

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 10/01/2024 and ending 09/30/2025

- 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... D Check box if filing under: [ ] Form 5558 [ ] automatic extension... E If this is a retroactively adopted plan...

Part II Basic Plan Information—enter all requested information

1a Name of plan: FRANK LUMBER CO., INC. RETIREMENT AND SAVINGS PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 10/01/1959
2a Plan sponsor's name (employer, if for a single-employer plan): FRANK LUMBER CO., INC.
2b Employer Identification Number (EIN): 20-5610768
2c Plan Sponsor's telephone number: 503-897-2371
2d Business code (see instructions): 321110

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, Date, and Name. Rows include plan administrator, employer/plan sponsor, and DFE.

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

Form 5500 (2024) v. 240311

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  D. FRANK & J. FRANK ADMINISTRATIVE COMMITTEE  P.O. BOX 79 MILL CITY, OR 97360-0079	<b>3b</b> Administrator's EIN 93-0661665  <b>3c</b> Administrator's telephone number 503-897-2371
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<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
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<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	158
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<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).		
<b>a(1)</b> Total number of active participants at the beginning of the plan year .....	<b>6a(1)</b>	134
<b>a(2)</b> Total number of active participants at the end of the plan year .....	<b>6a(2)</b>	141
<b>b</b> Retired or separated participants receiving benefits.....	<b>6b</b>	0
<b>c</b> Other retired or separated participants entitled to future benefits .....	<b>6c</b>	14
<b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....	<b>6d</b>	155
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....	<b>6e</b>	1
<b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....	<b>6f</b>	156
<b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....	<b>6g(1)</b>	
<b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....	<b>6g(2)</b>	156
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6h</b>	7

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
 2A 2E 2J

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

<b>9a</b> Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<p><b>a Pension Schedules</b></p> <p>(1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> <p>(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____</p> <p>(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)</p>	<p><b>b General Schedules</b></p> <p>(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)</p> <p>(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached _____</p> <p>(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)</p> <p>(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)</p>
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**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

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**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.

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**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 \_\_\_\_\_

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<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning **10/01/2024** and ending **09/30/2025**

<b>A</b> Name of plan <b>FRANK LUMBER CO., INC. RETIREMENT AND SAVINGS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>FRANK LUMBER CO., INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>20-5610768</b>	

**Part I Service Provider Information (see instructions)**

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

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

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

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

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

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

DEBORAH L. PATTEN CPA LLC

PO BOX 926  
SALEM, OR 97308

93-1749780

(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	NONE	8250	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MORGAN STANLEY SMITH BARNEY LLC

1585 BROADWAY  
NEW YORK, NY 10036

26-4310632

(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?
19 27 28	NONE	31529	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

KERNUTT STOKES

1600 EXECUTIVE PKWY 110  
EUGENE, OR 97401

93-0396435

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	18700	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part I Service Provider Information (continued)**

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

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

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

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

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<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> 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)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>10/01/2024</b> and ending <b>09/30/2025</b>	
<b>A</b> Name of plan <b>FRANK LUMBER CO., INC. RETIREMENT AND SAVINGS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>FRANK LUMBER CO., INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>20-5610768</b>

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

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>		
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	529596	569163
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>	4654	6745
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	6752000	4508192
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	654543	446230
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>		55075
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	3245520	4891756
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>		
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>		
<b>(15)</b> Other .....	<b>1c(15)</b>		

<b>1d</b> Employer-related investments:		<b>(a)</b> Beginning of Year	<b>(b)</b> End of Year
(1) Employer securities.....	<b>1d(1)</b>		
(2) Employer real property.....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	11186313	10477161
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>		
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<b>j</b> Other liabilities.....	<b>1j</b>		30
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>		30
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	11186313	10477131

**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.

<b>Income</b>		<b>(a)</b> Amount	<b>(b)</b> Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>	569163	
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>	235789	
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>		
(2) Noncash contributions.....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		804952
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>	148707	
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>	55479	
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>	2500	
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>		
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		206686
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>	89570	
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>		
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		89570
(3) Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>	1731465	
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>	1845544	
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		-114079
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		
<b>(B)</b> Other.....	<b>2b(5)(B)</b>	678188	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		1147
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		1666464

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	2317167	
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other .....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		2317167
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>	8250	
(4) IQPA audit fees .....	<b>2i(4)</b>	18700	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	31529	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>		
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>		
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		58479
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		2375646

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		-709182
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		
(2) From this plan .....	<b>2l(2)</b>		

**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: **KERNUTT STOKES**

(2) EIN: **93-0396435**

**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
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
<b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
<b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
<b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		500000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> 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.			

**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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

## INDEPENDENT AUDITOR'S REPORT

To the Trustee  
Frank Lumber Co., Inc.  
Retirement and Savings Plan:

We have audited the financial statements of Frank Lumber Co., Inc. Retirement and Savings Plan, which comprise the statements of net assets available for benefits as of September 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Frank Lumber Co., Inc. Retirement and Savings Plan as of September 30, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America (GAAP).

### **Basis for Opinion**

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

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 Frank Lumber Co., Inc. Retirement and Savings Plan's ability to continue as a going concern for one year after the date the financial statements are 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 Responsibility for the Audit of the Financial Statements**

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 judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgement and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Frank Lumber Co., Inc. Retirement and Savings 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 Frank Lumber Co., Inc. Retirement and Savings Plan's ability to continue as a going concern for a reasonable period of time.

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 Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information, as identified in the table of contents, is presented for the purpose of additional analysis and is not a required part of the financial statements. 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 has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole.

A handwritten signature in black ink that reads "Kenneth Stokes" followed by a stylized flourish.

Eugene, Oregon  
January 19, 2026

<b>Form 5500</b> Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Annual Return/Report of Employee Benefit Plan</b> 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).  <b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b>	OMB Nos. 1210-0110 1210-0089  <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div>  <b>This Form is Open to Public Inspection</b>
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**Part I Annual Report Identification Information**  
 For calendar plan year 2024 or fiscal plan year beginning **10/01/2024** and ending **09/30/2025**

- A** This return/report is for:  a multiemployer plan  a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- a single-employer plan  a DFE (specify) \_\_\_\_\_
- B** This return/report is:  the first return/report  the final return/report
- an amended return/report  a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here \_\_\_\_\_ ▶  the DFVC program
- D** Check box if filing under:  Form 5558  automatic extension
- special extension (enter description) \_\_\_\_\_
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here \_\_\_\_\_ ▶

**Part II Basic Plan Information**—enter all requested information.

<b>1a</b> Name of plan <b>FRANK LUMBER CO., INC. RETIREMENT AND SAVINGS PLAN</b>	<b>1b</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>2a</b> Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <b>FRANK LUMBER CO., INC.</b>  <b>P.O. BOX 79</b>  <b>MILL CITY OR 97360-0079</b>	<b>1c</b> Effective date of plan <b>10/01/1959</b>  <b>2b</b> Employer Identification Number (EIN) <b>20-5610768</b>  <b>2c</b> Plan Sponsor's telephone number <b>503-897-2371</b>  <b>2d</b> Business code (see instructions) <b>321110</b>

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

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

SIGN HERE	<i>James K. Frank</i>	3-2-26	JAMES FRANK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  <b>D. FRANK &amp; J. FRANK</b> <b>ADMINISTRATIVE COMMITTEE</b>  P.O. BOX 79  MILL CITY OR 97360-0079	<b>3b</b> Administrator's EIN  93-0661665  <b>3c</b> Administrator's telephone number 503-897-2371
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<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
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<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	158
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<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).		
<b>a(1)</b> Total number of active participants at the beginning of the plan year	<b>6a(1)</b>	134
<b>a(2)</b> Total number of active participants at the end of the plan year	<b>6a(2)</b>	141
<b>b</b> Retired or separated participants receiving benefits	<b>6b</b>	0
<b>c</b> Other retired or separated participants entitled to future benefits	<b>6c</b>	14
<b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .	<b>6d</b>	155
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	<b>6e</b>	1
<b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .	<b>6f</b>	156
<b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	<b>6g(1)</b>	
<b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	<b>6g(2)</b>	156
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<b>6h</b>	7

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2A    2E    2J

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

<b>9a</b> Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**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 \_\_\_\_\_

(4)  **C** (Service Provider Information)

(5)  **D** (DFE/Participating Plan Information)

(6)  **G** (Financial Transaction Schedules)

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
Employer Identification Number: 20-5610768  
Plan Number: 001  
Form 5500, Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)  
September 30, 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	Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
<b>REGISTERED INVESTMENT COMPANIES</b>				
Invesco Premier U.S. Government Money Portfolio	Registered Investment Company		\$ 998,450	\$ 998,450
<b>COMMON STOCKS:</b>				
Abbvie Inc	Common Stock		202,488	277,848
Amazon Inc	Common Stock		214,089	263,484
Microsoft Corp	Common Stock		209,848	258,975
Apple Inc	Common Stock		186,632	254,630
Home Depot Inc	Common Stock		211,022	243,114
Walmart Inc	Common Stock		155,852	226,732
Nvidia Corp	Common Stock		136,226	223,896
Alphabet Inc	Common Stock		154,205	218,790
Cummins Inc	Common Stock		179,561	211,185
JPMorgan Chase & Co	Common Stock		126,169	205,029
Chevron Corp	Common Stock		200,761	194,112
Blackrock Inc	Common Stock		116,896	174,880
US Bankcorp Com New	Common Stock		160,207	169,155
Verizon Comms	Common Stock		139,060	153,825
Northrop Grumman CP	Common Stock		116,031	152,330
McDonalds Corp	Common Stock		141,903	151,945
Nextera Energy Inc	Common Stock		140,521	150,980
Exxon Mobil Corp	Common Stock		152,438	146,575
Delta Airlines Inc New	Common Stock		107,094	141,875
Visa Inc CL A	Common Stock		115,316	136,552
Firstenergy Corp	Common Stock		100,056	109,968
Genl Dynamics Corp	Common Stock		90,738	102,300
M&T Bank Corp	Common Stock		93,958	98,810
T-Mobile US Inc Com	Common Stock		65,484	95,752
Johnson & Johnson	Common Stock		75,801	92,710
Honeywell Intl Inc	Common Stock		78,734	84,200
Bank of America Corp	Common Stock		56,720	77,385
Cisco Sys Inc	Common Stock		47,803	68,420
Merck & Co Inc New Com	Common Stock		65,312	67,144
Eli Lilly & Co	Common Stock		55,319	57,225
Freeport-Mcmoran CL-B	Common Stock		50,644	47,064
Nike Inc B	Common Stock		42,338	34,866
<b>U.S. GOVERNMENT AGENCY SECURITIES:</b>				
Federal Farm Credit Bank	U.S. Government Agency		250,000	249,227
Small Business Administration	U.S. Government Agency		14,457	102,235
Government National Mortgage Association	U.S. Government Agency		6,106	50,817
Government National Mortgage Association	U.S. Government Agency		11,047	14,457
Small Business Administration	U.S. Government Agency		51,989	12,329
Government National Mortgage Association	U.S. Government Agency		12,540	11,051
Government National Mortgage Association	U.S. Government Agency		104,398	6,114
<b>CORPORATE BONDS:</b>				
Ford Motor Co 6%	Corporate Bond		58,313	55,075

\* A party-in-interest as defined by ERISA

See independent auditor's report.

FRANK LUMBER CO., INC.  
 RETIREMENT AND SAVINGS PLAN  
 Employer Identification Number: 20-5610768  
 Plan Number: 001  
 Form 5500, Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions  
 For the Year Ended September 30, 2025

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
<b>Aggregate Transactions Exceeding 5%</b>						
U.S. Treasury Note	1,000,000 Purchased and Sold	\$ 1,004,846	\$ 1,000,000	\$ 1,004,846	\$ 1,000,000	\$ (4,846)

See independent auditor's report.

**FRANK LUMBER CO., INC.  
RETIREMENT AND SAVINGS PLAN**

Independent Auditor's Report  
Financial Statements and  
Supplemental Information

September 30, 2025 and 2024

KERNUTTSTOKES

**FRANK LUMBER CO., INC.  
RETIREMENT AND SAVINGS PLAN**

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## INDEPENDENT AUDITOR'S REPORT

To the Trustee  
Frank Lumber Co., Inc.  
Retirement and Savings Plan:

We have audited the financial statements of Frank Lumber Co., Inc. Retirement and Savings Plan, which comprise the statements of net assets available for benefits as of September 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Frank Lumber Co., Inc. Retirement and Savings Plan as of September 30, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America (GAAP).

**Basis for Opinion**

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

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 Frank Lumber Co., Inc. Retirement and Savings Plan's ability to continue as a going concern for one year after the date the financial statements are 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 Responsibility for the Audit of the Financial Statements**

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 judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgement and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Frank Lumber Co., Inc. Retirement and Savings 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 Frank Lumber Co., Inc. Retirement and Savings Plan's ability to continue as a going concern for a reasonable period of time.

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 Information**

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information, as identified in the table of contents, is presented for the purpose of additional analysis and is not a required part of the financial statements. 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 has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole.

A handwritten signature in black ink that reads "Kenneth Stokes" followed by a stylized flourish.

Eugene, Oregon  
January 19, 2026

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Employer Identification Number: 20-5610768**  
**Plan Number: 001**  
**Statements of Net Assets Available for Benefits**

	<b>September 30</b>	
	<b>2025</b>	<b>2024</b>
<b>ASSETS</b>		
CASH	\$ 3,509,742	\$ 6,100,986
INVESTMENTS, at fair value:		
Common stocks	4,891,756	3,245,520
Registered investment companies	998,450	651,014
U.S. government agency securities	446,230	654,543
Corporate bonds	55,075	-
Total investments, at fair value	6,391,511	4,551,077
RECEIVABLES:		
Employer contribution	569,163	529,596
Interest	6,745	4,654
Total receivables	575,908	534,250
Total assets	10,477,161	11,186,313
<b>LIABILITIES</b>		
OTHER	30	-
Total liabilities	30	-
<b>NET ASSETS AVAILABLE FOR BENEFITS</b>	<b>\$ 10,477,131</b>	<b>\$ 11,186,313</b>

See accompanying notes.

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Employer Identification Number: 20-5610768**  
**Plan Number: 001**  
**Statements of Changes in Net Assets Available for Benefits**

	<b>Year Ended September 30</b>	
	<b>2025</b>	<b>2024</b>
<b>INVESTMENT INCOME:</b>		
Interest and dividends	\$ 296,256	\$ 386,746
Net appreciation in fair value of investments	564,109	395,230
Other income	1,146	452
Total investment income	861,511	782,428
Investment expenses	(31,529)	(19,583)
Net investment income	829,982	762,845
<b>CONTRIBUTIONS:</b>		
Employer	569,163	529,596
Participant	235,789	243,660
Total contributions	804,952	773,256
<b>EXPENSES:</b>		
Benefits paid to participants	2,317,167	1,062,459
Administrative fees	26,949	23,900
Total expenses	2,344,116	1,086,359
CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	(709,182)	449,742
<b>NET ASSETS AVAILABLE FOR BENEFITS:</b>		
Beginning of year	11,186,313	10,736,571
End of year	\$ 10,477,131	\$ 11,186,313

See accompanying notes.

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

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**1. Description of the Plan**

The following description of the Frank Lumber Co., Inc. Retirement and Savings Plan (the Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

*General.* Established by Frank Lumber Co., Inc. (the Company) on October 1, 1959, and restated on October 1, 2021, the Plan is a tax qualified defined contribution plan formed for the benefit of all eligible employees of the Company. The Plan includes a salary deferral arrangement commonly called a 401(k) plan. Under such provisions, employees are able to make elective deferral contributions to the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Generally, all full-time, non-union employees of the Company are eligible to participate in the Plan on the entry date following fulfillment of the service requirement of one year of service with the Company. Entry dates are the first day of any calendar month. For eligibility purposes, a year of service is defined as a 12-month period in which the employee completes at least 1,000 hours of service.

*Contributions.* Eligible employees may make 401(k) elective deferral contributions in a Traditional (pre-tax) form to the Plan. Total participant elective deferral contributions are limited by various Internal Revenue Code (IRC) Provisions. Participants over 50 years of age may make additional annual "catch-up" contributions as allowed by the IRC. The Plan also provides that refunds may be made to certain participants in order to comply with those statutory limits.

Traditional participant elective deferral contributions represent amounts by which an eligible employee has elected a reduction in taxable compensation in consideration of the Company contributing such amounts to the Plan. Such contributions are excluded from the participant's taxable income until received as a distribution from the Plan.

A participant will be eligible to commence elective deferrals on the first entry date coincident with or following the satisfaction of the eligibility requirements. After initial participation, a participant may commence, recommence, or change the amount of the deferral by giving notice to the employer at any time. A participant can also elect to cease the deferral at any time.

The Plan provides for discretionary profit-sharing contributions which are made at the option of the board of directors. These contributions are allocated to participants based on the number of allocation units attributable to the participant, divided by the total number of allocation units attributable to all participants. A participant receives one allocation unit for each \$100 of compensation earned plus two allocation units for each year of service. A participant must work a minimum of 1,000 hours and be employed on the last day of the plan year in order to receive a discretionary profit-sharing contribution. During 2025 and 2024, the board of directors authorized profit sharing contributions of \$569,163 and \$529,596, respectively. The contributions funded by the Company are equal to the contributions allocated to plan participants.

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**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

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**1. Description of the Plan (Continued)**

*Participant Accounts.* Individual accounts are maintained for each plan participant. These accounts are credited with the allocated elective deferral, rollover, and employer contributions, as well as investment income. The accounts are charged for investment losses, plan expenses, and benefits paid to plan participants. Income and loss are allocated to a participant's account based on the participant's account balance at the beginning of the year for employer contribution accounts and rollover accounts. Income is allocated to elective deferral accounts based on beginning balance plus one half of the participant's elective deferral contributions for the year.

*Investment Options.* Contributions to the Plan are deposited into one trust fund. Under the direction of the Plan's trustees, receipts of the trust are invested in a diversified mix of investment securities.

*Vesting.* Participants are always fully vested in their elective deferral and rollover accounts. Vesting in employer profit sharing contribution accounts is based upon years of service. A participant has no vested interest in his or her employer profit sharing accounts prior to accumulating two years of service. A participant will be 20% vested after two years of service, 40% vested after 3 years of service, 60% vested after 4 years of service, 80% vested after 5 years of service, and 100% vested after 6 years of service. A participant earns a year of service during any plan year in which the participant is credited with 1,000 hours of service. If termination is due to death, disability, or retirement at or beyond age 59 1/2, a participant is considered to be 100% vested even if the participant has not been credited with six years of vesting service.

*Payment of Benefits.* On termination of service, a participant or beneficiary may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump-sum amount or in an annuity as elected by the participant or beneficiary. The Plan allows in-service distributions of account balances attributed to certain types of contributions after attaining age 59 1/2. The Plan allows for limited in-service distributions if a participant suffers a hardship, as defined in the plan document.

*Forfeitures.* When certain terminations of a participant in the Plan occur, the nonvested portion of the participant's account represents a forfeiture. However, if the participant is re-employed and fulfills certain requirements, as defined in the Plan, the participant's account may be reinstated. Forfeitures are allocated in the same manner as the employer contribution. In 2025 and 2024, forfeited nonvested accounts totaling \$24,165 and \$10,267, respectively, were allocated in addition to employer contributions. At September 30, 2025 and 2024, forfeitures held by the Plan amounted to \$2,956 and \$0, respectively.

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**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

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**2. Summary of Significant Accounting Policies**

*Basis of Reporting.* The accompanying financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP). These principles require management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts in the statements of changes in net assets available for benefits during the reporting period. Actual results could differ from those estimates.

*Investment Valuation.* Investments are valued at fair value. GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. GAAP also establishes a framework for measuring fair value.

The fair value framework requires the categorization of assets and liabilities into three levels based upon the ability to observe the inputs used to value the assets and liabilities. The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. Level One provides the most reliable and observable measure of fair value, whereas Level Three generally requires significant judgment.

The three levels of the fair value hierarchy are defined as follows:

- Level One - Unadjusted, quoted prices in active markets for identical assets and liabilities.
- Level Two - Observable inputs, other than those included in Level One. For example, quoted prices for similar assets or liabilities in active markets or quoted prices for identical assets or liabilities in inactive markets.
- Level Three - Unobservable inputs reflecting assumptions about the inputs used in pricing the asset or liability.

Purchase and sales of securities are recorded on a trade-date basis. The cost of investments sold for the purpose of computing gains and losses is based on average cost. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. The Plan presents in the statements of changes in net assets available for benefits, the net appreciation or depreciation in the fair value of the Plan's investments, which consists of the realized gains or losses and the unrealized appreciation or depreciation of those investments.

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**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

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**2. Summary of Significant Accounting Policies (Continued)**

*Risks and Uncertainties.* The Plan may invest in various types of investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near-term and that such changes could materially affect the participants' account balances and amounts reported in the financial statements.

*Payment of Benefits.* Benefits are recorded when paid. There were no amounts allocated to persons who had elected to withdraw from the Plan but had not yet been paid as of September 30, 2025 and 2024.

*Subsequent Events.* The Plan evaluates subsequent events and the evidence they provide about conditions existing at the date of the statements of net assets available for benefits as well as conditions that arose after the statements of net assets available for benefits date but before the financial statements are issued. The effects of conditions that existed at the date of the statements of net assets available for benefits are recognized in the financial statements. Events and conditions arising after the statements of net assets available for benefits date but before the financial statements are issued are evaluated to determine if disclosure is required to keep the financial statements from being misleading. To the extent such events and conditions exist, disclosures are made regarding the nature of events and the estimated financial effects for those events and conditions. For purposes of preparing the accompanying financial statements and the following notes to these financial statements, the Plan evaluated subsequent events through January 19, 2026, the date the financial statements were available to be issued.

**3. Fair Value Measurement**

The following is a description of the valuation methodologies used for assets measured at fair value:

- The fair value of common stocks and registered investment companies is based on quoted market prices.
- The fair value of corporate bonds and U.S. government agency securities, consisting of fixed-income instruments issued by federal agencies, is based on factors which include but are not limited to market quotations, yields, maturities and the bond's terms and conditions.

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

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**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

**3. Fair Value Measurement (Continued)**

The following presents a summary of the Plan's investments measured at fair value:

	<b>Fair Value Measurement</b>		
	<b>September 30, 2025</b>		
	<b>Total</b>	<b>Quoted Prices in Active Markets for Identical Assets (Level 1)</b>	<b>Significant Other Observable Inputs (Level 2)</b>
Common stocks	\$ 4,891,756	\$ 4,891,756	\$ -
Registered investment companies	998,450	998,450	-
U.S. government agency securities	446,230	-	446,230
Corporate bonds	55,075	-	55,075
<b>Total</b>	<b>\$ 6,391,511</b>	<b>\$ 5,890,206</b>	<b>\$ 501,305</b>

	<b>Fair Value Measurement</b>		
	<b>September 30, 2024</b>		
	<b>Total</b>	<b>Quoted Prices in Active Markets for Identical Assets (Level 1)</b>	<b>Significant Other Observable Inputs (Level 2)</b>
Common stocks	\$ 3,245,520	\$ 3,245,520	\$ -
Registered investment companies	651,014	651,014	-
U.S. government agency securities	654,543	-	654,543
<b>Total</b>	<b>\$ 4,551,077</b>	<b>\$ 3,896,534</b>	<b>\$ 654,543</b>

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
**Notes to Financial Statements**

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**4. Income Tax Status**

The Plan utilizes a pre-approved plan document and relies on the opinion letter issued to the pre-approved document sponsor. The pre-approved document sponsor received an opinion letter dated June 30, 2020, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. The Plan is operating under provisions, required by new laws, but has not yet been amended to reflect these changes. The Plan will be formally amended to incorporate these provisions prior to the deadline required by law for adopting such amendments. The plan administrator believes that the Plan is currently being operated in compliance with the applicable requirements of the IRC and therefore, the Plan qualifies under Section 401(a) and the related trust is tax exempt as of September 30, 2025 and 2024. Therefore, no provision for income taxes has been included in the Plan's financial statements.

**5. Related-Party Transactions and Transactions with Parties-in-Interest**

The plan investments are managed by Morgan Stanley. Morgan Stanley is the custodian for the plan. Morgan Stanley is paid for these services by the plan sponsor. Total fees paid directly by the Plan under this contract amounted to \$31,529 and \$19,583 for the years ended September 30, 2025 and 2024, respectively.

The Company makes contributions to the plan. These related-party and party-in-interest transactions are exempt from the prohibited transaction rules under ERISA.

**6. Plan Termination**

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

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**SUPPLEMENTAL INFORMATION**

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**FRANK LUMBER CO., INC.**

**RETIREMENT AND SAVINGS PLAN**

Employer Identification Number: 20-5610768

Plan Number: 001

Form 5500, Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)

September 30, 2025

(a)	(b)	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
<b>REGISTERED INVESTMENT COMPANIES</b>				
	Invesco Premier U.S. Government Money Portfolio	Registered Investment Company	\$ 998,450	\$ 998,450
<b>COMMON STOCKS:</b>				
	Abbvie Inc	Common Stock	202,488	277,848
	Amazon Inc	Common Stock	214,089	263,484
	Microsoft Corp	Common Stock	209,848	258,975
	Apple Inc	Common Stock	186,632	254,630
	Home Depot Inc	Common Stock	211,022	243,114
	Walmart Inc	Common Stock	155,852	226,732
	Nvidia Corp	Common Stock	136,226	223,896
	Alphabet Inc	Common Stock	154,205	218,790
	Cummins Inc	Common Stock	179,561	211,185
	JPMorgan Chase & Co	Common Stock	126,169	205,029
	Chevron Corp	Common Stock	200,761	194,112
	Blackrock Inc	Common Stock	116,896	174,880
	US Bankcorp Com New	Common Stock	160,207	169,155
	Verizon Comms	Common Stock	139,060	153,825
	Northrop Grumman CP	Common Stock	116,031	152,330
	McDonalds Corp	Common Stock	141,903	151,945
	Nextera Energy Inc	Common Stock	140,521	150,980
	Exxon Mobil Corp	Common Stock	152,438	146,575
	Delta Airlines Inc New	Common Stock	107,094	141,875
	Visa Inc CL A	Common Stock	115,316	136,552
	Firstenergy Corp	Common Stock	100,056	109,968
	Genl Dynamics Corp	Common Stock	90,738	102,300
	M&T Bank Corp	Common Stock	93,958	98,810
	T-Mobile US Inc Com	Common Stock	65,484	95,752
	Johnson & Johnson	Common Stock	75,801	92,710
	Honeywell Intl Inc	Common Stock	78,734	84,200
	Bank of America Corp	Common Stock	56,720	77,385
	Cisco Sys Inc	Common Stock	47,803	68,420
	Merck & Co Inc New Com	Common Stock	65,312	67,144
	Eli Lilly & Co	Common Stock	55,319	57,225
	Freeport-Mcmoran CL-B	Common Stock	50,644	47,064
	Nike Inc B	Common Stock	42,338	34,866
<b>U.S. GOVERNMENT AGENCY SECURITIES:</b>				
	Federal Farm Credit Bank	U.S. Government Agency	250,000	249,227
	Small Business Administration	U.S. Government Agency	14,457	102,235
	Government National Mortgage Association	U.S. Government Agency	6,106	50,817
	Government National Mortgage Association	U.S. Government Agency	11,047	14,457
	Small Business Administration	U.S. Government Agency	51,989	12,329
	Government National Mortgage Association	U.S. Government Agency	12,540	11,051
	Government National Mortgage Association	U.S. Government Agency	104,398	6,114
<b>CORPORATE BONDS:</b>				
	Ford Motor Co 6%	Corporate Bond	58,313	55,075

\* A party-in-interest as defined by ERISA

See independent auditor's report.

**FRANK LUMBER CO., INC.**  
**RETIREMENT AND SAVINGS PLAN**  
 Employer Identification Number: 20-5610768  
 Plan Number: 001  
 Form 5500, Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions  
 For the Year Ended September 30, 2025

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Cost of Asset	(h) Current Value of Asset on Transaction Date	(f) Net Gain or (Loss)
<b>Aggregate Transactions Exceeding 5%</b>						
U.S. Treasury Note	1,000,000 Purchased and Sold	\$ 1,004,846	\$ 1,000,000	\$ 1,004,846	\$ 1,000,000	\$ (4,846)

See independent auditor's report.