FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction 1	0.																	
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol UFP INDUSTRIES INC [ UFPI ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
MISSAD MATTHEW J					OFF INDOSTRIES INC [ OFFI ]								☑ Director 10% Owner						
(Last) (First) (Middle)			3. [	Date of Earliest Transaction (Month/Day/Year)								Officer (give title below)				Other ( below)	Other (specify below)		
2801 EAST BELTLINE, N.E.				09/13/2024								Chief Executive Officer							
				╙															
(Street)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
GRAND RAPIDS MI 49525												Form filed by One Reporting Person							
														Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)																
		Table	I - Non-Deriv	ative	Secu	rities A	cqu	uired,	Disp	osed o	f, or	Benefic	cially	Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	ate Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following		6. Owners Form: Dire (D) or Indirect (I)	ect Indired Benefi Owner	7. Nature of Indirect Beneficial Ownership (Instr.			
						Cod	Code V		Amount (A) or (D) Price		Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	4)	4)		
Common Stock		09/13/202	.4			G	+	4	,496	D	(2)	329,450		D					
Common Stock												8,266(1)		I By P/S		S Plan			
																	Defe		
Common Stock										51,405(1)		1)	I		Compensation Interest				
Common Stock		$\dashv$					+				3,454(1)		)	I By LL					
		Tol	ole II - Derivat	i	Sa a curid	tion An			ione		a D	onofiei					1-7-		
		Idi	e.g., p											wile	u				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)			Transaction of Code (Instr. Derivative		Expiration (Month/Dates and ed		on Dat			7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		8. Price of Derivative Security (Instr. 5)		umber of vative urities eficially led bwing orted saction(s) r. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	e V	(A) (E		Date Exercisa		Expiration Date	Title	Amoun or Numbe of Shares							

## **Explanation of Responses:**

- 1. Includes shares acquired through dividend reinvestment plan.
- 2. Shares were gifted

## Remarks:

Katherine L. Karel; Attorneyin-Fact for Matthew J. Missad

09/17/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.