LCG Advantage		14,117 shares	14,117	14,117
* PNC Govt Money Market Fund #07 PKIXX PCA LCV Advantage		148,051 shares	<u>1,599,032</u>	<u>1,406,753</u>
Federated Total Return Bond Fund				
Total Mutual Funds			2,123,036	1,930,032
<u>Exchange Traded Funds:</u>				
Invesco QQQ Trust (QQQ)		465 shares	233,235	236,299
Ishares Core S&P 500 (IVV)		498 shares	228,863	297,326
Ishares Core S&P Mid-Cap ETF (IJH)		3,585 shares	146,073	221,840
Ishares Core S&P Small Cap ETF (IJR)		1,900 shares	233,834	212,401
Vanguard FTSE Emerging Markets ETF (VWO)		5,234 shares	226,627	234,117
SCHWAB SHORT TERM US TREASURY (SCHO)		25,400 shares	<u>610,181</u>	<u>617,728</u>
Total Exchange Traded Funds			1,678,813	1,819,711

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
<u>Common Stock:</u>				
Royal Caribbean Cruises LTD (RCL)	27 shares	4,300	6,645	
Amazon Com Inc (AMZN)	332 shares	34,949	70,477	
Autozone Inc (AZO)	5 shares	4,796	17,465	
Home Depot Inc (HD)	55 shares	10,472	21,813	
Marriott International Inc (MAR)	45 shares	10,917	12,620	
McDonald's Corp (MCD)	75 shares	17,676	23,125	
SERVICE CORP INTERNATIONAL (SCI)	116 shares	7,970	9,396	
TJX COMPANIES INC NEW (TJX)	206 shares	16,976	25,701	
Caseys General Stores Inc (CASY)	18 shares	4,930	7,456	
COCA COLA CO (KO)	89 shares	5,401	6,338	
Costco Wholesale Corp (COST)	25 shares	8,997	26,215	
THE HERSHEY COMPANY (HSY)	21 shares	4,432	3,627	
MONDELEZ INTERNATIONAL (MDLZ)	48 shares	2,911	3,083	
Pepsico Inc (PEP)	29 shares	3,447	4,451	
Philip Morris Internat-W/I (PM)	133 shares	13,084	20,652	
Proctor & Gamble Co (PG)	113 shares	12,586	19,644	
Chevron Corporation (CVX)	108 shares	14,525	17,131	
Conoco Phillips (COP)	50 shares	5,721	4,958	
Exxon Mobil Corp (XOM)	196 shares	13,442	21,821	
HESS CORPORATION (HES)	36 shares	4,002	5,362	
Shell PLC (SHEL)	120 shares	8,642	8,095	
CHUBB LTD (CB)	60 shares	11,552	17,129	
American Express Co (AXP)	19 shares	3,399	5,718	
Ameriprise Financial Inc (AMP)	34 shares	4,756	18,268	
Bank of America Corp (BAC)	496 shares	12,700	22,866	
Blackstone Inc (BX)	66 shares	9,289	10,637	
Blackrock Inc (BLK)	16 shares	10,051	15,644	
CME Group Inc (CME)	41 shares	8,888	10,405	
JPMorgan Chase & Co (JPM)	157 shares	11,959	41,550	
Marsh & McLennan (MMC)	58 shares	5,735	13,795	
Mastercard Inc CL A (MA)	39 shares	6,954	22,476	
Morgan Stanley (MS)	140 shares	8,079	18,635	
Raymond James Financial Inc (RJF)	65 shares	9,991	10,054	
S&P Global Inc (SPGI)	27 shares	4,387	14,411	
The Travelers Cos Inc (TRV)	22 shares	4,344	5,687	
US Bancorp Del (USB)	86 shares	4,426	4,033	
Visa Inc (V) Class A Shares	104 shares	23,305	37,722	
Wells Fargo & Company (WFC)	92 shares	6,962	7,205	
Medtronic PLC (MDT)	40 shares	3,464	3,681	
Abbott Laboratories Inc (ABT)	133 shares	11,265	18,355	
Abbvie Inc (ABBV)	66 shares	5,821	13,796	
Amgen Inc (AMGN)	19 shares	5,092	5,853	
Boston Scientific Corp (BSX)	103 shares	5,569	10,690	
Encompass Health Corp (EHC)	51 shares	4,310	5,107	
Johnson & Johnson (JNJ)	105 shares	17,292	17,327	
Eli Lilly & Co (LLY)	57 shares	8,406	52,476	
Merck & Co Inc (MRK)	158 shares	10,915	14,576	
Stryker Corp (SYK)	52 shares	14,514	20,082	
Thermo Fisher Scientific Inc (TMO)	11 shares	4,682	5,819	
Unitedhealth Group Inc (UNH)	48 shares	15,817	22,798	
Eaton Corp PLC (ETN)	36 shares	10,754	10,560	
Johnson CTLS INTL PLC (JCI)	55 shares	3,743	4,711	
Trane Technologies PLC (TT)	29 shares	8,194	10,257	
Caterpillar Inc (CAT)	12 shares	3,924	4,127	

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
Cintas Corp (CTAS)	143 shares	12,322	29,673	
Honeywell Intl Inc (HON)	100 shares	18,680	21,289	
Hubbel Inc (HUBB)	35 shares	8,529	13,006	
Illinois Tool Works Inc (ITW)	83 shares	20,432	21,910	
Paccar Inc (PCAR)	135 shares	10,411	14,477	
PARKER HANNIFIN CORP (PH)	11 shares	3,766	7,354	
Quanta Svs Inc (PWR)	63 shares	4,324	16,357	
RTX Corporation (RTX)	46 shares	5,483	6,118	
Transdigm Group Inc (TDG)	4 shares	5,267	5,469	
Accenture PLC Class A (ACN)	37 shares	8,006	12,895	
Apple Inc (AAPL)	464 shares	25,820	112,214	
Broadcom Inc (AVGO)	324 shares	14,110	64,615	
CDW Corp/DE (CDW)	25 shares	1,161	4,455	
Cadence Design Systems Inc (CDNS)	47 shares	9,851	11,774	
CrowdStrike Holdings Inc - A (CRWD)	22 shares	8,462	8,573	
Lam Research Corp (LRCX)	239 shares	7,432	18,341	
Microsoft Corp (MSFT)	298 shares	33,415	120,136	
Micron Technology Inc (MU)	76 shares	5,799	7,116	
Motorola Solutions Inc (MSI)	48 shares	7,048	21,131	
Nvidia Corp (NVDA)	761 shares	101,512	95,064	
Service Now Inc (NOW)	22 shares	12,067	20,455	
Taiwan Semiconductor Mtg Co (TSM)	106 shares	12,564	19,136	
New Linde PLC (LIN)	33 shares	15,380	15,413	
Eastman Chem Co (EMN)	109 shares	11,197	10,666	
Sherwin-Williams Co (SHW)	13 shares	4,679	4,710	
Extra Space Storage Inc (EXR)	32 shares	2,675	4,882	
Invitation Homes Inc (INVH)	154 shares	4,028	5,238	
Prologis Inc (PLD)	81 shares	9,820	10,038	
Simon Property Group Inc (SPG)	74 shares	11,019	13,771	
Alphabet Inc/CA-CL A (GOOGL)	394 shares	23,413	67,090	
Comcast Corporation CL A (CMCSA)	236 shares	9,362	8,468	
Disney Walt Co (DIS)	111 shares	12,694	12,632	
META PLATFORMS INC (FB)	99 shares	22,840	66,152	
FOX CORP - CLASS A - W/I (FOXA)	100 shares	3,315	5,760	
NEXSTAR MEDIA GROUP INC (NXST)	26 shares	4,368	4,398	
VERIZON COMMUNICATIONS INC (VZ)	38 shares	2,078	1,638	
American Water Works Co Inc (AWK)	46 shares	3,530	6,255	
Atmos Energy Corp (ATO)	30 shares	3,392	4,564	
Nextera Energy Inc (NEE)	176 shares	9,384	12,350	
Sempra (SRE)	58 shares	4,168	4,151	
WEC Energy Group Inc (WEC)	89 shares	7,357	9,486	
Total Common Stock		991,875	1,751,745	
<u>US Government Obligations:</u>				
Federal Home Loan Mtg Corp Pool ZI9573	5.0% 12/1/2039	2,394 Par Value	2,521	2,411
Federal Home Loan Mtg Corp Pool ZJ0139	5.0% 7/1/2040	3,109 Par Value	3,412	3,148
Federal Home Loan Mtg Corp Pool ZJ0919	4.5% 12/1/2040	9,833 Par Value	10,415	10,018
Federal Home Loan Mtg Corp Pool ZL2028	4.5% 9/1/2041	1,967 Par Value	2,121	1,955
Federal Home Loan Mtg Corp Pool ZL2326	4.5% 11/1/2041	3,298 Par Value	3,497	3,261
Federal Home Loan Mtg Corp Pool ZL7989	4.0% 4/1/2044	1,380 Par Value	1,449	1,325
Federal Home Loan Mtg Corp Pool ZK3321	4.0% 6/1/2026	492 Par Value	524	489
Federal Home Loan Mtg Corp Pool ZT0813	3.0% 9/1/2027	41 Par Value	42	41
Federal Home Loan Mtg Corp Pool ZT0814	3.5% 12/1/2028	761 Par Value	792	753
Federal Home Loan Mtg Corp Pool ZS2690	4.5% 5/1/2039	2,666 Par Value	2,890	2,654
Federal Home Loan Mtg Corp Pool ZS2952	5.0% 1/1/2036	1,545 Par Value	1,639	1,564

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
Federal Home Loan Mtg Corp Pool ZS8493	3.0% 7/1/2028 3,245 Par Value	3,337	3,177	
Federal Home Loan Mtg Corp Pool ZS8507	3.0% 11/1/2028 1,614 Par Value	1,666	1,578	
Federal Home Loan Mtg Corp Pool ZA2181	4.0% 10/1/2030 711 Par Value	760	704	
Federal Home Loan Mtg Corp Pool ZA2322	4.0% 11/1/2033 1,544 Par Value	1,644	1,519	
Federal Natl Mtg Assn Pool 255364	6.0% 9/1/2034 462 Par Value	507	481	
Federal Natl Mtg Assn Pool AJ1758	3.5% 9/1/2026 316 Par Value	333	313	
Federal Natl Mtg Assn Pool AH3519	4.0% 2/1/2041 2,290 Par Value	2,301	2,217	
Federal Natl Mtg Assn Pool AH4794	5.0% 2/1/2041 2,308 Par Value	2,461	2,337	
Federal Natl Mtg Assn Pool AL0219	3.32% 4/1/2041 410 Par Value	416	421	
Federal Natl Mtg Assn Pool AL4166	5.5% 1/1/2039 2,479 Par Value	2,723	2,546	
Federal Natl Mtg Assn Pool AL4191	3.5% 1/1/2028 941 Par Value	993	930	
Federal Natl Mtg Assn Pool AL6150	4.0% 6/1/2027 367 Par Value	393	364	
Federal Natl Mtg Assn Pool AK2439	3.5% 2/1/2027 1,035 Par Value	1,097	1,023	
Federal Natl Mtg Assn Pool AK2717	4.0% 2/1/2042 7,248 Par Value	7,707	7,008	
Federal Natl Mtg Assn Pool AR8467	2.5% 3/1/2028 2,316 Par Value	2,405	2,257	
Federal Natl Mtg Assn Pool AW8285	3.5% 8/1/2044 1,131 Par Value	1,164	1,054	
Federal Natl Mtg Assn Pool AU1660	2.5% 7/1/2028 6,131 Par Value	6,168	5,968	
Federal Natl Mtg Assn Pool AU6278	5.0% 11/1/2043 1,067 Par Value	1,183	1,068	
Federal Natl Mtg Assn Pool 555528	6.0% 4/1/2033 219 Par Value	240	227	
Federal Natl Mtg Assn Pool 745418	5.5% 4/1/2036 715 Par Value	786	736	
Federal Natl Mtg Assn Pool 962003	5.5% 3/1/2038 949 Par Value	1,028	970	
Federal Natl Mtg Assn Pool MA1860	4.5% 4/1/2044 1,323 Par Value	1,430	1,305	
Federal Natl Mtg Assn Pool MA1897	3.5% 5/1/2044 447 Par Value	455	411	
Govt Natl Mtg Assn Pool 782105	5.0% 3/15/2036 465 Par Value	507	473	
Total Government Obligations		<u>71,006</u>	<u>66,706</u>	
Total Non-Participant Directed Investments		<u>\$ 4,864,730</u>	<u>5,568,194</u>	
Total investments			<u>\$ 17,381,509</u>	

** Cost omitted for participant directed investments.

* Denotes party-in-interest to the Plan.



CARON
BLETZER

Employee Benefit Plan Audit Specialists

**PARK AEROSPACE CORP. EMPLOYEES' PROFIT
SHARING AND 401(k) RETIREMENT SAVINGS
PLAN**

FINANCIAL STATEMENTS

February 28, 2025 and February 29, 2024 and
For the Year Ended February 28, 2025



Employee Benefit Plan Audit Specialists

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

CONTENTS

	Page(s)
Independent Auditor's Report	1-4
Financial Statements:	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
Notes to Financial Statements	7-13
Supplemental Schedules:	
Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions	14
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)	15-18

Certain supplemental schedules have been omitted because they are either not required or not applicable.



Independent Auditor's Report

To the Plan Administrator of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings Plan:

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

We have performed audits of the financial statements of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of February 28, 2025 and February 29, 2024, and the related statement of changes in net assets available for benefits for the year ended February 28, 2025, 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 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 qualified institutions as of February 28, 2025 and February 29, 2024 and for the year ended February 28, 2025, stating that the certified investment information, as described in Note F 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 of our report:

- 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 ("GAAP").
- the information in the accompanying financial statements related to assets held by and certified to by qualified institutions 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 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 certifications, 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 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 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 Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the year ended February 28, 2025 and the Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of February 28, 2025, 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. 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 certified information in the supplemental schedules related to assets held by and certified to by qualified institutions 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).

Caron & Bleger, PLLC

Kingston, NH
December 12, 2025

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
February 28, 2025 and February 29, 2024

	February 28, 2025		February 29, 2024	
	Participant Directed	Non-participant Directed	Participant Directed	Non-participant Directed
		Total		Total
Assets:				
Investments at fair value:				
Mutual funds	\$ 11,501,092	\$ 1,930,032	\$ 10,079,738	\$ 2,080,349
Exchange traded funds	-	1,819,711	-	1,359,265
Common stock	-	1,751,745	-	1,908,744
Common collective trust	312,223	-	760,651	-
Corporate and other bonds	-	-	-	14,765
US government obligations	-	66,706	-	92,308
Total investments at fair value	<u>11,813,315</u>	<u>17,381,509</u>	<u>10,840,389</u>	<u>5,455,431</u>
Receivables:				
Employer contributions	-	131,027	-	108,261
Accrued income	-	7,932	-	9,081
Total receivables	<u>-</u>	<u>138,959</u>	<u>-</u>	<u>117,342</u>
Total assets	<u>11,813,315</u>	<u>17,520,468</u>	<u>10,840,389</u>	<u>16,413,162</u>
Net assets available for benefits	<u>\$ 11,813,315</u>	<u>\$ 17,520,468</u>	<u>\$ 10,840,389</u>	<u>\$ 16,413,162</u>

The accompanying notes are an integral part of the financial statements.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING AND 401(K) RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the year ended February 28, 2025

	2025		
	Participant Directed	Non-participant Directed	Total
Additions:			
Investment income:			
Net appreciation in fair value of investments	\$ 1,413,717	\$ 262,914	\$ 1,676,631
Interest and dividends	<u>303,450</u>	<u>178,730</u>	<u>482,180</u>
	1,717,167	441,644	2,158,811
Contributions:			
Participant contributions	264,734	-	264,734
Employer contributions	-	131,027	131,027
Rollover contributions	<u>1,309</u>	<u>-</u>	<u>1,309</u>
	<u>266,043</u>	<u>131,027</u>	<u>397,070</u>
Total additions	1,983,210	572,671	2,555,881
Deductions:			
Benefits paid to participants	993,170	432,924	1,426,094
Administrative expenses	<u>17,114</u>	<u>5,367</u>	<u>22,481</u>
Total deductions	<u>1,010,284</u>	<u>438,291</u>	<u>1,448,575</u>
Net increase	972,926	134,380	1,107,306
Net assets available for benefits:			
Beginning of year	<u>10,840,389</u>	<u>5,572,773</u>	<u>16,413,162</u>
End of year	<u>\$ 11,813,315</u>	<u>\$ 5,707,153</u>	<u>\$ 17,520,468</u>

The accompanying notes are an integral part of the financial statements.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

A. DESCRIPTION OF PLAN:

The following description of the Park Aerospace Corp. Employees' Profit Sharing and 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of Park Aerospace Corp. (the "Company") who have completed three months of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). Employees are eligible to participate in the Plan on the next available entry date of the next Plan year following their employment commencement date if they are credited with at least 3 months of services, as defined in the Plan document for the year.

Contributions

Upon meeting eligibility requirements participants may contribute up to 100% of their plan compensation on a pre-tax basis, subject to Internal Revenue Code ("IRC") limitations. Participants who are at least 50 may make an additional "catch up" contribution subject to IRC limitations. Participants may also contribute funds from another qualified plan ("rollover contributions"), subject to certain requirements.

Participant contributions may be matched by the Company at a percentage of the participants' contributions, as determined by the Company. For the plan year ended February 28, 2025, the Company did not make a matching contribution to participants. The Company may also elect to make a discretionary profit sharing contribution into a non-participant directed fund for eligible employees who have at least 1,000 hours of service. Such contributions shall be allocated to those employees in proportion to each participant's compensation from the Company for the plan year. Employees must be employed on the last day of the plan year to be eligible for profit sharing contributions. The Company made a profit sharing contribution of \$149,446 before the utilization of forfeitures for the 2025 plan year.

Participant Accounts

Each participant's account is credited or charged with contributions, investment income, and administrative expenses. Investment income, including realized and unrealized gains and losses, and expenses are allocated to participant's accounts based on each participant's account balance within each fund for participant directed investments. Each participant's account is credited with the participant's proportional allocation of the Plan's earnings, including unrealized gains and losses, and expenses for nonparticipant directed investments. For participant directed investments participants determine the percentage in which contributions are to be invested in each fund. For participant directed investments participants may change their investment options as set forth in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Vesting

Participants are fully vested in that portion of their account which represents their contributions and the income earned thereon. Participants become 100% vested in the Company's contributions and earnings thereon upon death, total and permanent disability, or attainment of normal retirement age. Otherwise, a participant's interest in the Company's contributions and earnings thereon vests according to the following schedule:

<u>Completed Years of Service</u>	<u>Percent Vested</u>
Less than 2 years	0%
Less than 3 years but greater than 2 years	20%
Less than 4 years but greater than 3 years	40%
Less than 5 years but greater than 4 years	60%
Less than 6 years but greater than 5 years	80%
6 years+	100%

Forfeitures

When certain terminations of participation in the Plan occur, the nonvested portion of the participant's account represents a forfeiture, as defined by the Plan. Forfeited balances are first used to restore re-employed participants' accounts. Any remaining forfeitures may be used to pay plan expenses or to reduce company contributions. During 2025, \$29,024 of forfeitures were used to reduce company contributions. Unallocated forfeitures at February 28, 2025 and February 29, 2024 were \$18,438 and \$19,799, respectively.

Unallocated Assets

The Plan holds assets in an unallocated account which receives deposits as a result of a revenue sharing agreement with the trustee. Funds in the account are used to pay qualified plan expenses including investment management fees, trustee fees, audit fees, and legal fees.

Distribution of Benefits

Benefits may be distributed to participants upon termination of employment by reason of retirement, disability, death, or other separation from service. Distributions under the Plan may be made in lump sums or installment payments.

A participant may also request a withdrawal upon attainment of age 59 1/2 or upon demonstration by the participant to the plan administrator that the participant is suffering from "hardship", as defined in the plan document.

Notes Receivable from Participants

Participants may not borrow from their account.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting

The accompanying financial statements have been prepared using 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 and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

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

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

Expenses of the Plan

Some of the administrative expenses, which include participant fees, administrative fees, and delivery fees, incurred by the Plan are paid by the Plan through the unallocated account or by participants in the Plan. Expenses that are paid by the Company are excluded from these financial statements. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

Contributions

Contributions from plan participants and company contributions are recorded in the year in which the participant contributions are withheld from compensation.

Payment of Benefits

Benefits are recorded when paid.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

C. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

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

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

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

Following is a description of the valuation methodologies used by the Plan. There have been no changes in the methodologies used at February 28, 2025 and February 29, 2024.

Mutual funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common stocks, exchange traded funds – Valued at the closing price reported on the active market on which the individual securities are traded.

US Government Obligations – Valued using pricing models maximizing the use of observable inputs for similar securities.

Corporate and other bonds – Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Common collective trust – Valued at the net asset value of units of a collective trust. The net asset value, as provided by the fund manager, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of February 28, 2025 and February 29, 2024:

Description	2025			
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 13,431,124	\$ 13,431,124	\$ -	\$ -
Exchange traded funds	1,819,711	1,819,711	-	-
Common stock	1,751,745	1,751,745	-	-
US government obligations	<u>66,706</u>	<u>-</u>	<u>66,706</u>	<u>-</u>
Total investments in the fair value hierarchy	17,069,286	<u>\$ 17,002,580</u>	<u>\$ 66,706</u>	<u>\$ -</u>
Investments measured at net asset value(1):				
Common collective trust	<u>312,223</u>			
Total investments at fair value	<u>\$ 17,381,509</u>			

Description	2024			
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 12,160,087	\$ 12,160,087	\$ -	\$ -
Exchange traded funds	1,359,265	1,359,265	-	-
Common stock	1,908,744	1,908,744	-	-
Corporate and other bonds	14,765	-	14,765	-
US government obligations	<u>92,308</u>	<u>-</u>	<u>92,308</u>	<u>-</u>
Total investments in the fair value hierarchy	15,535,169	<u>\$ 15,428,096</u>	<u>\$ 107,073</u>	<u>\$ -</u>
Investments measured at net asset value(1):				
Common collective trust	<u>760,651</u>			
Total investments at fair value	<u>\$ 16,295,820</u>			

(1) In accordance with Subtopic 820-10, 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 this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

Redemptions for the common collective trust held by the Plan are allowed daily for participants; however, the Plan is subject to a thirty-day redemption notice period that may be waived at the discretion of the trustee. There are no unfunded commitments.

D. RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS:

Section 3(14) of ERISA defines a party in interest to include, among others, fiduciaries or employees of the Plan, any person who provides services to the Plan or an employer whose employees are covered by the Plan. Accordingly, the management of investments held by the trustee and the custodian are considered party in interest transactions.

E. TAX STATUS:

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated May 19, 2023, that the Plan is designed in accordance with applicable sections of the IRC. The Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

F. CERTIFIED INVESTMENTS:

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments held at February 28, 2025 and February 29, 2024, and net appreciation (depreciation) in fair value of investments and interest and dividends for the year ended February 28, 2025, was obtained by management and agreed to or derived from information certified as complete and accurate by Newport Trust Company, LLC, Ascensus, LLC on behalf of Ascensus Trust Company, and PNC Bank, National Association (PNC), the trustee and custodians, respectively, of the Plan.

G. PLAN TERMINATION:

Although the Plan was established with the intention that it will continue indefinitely, the Company retains the right to discontinue its contributions at any time or to terminate the Plan, subject to the provisions of ERISA. In the event of plan termination, all participants will become 100% vested in their accounts.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS

H. RISKS AND UNCERTAINTIES:

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

I. SUBSEQUENT EVENTS:

The Plan has evaluated subsequent events through December 12, 2025, the date these financial statements were available for issuance.

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN
EIN: 11-1734643
Plan Number: 001

SCHEDULE H, LINE 4(a) - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
for the year ended February 28, 2025

Total that Constitute Nonexempt Prohibited Transactions

Plan Year	Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
2023	\$ 47,027	\$ 47,027	\$ -	\$ -	\$ -
2024	42,483	42,483	-	-	-

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value
Participant Directed Investments:				
<u>Mutual Funds:</u>				
		1,553 shares	**	\$ 153,164
Baron Asset Fund Institutional R6		6,970 shares	**	395,693
American Funds Europacific Growth R6		57,690 shares	**	1,445,701
Fidelity Puritan Fund		893 shares	**	93,423
Vanguard Explorer Fund Admiral		1,203 shares	**	662,415
Vanguard 500 Index Admiral		40,313 shares	**	354,756
Voya Intermediate Bond R6		2,657 shares	**	890,055
Vanguard Mid Cap Index Admiral		555 shares	**	63,172
Vanguard Small Cap Index Adm		48,513 shares	**	625,823
T Rowe Price Retirement 2015 Fund		7,942 shares	**	151,616
T Rowe Price Retirement 2020 Fund		2,932 shares	**	49,872
T Rowe Price Retirement 2025 Fund		5,992 shares	**	158,020
T Rowe Price Retirement 2030 Fund		6,856 shares	**	148,848
T Rowe Price Retirement 2035 Fund		2,224 shares	**	70,150
T Rowe Price Retirement 2040 Fund		994 shares	**	22,831
T Rowe Price Retirement 2045 Fund		922 shares	**	18,023
T Rowe Price Retirement 2050 Fund		4,683 shares	**	96,198
T Rowe Price Retirement 2055 Fund		1,340 shares	**	22,949
T Rowe Price Retirement 2060 Fund		90 shares	**	1,190
T Rowe Price Retirement 2065 Fund		26,407 shares	**	3,944,067
T Rowe Blue Chip Growth Fund		725 shares	**	62,314
Vanguard MidCap Value Index Admiral		21,353 shares	**	743,287
MFS Massachusetts Investors R6		18,826 shares	**	1,207,500
American Funds Washington Mutual Investors Fund R6		2,657 shares	**	89,875
DFA U.S. Targeted Value Portfolio		135 shares	**	1,306
Vanguard Total Bond Market Index Admiral Fund		928 shares	**	28,844
JPMorgan Emerging Markets Equity Fund R6				<u>11,501,092</u>
Total Mutual Funds				
<u>Common Collective Trust:</u>				
T Rowe Price Stable Value Fund		312,223 shares	**	<u>312,223</u>
Total Participant Directed Investments				
11,813,315				
Non-Participant Directed Investments:				
<u>Mutual Funds:</u>				
		10,428 shares	236,300	234,636
Federated Hermes International Fund		245,585 shares	245,585	246,524
* PNC Govt Money Market Fund #07 PKIXX PNC		8,063 shares	8,063	8,063
* PNC Govt Money Market Fund #07 PKIXX PCA LCV Div Focus		19,939 shares	19,939	19,939
* PNC Govt Money Market Fund #07 PKIXX PCG LCG Advantage		14,117 shares	14,117	14,117
* PNC Govt Money Market Fund #07 PKIXX PCA LCV Advantage		148,051 shares	1,599,032	1,406,753
Federated Total Return Bond Fund				<u>1,930,032</u>
Total Mutual Funds				
2,123,036				
<u>Exchange Traded Funds:</u>				
Invesco QQQ Trust (QQQ)		465 shares	233,235	236,299
Ishares Core S&P 500 (IVV)		498 shares	228,863	297,326
Ishares Core S&P Mid-Cap ETF (IJH)		3,585 shares	146,073	221,840
Ishares Core S&P Small Cap ETF (IJR)		1,900 shares	233,834	212,401
Vanguard FTSE Emerging Markets ETF (VWO)		5,234 shares	226,627	234,117
SCHWAB SHORT TERM US TREASURY (SCHO)		25,400 shares	610,181	617,728
Total Exchange Traded Funds				
1,678,813				
1,819,711				

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
<u>Common Stock:</u>				
Royal Caribbean Cruises LTD (RCL)	27 shares	4,300	6,645	
Amazon Com Inc (AMZN)	332 shares	34,949	70,477	
Autozone Inc (AZO)	5 shares	4,796	17,465	
Home Depot Inc (HD)	55 shares	10,472	21,813	
Marriott International Inc (MAR)	45 shares	10,917	12,620	
McDonald's Corp (MCD)	75 shares	17,676	23,125	
SERVICE CORP INTERNATIONAL (SCI)	116 shares	7,970	9,396	
TJX COMPANIES INC NEW (TJX)	206 shares	16,976	25,701	
Caseys General Stores Inc (CASY)	18 shares	4,930	7,456	
COCA COLA CO (KO)	89 shares	5,401	6,338	
Costco Wholesale Corp (COST)	25 shares	8,997	26,215	
THE HERSHEY COMPANY (HSY)	21 shares	4,432	3,627	
MONDELEZ INTERNATIONAL (MDLZ)	48 shares	2,911	3,083	
Pepsico Inc (PEP)	29 shares	3,447	4,451	
Philip Morris Internat-W/I (PM)	133 shares	13,084	20,652	
Proctor & Gamble Co (PG)	113 shares	12,586	19,644	
Chevron Corporation (CVX)	108 shares	14,525	17,131	
Conoco Phillips (COP)	50 shares	5,721	4,958	
Exxon Mobil Corp (XOM)	196 shares	13,442	21,821	
HESS CORPORATION (HES)	36 shares	4,002	5,362	
Shell PLC (SHEL)	120 shares	8,642	8,095	
CHUBB LTD (CB)	60 shares	11,552	17,129	
American Express Co (AXP)	19 shares	3,399	5,718	
Ameriprise Financial Inc (AMP)	34 shares	4,756	18,268	
Bank of America Corp (BAC)	496 shares	12,700	22,866	
Blackstone Inc (BX)	66 shares	9,289	10,637	
Blackrock Inc (BLK)	16 shares	10,051	15,644	
CME Group Inc (CME)	41 shares	8,888	10,405	
JPMorgan Chase & Co (JPM)	157 shares	11,959	41,550	
Marsh & McLennan (MMC)	58 shares	5,735	13,795	
Mastercard Inc CL A (MA)	39 shares	6,954	22,476	
Morgan Stanley (MS)	140 shares	8,079	18,635	
Raymond James Financial Inc (RJF)	65 shares	9,991	10,054	
S&P Global Inc (SPGI)	27 shares	4,387	14,411	
The Travelers Cos Inc (TRV)	22 shares	4,344	5,687	
US Bancorp Del (USB)	86 shares	4,426	4,033	
Visa Inc (V) Class A Shares	104 shares	23,305	37,722	
Wells Fargo & Company (WFC)	92 shares	6,962	7,205	
Medtronic PLC (MDT)	40 shares	3,464	3,681	
Abbott Laboratories Inc (ABT)	133 shares	11,265	18,355	
Abbvie Inc (ABBV)	66 shares	5,821	13,796	
Amgen Inc (AMGN)	19 shares	5,092	5,853	
Boston Scientific Corp (BSX)	103 shares	5,569	10,690	
Encompass Health Corp (EHC)	51 shares	4,310	5,107	
Johnson & Johnson (JNJ)	105 shares	17,292	17,327	
Eli Lilly & Co (LLY)	57 shares	8,406	52,476	
Merck & Co Inc (MRK)	158 shares	10,915	14,576	
Stryker Corp (SYK)	52 shares	14,514	20,082	
Thermo Fisher Scientific Inc (TMO)	11 shares	4,682	5,819	
Unitedhealth Group Inc (UNH)	48 shares	15,817	22,798	
Eaton Corp PLC (ETN)	36 shares	10,754	10,560	
Johnson CTLS INTL PLC (JCI)	55 shares	3,743	4,711	
Trane Technologies PLC (TT)	29 shares	8,194	10,257	
Caterpillar Inc (CAT)	12 shares	3,924	4,127	

**PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN**

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
Cintas Corp (CTAS)	143 shares	12,322	29,673	
Honeywell Intl Inc (HON)	100 shares	18,680	21,289	
Hubbel Inc (HUBB)	35 shares	8,529	13,006	
Illinois Tool Works Inc (ITW)	83 shares	20,432	21,910	
Paccar Inc (PCAR)	135 shares	10,411	14,477	
PARKER HANNIFIN CORP (PH)	11 shares	3,766	7,354	
Quanta Svs Inc (PWR)	63 shares	4,324	16,357	
RTX Corporation (RTX)	46 shares	5,483	6,118	
Transdigm Group Inc (TDG)	4 shares	5,267	5,469	
Accenture PLC Class A (ACN)	37 shares	8,006	12,895	
Apple Inc (AAPL)	464 shares	25,820	112,214	
Broadcom Inc (AVGO)	324 shares	14,110	64,615	
CDW Corp/DE (CDW)	25 shares	1,161	4,455	
Cadence Design Systems Inc (CDNS)	47 shares	9,851	11,774	
CrowdStrike Holdings Inc - A (CRWD)	22 shares	8,462	8,573	
Lam Research Corp (LRCX)	239 shares	7,432	18,341	
Microsoft Corp (MSFT)	298 shares	33,415	120,136	
Micron Technology Inc (MU)	76 shares	5,799	7,116	
Motorola Solutions Inc (MSI)	48 shares	7,048	21,131	
Nvidia Corp (NVDA)	761 shares	101,512	95,064	
Service Now Inc (NOW)	22 shares	12,067	20,455	
Taiwan Semiconductor Mtg Co (TSM)	106 shares	12,564	19,136	
New Linde PLC (LIN)	33 shares	15,380	15,413	
Eastman Chem Co (EMN)	109 shares	11,197	10,666	
Sherwin-Williams Co (SHW)	13 shares	4,679	4,710	
Extra Space Storage Inc (EXR)	32 shares	2,675	4,882	
Invitation Homes Inc (INVH)	154 shares	4,028	5,238	
Prologis Inc (PLD)	81 shares	9,820	10,038	
Simon Property Group Inc (SPG)	74 shares	11,019	13,771	
Alphabet Inc/CA-CL A (GOOGL)	394 shares	23,413	67,090	
Comcast Corporation CL A (CMCSA)	236 shares	9,362	8,468	
Disney Walt Co (DIS)	111 shares	12,694	12,632	
META PLATFORMS INC (FB)	99 shares	22,840	66,152	
FOX CORP - CLASS A - W/I (FOXA)	100 shares	3,315	5,760	
NEXSTAR MEDIA GROUP INC (NXST)	26 shares	4,368	4,398	
VERIZON COMMUNICATIONS INC (VZ)	38 shares	2,078	1,638	
American Water Works Co Inc (AWK)	46 shares	3,530	6,255	
Atmos Energy Corp (ATO)	30 shares	3,392	4,564	
Nextera Energy Inc (NEE)	176 shares	9,384	12,350	
Sempra (SRE)	58 shares	4,168	4,151	
WEC Energy Group Inc (WEC)	89 shares	7,357	9,486	
Total Common Stock		991,875	1,751,745	
<u>US Government Obligations:</u>				
Federal Home Loan Mtg Corp Pool ZI9573	5.0% 12/1/2039	2,394 Par Value	2,521	2,411
Federal Home Loan Mtg Corp Pool ZJ0139	5.0% 7/1/2040	3,109 Par Value	3,412	3,148
Federal Home Loan Mtg Corp Pool ZJ0919	4.5% 12/1/2040	9,833 Par Value	10,415	10,018
Federal Home Loan Mtg Corp Pool ZL2028	4.5% 9/1/2041	1,967 Par Value	2,121	1,955
Federal Home Loan Mtg Corp Pool ZL2326	4.5% 11/1/2041	3,298 Par Value	3,497	3,261
Federal Home Loan Mtg Corp Pool ZL7989	4.0% 4/1/2044	1,380 Par Value	1,449	1,325
Federal Home Loan Mtg Corp Pool ZK3321	4.0% 6/1/2026	492 Par Value	524	489
Federal Home Loan Mtg Corp Pool ZT0813	3.0% 9/1/2027	41 Par Value	42	41
Federal Home Loan Mtg Corp Pool ZT0814	3.5% 12/1/2028	761 Par Value	792	753
Federal Home Loan Mtg Corp Pool ZS2690	4.5% 5/1/2039	2,666 Par Value	2,890	2,654
Federal Home Loan Mtg Corp Pool ZS2952	5.0% 1/1/2036	1,545 Par Value	1,639	1,564

PARK AEROSPACE CORP. EMPLOYEES' PROFIT SHARING
AND 401(k) RETIREMENT SAVINGS PLAN

EIN: 11-1734643

Plan Number: 001

SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
February 28, 2025

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
Federal Home Loan Mtg Corp Pool ZS8493	3.0% 7/1/2028 3,245 Par Value	3,337	3,177	
Federal Home Loan Mtg Corp Pool ZS8507	3.0% 11/1/2028 1,614 Par Value	1,666	1,578	
Federal Home Loan Mtg Corp Pool ZA2181	4.0% 10/1/2030 711 Par Value	760	704	
Federal Home Loan Mtg Corp Pool ZA2322	4.0% 11/1/2033 1,544 Par Value	1,644	1,519	
Federal Natl Mtg Assn Pool 255364	6.0% 9/1/2034 462 Par Value	507	481	
Federal Natl Mtg Assn Pool AJ1758	3.5% 9/1/2026 316 Par Value	333	313	
Federal Natl Mtg Assn Pool AH3519	4.0% 2/1/2041 2,290 Par Value	2,301	2,217	
Federal Natl Mtg Assn Pool AH4794	5.0% 2/1/2041 2,308 Par Value	2,461	2,337	
Federal Natl Mtg Assn Pool AL0219	3.32% 4/1/2041 410 Par Value	416	421	
Federal Natl Mtg Assn Pool AL4166	5.5% 1/1/2039 2,479 Par Value	2,723	2,546	
Federal Natl Mtg Assn Pool AL4191	3.5% 1/1/2028 941 Par Value	993	930	
Federal Natl Mtg Assn Pool AL6150	4.0% 6/1/2027 367 Par Value	393	364	
Federal Natl Mtg Assn Pool AK2439	3.5% 2/1/2027 1,035 Par Value	1,097	1,023	
Federal Natl Mtg Assn Pool AK2717	4.0% 2/1/2042 7,248 Par Value	7,707	7,008	
Federal Natl Mtg Assn Pool AR8467	2.5% 3/1/2028 2,316 Par Value	2,405	2,257	
Federal Natl Mtg Assn Pool AW8285	3.5% 8/1/2044 1,131 Par Value	1,164	1,054	
Federal Natl Mtg Assn Pool AU1660	2.5% 7/1/2028 6,131 Par Value	6,168	5,968	
Federal Natl Mtg Assn Pool AU6278	5.0% 11/1/2043 1,067 Par Value	1,183	1,068	
Federal Natl Mtg Assn Pool 555528	6.0% 4/1/2033 219 Par Value	240	227	
Federal Natl Mtg Assn Pool 745418	5.5% 4/1/2036 715 Par Value	786	736	
Federal Natl Mtg Assn Pool 962003	5.5% 3/1/2038 949 Par Value	1,028	970	
Federal Natl Mtg Assn Pool MA1860	4.5% 4/1/2044 1,323 Par Value	1,430	1,305	
Federal Natl Mtg Assn Pool MA1897	3.5% 5/1/2044 447 Par Value	455	411	
Govt Natl Mtg Assn Pool 782105	5.0% 3/15/2036 465 Par Value	507	473	
Total Government Obligations		<u>71,006</u>	<u>66,706</u>	
Total Non-Participant Directed Investments		<u>\$ 4,864,730</u>	<u>5,568,194</u>	
Total investments			<u>\$ 17,381,509</u>	

** Cost omitted for participant directed investments.

* Denotes party-in-interest to the Plan.



CARON
BLETZER

Employee Benefit Plan Audit Specialists