

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2018 This Form is Open to Public Inspection
---	---	--

Part I	Annual Report Identification Information
For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>INTERDESIGN, INC. PROFIT SHARING PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>03/29/1977</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>03/29/1977</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>03/29/1977</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>INTERDESIGN, INC.</u> <u>30725 SOLON INDUSTRIAL PARKWAY</u> <u>SOLON, OH 44139</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>34-1145527</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>440-248-0178</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>339900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-1145527</u>	2c Plan Sponsor's telephone number <u>440-248-0178</u>	2d Business code (see instructions) <u>339900</u>	
2b Employer Identification Number (EIN) <u>34-1145527</u>					
2c Plan Sponsor's telephone number <u>440-248-0178</u>					
2d Business code (see instructions) <u>339900</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2019	JULIE SMITH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2019	JULIE SMITH
	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 (2018)
v. 171027

3a Plan administrator's name and address ☒ 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	424
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		6a(1)	330
a(2) Total number of active participants at the end of the plan year		6a(2)	371
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	65
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	436
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	436
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	429
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	17
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: 3D 2E 2J 2F 2H 2T			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
---	---	---

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018	
A Name of plan INTERDESIGN, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERDESIGN, INC.	D Employer Identification Number (EIN) 34-1145527

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	YH5101	436	01/01/2018	12/31/2018

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 0
--	---

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	6070376
5 Current value of plan's interest under this contract in separate accounts at year end	5	22066274

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier.....	6b	
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP PENSION FUNDING

b Balance at the end of the previous year.....	7b	7106761
---	-----------	---------

c Additions: (1) Contributions deposited during the year	7c(1)	141093
	7c(2)	
	7c(3)	89603
	7c(4)	
	7c(5)	

(6) Total additions.....	7c(6)	230696
--------------------------	--------------	--------

d Total of balance and additions (add lines 7b and 7c(6))	7d	7337457
---	-----------	---------

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	858340
(2) Administration charge made by carrier	7e(2)	494
(3) Transferred to separate account.....	7e(3)	136247
(4) Other (specify below)	7e(4)	90966

▶ *

(5) Total deductions.....	7e(5)	1086047
---------------------------	--------------	---------

f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	6251410
---	-----------	---------

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2018
		This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan INTERDESIGN, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERDESIGN, INC.	D Employer Identification Number (EIN) 34-1145527	

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
VOYA RETIREMENT INSURANCE & ANNUITY
71-0294708

(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

(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

(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)

VOYA RETIREMENT INSURANCE & ANNUITY

71-0294708

(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?
26 64	SERVICE PROVIDER	6169	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

LINCOLN FINANCIAL ADVISORS CORPORAT

35-1151034

(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?
99	BROKER/DEALER	0	Yes ☒ No ☐	Yes ☐ No ☒	60881	Yes ☐ No ☒

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

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

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
LINCOLN FINANCIAL ADVISORS CORPORAT	99	60881
(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.	
VOYA RETIREMENT INSURANCE AND ANNUI 71-0294708	OTHER FEES	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		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.		OMB No. 1210-0110 2018 This Form is Open to Public Inspection.	
For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018					
A Name of plan INTERDESIGN, INC. PROFIT SHARING PLAN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 INTERDESIGN, INC.				D Employer Identification Number (EIN) 34-1145527	
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: VARIABLE ANNUITY ACCOUNT D					
b Name of sponsor of entity listed in (a): VOYA RETIREMENT INSURANCE & ANNUITY CO					
c EIN-PN 71-0294708-000		d Entity code P		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22066274	
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)	
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	

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)

(Complete as many entries as needed to report all participating plans)

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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan INTERDESIGN, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERDESIGN, INC.	D Employer Identification Number (EIN) 34-1145527	

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.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(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)	23362127	22066274
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	7106761	6251410
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities	1d(1)	
(2)	Employer real property	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	30468888 28317684
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	30468888 28317684

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	1642081
	(B) Participants	2a(1)(B)	1104573
	(C) Others (including rollovers)	2a(1)(C)	19764
(2)	Noncash contributions	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	2766418
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)	89603
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	89603
(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)	
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	0
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-1111905
(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)		
c Other income.....	2c		93
d Total income. Add all income amounts in column (b) and enter total	2d		1744209

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3889225	
(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)		3889225
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other	2i(4)	6188	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		6188
j Total expenses. Add all expense amounts in column (b) and enter total	2j		3895413

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-2151204
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) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

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

(1) Name: RSM US LLP

(2) EIN: 42-0714325

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

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

Part IV Compliance Questions

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

During the plan year:

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

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.)

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection.
---	---	--

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan <u>INTERDESIGN, INC. PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INTERDESIGN, INC.</u>	D Employer Identification Number (EIN) <u>34-1145527</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>71-0294708</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

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

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2018
v. 171027

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**16b**

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

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

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

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

- a** Enter the percentage of plan assets held as:

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

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

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

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

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

InterDesign, Inc. Profit Sharing Plan

Modified Cash Basis Financial Report
December 31, 2018

Contents

Independent Auditor's Report	1-2
Financial Statements	
Statements of Net Assets Available for Benefits (Modified Cash Basis)	3
Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis)	4
Notes to Financial Statements (Modified Cash Basis)	5-12
Supplemental Schedule	
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) (Modified Cash Basis)	13

Independent Auditor's Report

Plan Administrator
InterDesign, Inc. Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of InterDesign, Inc. Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits on a modified cash basis as of December 31, 2018 and 2017, the related statements of changes in net assets available for benefits on a modified cash basis for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note 2; this includes determining that the modified cash basis of accounting is an acceptable basis for the presentation of the financial statements in the circumstances. Management is also responsible 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by Voya Institutional Trust Company, the trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee as of December 31, 2018 and 2017, and for the years then ended, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Independent Auditor's Report (Continued)

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements and supplemental schedule are prepared on a modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America.

Other Matter – Supplemental Schedule

The supplemental schedule of assets (held at end of year) as of December 31, 2018, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes of additional analysis and is not a required part of the financial statements. The supplemental schedule is the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified or provided by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

RSM US LLP

Cleveland, Ohio
October 10, 2019

InterDesign, Inc. Profit Sharing Plan

**Statements of Net Assets Available for Benefits
(Modified Cash Basis)**

December 31, 2018 and 2017

	2018	2017
Assets		
Investments, at fair value:		
Pooled separate accounts	\$ 22,066,274	\$ 23,362,127
Investment, at contract value:		
Guaranteed investment contract	6,251,410	7,106,761
Net assets available for benefits	<u>\$ 28,317,684</u>	<u>\$ 30,468,888</u>

See notes to financial statements.

InterDesign, Inc. Profit Sharing Plan

Statements of Changes in Net Assets Available for Benefits

(Modified Cash Basis)

Years Ended December 31, 2018 and 2017

	2018	2017
Additions:		
Investment (loss) income:		
Net (depreciation) appreciation in fair value of investments	\$ (1,111,905)	\$ 3,751,656
Interest and dividends	89,603	121,558
Total investment (loss) income	(1,022,302)	3,873,214
Contributions:		
Employer	1,642,174	1,483,206
Participant	1,104,573	961,757
Rollovers	19,764	75,454
Total contributions	2,766,511	2,520,417
Total additions	1,744,209	6,393,631
Deductions:		
Benefits paid to participants	3,889,225	3,158,727
Administrative expenses	6,188	2,500
Total deductions	3,895,413	3,161,227
Net (decrease) increase	(2,151,204)	3,232,404
Net assets available for benefits:		
Beginning	30,468,888	27,236,484
Ending	\$ 28,317,684	\$ 30,468,888

See notes to financial statements.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 1. Description of Plan

The following description of the InterDesign, Inc. Profit Sharing Plan provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General: The Plan is sponsored and administered by InterDesign, Inc. (the Company) and is governed by the plan agreement. The Plan is subject to provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

The Plan is a defined contribution plan covering all regular full-time, non-union, U.S. employees of the Company. To be eligible to participate in the 401(k) contribution, employer safe harbor contributions and employer discretionary profit sharing contribution portion of the Plan, participants must be twenty-one or older and have completed 90 days of service with the Company. One year of service is defined as having completed 1,000 hours within a twelve-month period.

Contributions: Each year, participants may contribute up to the maximum percentage of pretax annual compensation, as defined by the Plan and as allowable under the Internal Revenue Code (IRC). Participants direct the investment of their contributions into various investment options offered by the Plan. Participants who attained age 50 before the end of the Plan year were eligible to contribute additional catch-up contributions, as allowable under the IRC. Participants may also contribute amounts representing distributions from other qualified plans. In addition, the Company contributes a non-elective safe harbor contribution of 3% of participants' eligible compensation to the account of each eligible participant. The Company also offers an additional profit sharing contribution that may be contributed at the discretion of the Company's board of directors. For the years ended December 31, 2018 and 2017, profit sharing contributions totaled approximately \$1,048,000 and \$1,032,000, respectively. Prior to January 1, 2018, the discretionary profit sharing contribution was invested in a portfolio of investments directed by the Company (non-participant directed). Effective January 1, 2018, participants may direct the investments of the discretionary profit sharing contribution.

Funding policy: The Company's funding policy for the safe harbor contribution is to make the contributions concurrently with the employee's portion of the 401(k) contributions to the Plan. The profit sharing contributions are made to the Plan on an annual basis based on management's discretion.

Participants' accounts: Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contribution, including any additional profit sharing contribution and (b) Plan earnings and is charged with an allocation of administrative expenses, if any, are paid by the Plan. Allocations are based on participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 1. Description of Plan (Continued)

Vesting: Participants immediately vest in their contributions as well as the Company's safe harbor non-elective contributions, plus actual earnings thereon. Vesting in the Company's profit sharing contribution is based on years of service without incurring a break in service as defined in the plan agreement in accordance with the following schedule:

<u>Years of Service</u>	<u>Vesting</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years	100%

Payment of benefits: Participants are entitled to receive a lump-sum amount equal to the value of their vested account balance upon termination or separation of service.

Forfeited accounts: Forfeitures of non-vested Company contributions are used to reduce employer contributions. Forfeitures of approximately \$93,000 and \$59,000 for the years ended December 31, 2018 and 2017, respectively, were used to reduce employer contributions. As of December 31, 2018 and 2017 there were approximately \$19,000 and \$55,000, respectively, of forfeited non-vested accounts.

Plan termination: Although it has not expressed any intent to do so, the Company reserves the right to terminate the Plan at any time, subject to Plan provisions. In the event of termination of the Plan, participants will become 100% vested in their accounts.

Note 2. Significant Accounting Policies

Basis of accounting: The Plan's records are kept on the modified cash basis, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Under the modified cash basis of accounting, income is recognized when cash is received, benefits are recognized when paid and investments are recorded at fair value, except the guaranteed insurance contract, which is recorded at contract value due to it being fully benefit responsive.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Administrative expenses: The Plan provides that administrative expenses of the Plan are to be paid by the Plan or by the Company, at the Company's discretion.

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 at the measurement date. See Note 4 for discussion of fair value measurements. Purchases and sale of securities are recorded on a trade-date basis. Net (depreciation) appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 2. Significant Accounting Policies (Continued)

Use of estimates: The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits. Actual results could differ from those estimates.

Benefit payments: Benefits are recorded when paid.

Risks and uncertainties: The Plan holds various 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 participants' account balances and the amounts reported in the statements of net assets available for benefits. Four pooled separate accounts comprise approximately 48% and 42% of the Plan's total investments at December 31, 2018 and 2017, respectively. In addition, the Plan's guaranteed investment contract accounts for approximately 22% and 23% of the Plan's total investments at December 31, 2018 and 2017, respectively.

Recently issued accounting pronouncement: In August 2018, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to the Disclosure Requirements for Fair Value Measurement*, which modifies the disclosure requirements for fair value measurements by removing, modifying, and adding certain disclosures. ASU 2018-13 is effective for the Plan for fiscal years beginning after December 31, 2019. The Plan is permitted to early adopt any removed or modified disclosures and delay adoption of the additional disclosures until their effective date. The Plan is currently evaluating the impact of this new standard on its financial statements.

Subsequent events: The Plan has evaluated subsequent events for potential recognition and/or disclosure through October 10, 2019, the date the financial statements were available to be issued.

Note 3. Information Certified and Provided by Voya Institutional Trust Company

The following is a summary of the Plan's asset information as of December 31, 2018 and 2017, and for the years then ended, included throughout the Plan's financial statements and supplemental schedule that were prepared by or derived from information provided by the trustee and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following assets.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 3. Information Certified and Provided by Voya Institutional Trust Company (Continued)

	2018	2017
Participant directed:		
Pooled separate accounts	\$ 22,066,274	\$ 13,448,254
Non-participant directed:		
Pooled separate accounts	-	9,913,873
	<u>\$ 22,066,274</u>	<u>\$ 23,362,127</u>
Guaranteed investment contract:		
Participant directed:		
Voya Fixed Account	\$ 6,251,410	\$ 1,187,314
Non-participant directed:		
Voya Fixed Account	-	5,919,447
	<u>\$ 6,251,410</u>	<u>\$ 7,106,761</u>

The trustee also certified to the completeness and accuracy of net (depreciation) appreciation in the fair value of the investments of \$1,111,905 and \$3,751,656 and interest and dividends of \$89,603 and \$121,558 related to the aforementioned investments for the years ended December 31, 2018 and 2017, respectively.

Note 4. Fair Value Measurements

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

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 assets 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.

An 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. At December 31, 2018 and 2017, there were no assets or liabilities measured within the fair value hierarchy.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 4. Fair Value Measurements (Continued)

The following tables summarize investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2018 and 2017. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

Investment	2018			
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Pooled separate accounts				
Large-cap US equity ⁽¹⁾	\$ 13,738,577	None	Daily	None
Mid-cap US equity ⁽²⁾	1,733,584	None	Daily	None
Small-cap US equity ⁽³⁾	1,478,798	None	Daily	None
International equity ⁽⁴⁾	1,797,066	None	Daily	None
Fixed income ⁽⁵⁾	1,498,886	None	Daily	None
Balanced/asset allocation ⁽⁶⁾	1,819,363	None	Daily	None
	<u>\$ 22,066,274</u>			

Investment	2017			
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Pooled separate accounts				
Large-cap US equity ⁽¹⁾	\$ 14,147,891	None	Daily	None
Mid-cap US equity ⁽²⁾	1,989,167	None	Daily	None
Small-cap US equity ⁽³⁾	1,750,264	None	Daily	None
International equity ⁽⁴⁾	2,265,845	None	Daily	None
Fixed income ⁽⁵⁾	1,863,112	None	Daily	None
Balanced/asset allocation ⁽⁶⁾	1,345,848	None	Daily	None
	<u>\$ 23,362,127</u>			

(1) This category includes investments whose objective is to either seek substantial dividend income as well as long-term growth of capital or provide an investment return matching the return of the S&P 500 index. Typically these funds invest primarily in stocks of companies similar in size to those in the S&P 500 index.

(2) This category's investment objective is to seek long-term capital appreciation. The funds may invest in domestic equity securities with growth potential and/or companies within the range of the market capitalization of the Russell Midcap Value index.

(3) Investments in this category seek capital appreciation by investing in either growth or value stocks issued by companies with small-sized market capitalization believed to be undervalued in the marketplace or possess above average potential.

(4) The pooled separate accounts in this category primarily invest at least 80% of assets in equity and debt securities of issuers from Europe and developing market countries.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 4. Fair Value Measurements (Continued)

- (5) The investment option invests primarily in intermediate-term, fixed-income investments such as public and private corporate bonds, commercial and residential mortgages, asset-backed securities, and United States government and agency-backed securities. The fund invests at least 80% of its net assets, plus any borrowings for investment purposes, in a diversified portfolio of fixed-income instruments of varying maturities, represented by forwards or derivatives such as options, futures contracts, or swap agreements, at the time of each purchase. It invests in securities denominated in foreign currencies and in securities of foreign issuers, including securities tied to emerging market countries.
- (6) The pooled separate accounts in this category primarily seek a total return consisting of long-term growth of capital and current income. The fund operates as a “target date fund.” It invests primarily in underlying Voya Investments funds, domestic and foreign equity, real asset and alternative investments, and fixed-income funds according to an asset allocation strategy designed for investors having a retirement investment goal close to the year in the fund’s name.

Note 5. Non-participant Directed Investments

Information about the net assets and the significant components of the changes in net assets relating to the non-participant directed investments as of and for the years ended December 31 is as follows:

	2018	2017
Net assets:		
Pooled separate accounts	\$ -	\$ 9,913,873
Guaranteed investment contract	-	5,919,447
	<u>\$ -</u>	<u>\$ 15,833,320</u>
Changes in net assets:		
Contributions	\$ -	\$ 1,032,423
Transfers	-	(14,913)
Dividends and interest	-	86,879
Net appreciation	-	1,807,507
Benefits paid to participants	-	(1,663,363)
	<u>\$ -</u>	<u>\$ 1,248,533</u>

Note 6. Guaranteed Investment Contract with Insurance Company

The Plan entered into a traditional investment contract with Voya Retirement Insurance and Annuity Company (Voya), an affiliate of Voya Institutional Trust Company. The contract met the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under each contract, plus earnings, less participant withdrawals, and administrative expenses. The contract value of the traditional investment contract at December 31, 2018 and 2017 was \$6,251,410 and \$7,106,761, respectively.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 6. Guaranteed Investment Contract with Insurance Company (Continued)

The traditional investment contract held by the Plan during the year is a guaranteed investment contract. The contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than 1.05%. Such interest rates are reviewed on a quarterly basis for resetting. The contract permits the insurance company to terminate the agreement prior to the scheduled maturity date.

The Plan's ability to receive amounts due in accordance with fully benefit-responsive investment contracts is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events limit the ability of the Plan to transact at contract value with the issuer. Examples of such events include the following:

1. The Plan's failure to qualify under Section 401(a) of the Internal Revenue Code or the failure of the trust to be tax-exempt under Section 501(a) of the Internal Revenue Code;
2. Premature termination of the contract;
3. Plan termination or merger;
4. Changes to the Plan's prohibition on competing investment; and
5. Bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures of spin-offs of a subsidiary) that significantly affect the Plan's normal operations.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuer and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Examples of such events include the following:

1. An uncured violation of the Plan's investment guidelines;
2. A breach of material obligation under the contract;
3. A material misrepresentation; and
4. A material amendment to the agreements without the consent of the issuer.

Note 7. Related Party Transactions

The Plan invests in various pooled separate accounts and guaranteed investment contracts managed by an affiliate of Voya Institutional Trust Company (Voya). Voya is the trustee of the Plan; therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan to Voya amounted to \$6,188 and \$2,500 for the years ended December 31, 2018 and 2017, respectively.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 8. Tax Status

Effective January 1, 2015, the Plan adopted a non-standardized form of a prototype plan sponsored by Voya Retirement Insurance and Annuity Company. The prototype plan has obtained a favorable opinion letter dated September 1, 2014 from the Internal Revenue Service as to the prototype plan's qualified status. The Plan Administrator believes the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code.

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. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 9. Subsequent Event

On June 21, 2019, the Plan was amended to permit participant loan provisions effective July 1, 2019.

Supplemental Schedule

InterDesign, Inc. Profit Sharing Plan

Employer No. 34-1145527

Plan No. 001

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

(Modified Cash Basis)

December 31, 2018

(a)	(b)	(c)	(e)
	Identity of Party, Issuer, Borrower, Lessor or Similar	Description of Investments, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Current Value
		Registered investment companies:	
*	Voya Investors Trust	VY T. Rowe Price Capital Appreciation Portfolio	\$ 4,733,393
	American Funds	American Funds AMCAP Fund	3,308,798
	The Vanguard Group	Vanguard Value Index Fund	2,789,051
	The Vanguard Group	Vanguard 500 Index Fund	2,763,745
	American Funds	American Funds EuroPacific	1,089,999
	The Vanguard Group	Vanguard Small Cap Index Fund	837,854
	Pacific Investment Management Company	PIMCO Income Fund	783,772
	American Funds	American Funds New World	707,067
	Victory Capital	Victory Sycamore Established Value Fund	619,273
	The Vanguard Group	Vanguard Target Retirement 2045 Fund	458,868
	Janus Henderson Investors	Janus Triton Fund	430,540
	The Vanguard Group	Vanguard Mid Cap Index Fund	429,772
	The Vanguard Group	Vanguard Mid Cap Growth Index Fund	421,320
	The Vanguard Group	Vanguard Target Retirement 2035 Fund	411,111
	American Funds	American Funds Capital Income Builder	378,083
	The Vanguard Group	Vanguard Target Retirement 2055 Fund	282,073
	Dimensional Fund Advisors LP	DFA Real Estate Securities Portfolio	263,219
	The Vanguard Group	Vanguard Target Retirement 2025 Fund	231,885
	The Vanguard Group	Vanguard Small Cap Value Index Fund	210,404
	Alliance Bernstein Investments Inc.	AB Global Bond Fund	176,601
	The Vanguard Group	Vanguard High-Yield Corporate Fund	160,430
	Franklin Templeton Investments	Franklin Utilities Fund	143,590
	The Vanguard Group	Vanguard Target Retirement 2060 Fund	129,439
	The Vanguard Group	Vanguard Target Retirement 2030 Fund	126,009
	The Vanguard Group	Vanguard Target Retirement 2050 Fund	77,237
	The Vanguard Group	Vanguard Target Retirement Income Fund	57,239
	The Vanguard Group	Vanguard Target Retirement 2040 Fund	44,341
	The Vanguard Group	Vanguard Target Retirement 2020 Fund	827
	The Vanguard Group	Vanguard Target Retirement 2015 Fund	332
	The Vanguard Group	Vanguard Target Retirement 2065 Fund	2
			<u>22,066,274</u>
		Guaranteed investment contract:	
*	Voya Retirement Insurance and Annuity Company	Voya Fixed Account	<u>6,251,410</u>
			<u>\$ 28,317,684</u>
*	Represents party-in-interest		

Note: The above information has been certified as complete and accurate by Voya Institutional Trust Company, the trustee of the Plan.
Column (d) Cost has been omitted as it is not required under ERISA.

Attachment to 2018 Form 5500
Schedule H, line 4i - Schedule of Assets
(Held at End of Year)

INTERDESIGN, INC. PROFIT SHARING PLAN
EIN#34-1145527
Plan#1
As Of December 31, 2018

(a) (b) Identity of issue, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
AB Global Bond Fund Z	Registered Investment Company		\$176,601
American Funds AMCAP Fund R6	Registered Investment Company		\$3,308,798
American Funds Cap In Bld R6	Registered Investment Company		\$378,083
American Funds EuroPacific R6	Registered Investment Company		\$1,089,999
American Funds New World R6	Registered Investment Company		\$707,067
DFA Real Estate Secs Port Ins	Registered Investment Company		\$263,219
Franklin Utilities Fund R6	Registered Investment Company		\$143,590
Janus Hndr Triton Fd N	Registered Investment Company		\$430,540
PIMCO Income Fund Ins	Registered Investment Company		\$783,772
Vangrd 500 Index Fund Adm	Registered Investment Company		\$2,763,745
Vangrd High-Yd Corp Fnd Adm	Registered Investment Company		\$160,430
Vangrd Md-Cap Grw Index Fd Adm	Registered Investment Company		\$421,320
Vangrd Mid-Cap Index Fund Adm	Registered Investment Company		\$429,772
Vangrd Small-Cap Index Fnd Adm	Registered Investment Company		\$837,854
Vangrd Sm-Cap VI Index Fnd Adm	Registered Investment Company		\$210,403
Vangrd Trgt Retire 2015 Fd Inv	Registered Investment Company		\$332
Vangrd Trgt Retire 2020 Fd Inv	Registered Investment Company		\$828
Vangrd Trgt Retire 2025 Fd Inv	Registered Investment Company		\$231,885
Vangrd Trgt Retire 2030 Fd Inv	Registered Investment Company		\$126,009
Vangrd Trgt Retire 2035 Fd Inv	Registered Investment Company		\$411,111
Vangrd Trgt Retire 2040 Fd Inv	Registered Investment Company		\$44,341
Vangrd Trgt Retire 2045 Fd Inv	Registered Investment Company		\$458,868
Vangrd Trgt Retire 2050 Fd Inv	Registered Investment Company		\$77,237
Vangrd Trgt Retire 2055 Fd Inv	Registered Investment Company		\$282,073
Vangrd Trgt Retire 2060 Fd Inv	Registered Investment Company		\$129,439
Vangrd Trgt Retire 2065 Fd Inv	Registered Investment Company		\$2
Vangrd Trgt Retire Inc Fd Inv	Registered Investment Company		\$57,239
Vangrd Value Index Fund Adm	Registered Investment Company		\$2,789,051
Victory Sycmr Est VI Fd R6	Registered Investment Company		\$619,273
* Voya Fixed Account (4062)	Insurance Company General Account		\$6,251,410
* VY TRwPr Cap Apprec Port R6	Registered Investment Company		\$4,733,393
TOTAL			\$28,317,684

* denotes party-in-interest

Column (d) is not required as the Plan's investments are totally participant directed.

InterDesign, Inc. Profit Sharing Plan

Modified Cash Basis Financial Report
December 31, 2018

Contents

Independent Auditor's Report	1-2
Financial Statements	
Statements of Net Assets Available for Benefits (Modified Cash Basis)	3
Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis)	4
Notes to Financial Statements (Modified Cash Basis)	5-12
Supplemental Schedule	
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) (Modified Cash Basis)	13

Independent Auditor's Report

Plan Administrator
InterDesign, Inc. Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of InterDesign, Inc. Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits on a modified cash basis as of December 31, 2018 and 2017, the related statements of changes in net assets available for benefits on a modified cash basis for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note 2; this includes determining that the modified cash basis of accounting is an acceptable basis for the presentation of the financial statements in the circumstances. Management is also responsible 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by Voya Institutional Trust Company, the trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee as of December 31, 2018 and 2017, and for the years then ended, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Independent Auditor's Report (Continued)

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements and supplemental schedule are prepared on a modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America.

Other Matter – Supplemental Schedule

The supplemental schedule of assets (held at end of year) as of December 31, 2018, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes of additional analysis and is not a required part of the financial statements. The supplemental schedule is the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified or provided by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

RSM US LLP

Cleveland, Ohio
October 10, 2019

InterDesign, Inc. Profit Sharing Plan

**Statements of Net Assets Available for Benefits
(Modified Cash Basis)**

December 31, 2018 and 2017

	2018	2017
Assets		
Investments, at fair value:		
Pooled separate accounts	\$ 22,066,274	\$ 23,362,127
Investment, at contract value:		
Guaranteed investment contract	6,251,410	7,106,761
Net assets available for benefits	\$ 28,317,684	\$ 30,468,888

See notes to financial statements.

InterDesign, Inc. Profit Sharing Plan

Statements of Changes in Net Assets Available for Benefits

(Modified Cash Basis)

Years Ended December 31, 2018 and 2017

	2018	2017
Additions:		
Investment (loss) income:		
Net (depreciation) appreciation in fair value of investments	\$ (1,111,905)	\$ 3,751,656
Interest and dividends	89,603	121,558
Total investment (loss) income	(1,022,302)	3,873,214
Contributions:		
Employer	1,642,174	1,483,206
Participant	1,104,573	961,757
Rollovers	19,764	75,454
Total contributions	2,766,511	2,520,417
Total additions	1,744,209	6,393,631
Deductions:		
Benefits paid to participants	3,889,225	3,158,727
Administrative expenses	6,188	2,500
Total deductions	3,895,413	3,161,227
Net (decrease) increase	(2,151,204)	3,232,404
Net assets available for benefits:		
Beginning	30,468,888	27,236,484
Ending	\$ 28,317,684	\$ 30,468,888

See notes to financial statements.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 1. Description of Plan

The following description of the InterDesign, Inc. Profit Sharing Plan provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General: The Plan is sponsored and administered by InterDesign, Inc. (the Company) and is governed by the plan agreement. The Plan is subject to provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

The Plan is a defined contribution plan covering all regular full-time, non-union, U.S. employees of the Company. To be eligible to participate in the 401(k) contribution, employer safe harbor contributions and employer discretionary profit sharing contribution portion of the Plan, participants must be twenty-one or older and have completed 90 days of service with the Company. One year of service is defined as having completed 1,000 hours within a twelve-month period.

Contributions: Each year, participants may contribute up to the maximum percentage of pretax annual compensation, as defined by the Plan and as allowable under the Internal Revenue Code (IRC). Participants direct the investment of their contributions into various investment options offered by the Plan. Participants who attained age 50 before the end of the Plan year were eligible to contribute additional catch-up contributions, as allowable under the IRC. Participants may also contribute amounts representing distributions from other qualified plans. In addition, the Company contributes a non-elective safe harbor contribution of 3% of participants' eligible compensation to the account of each eligible participant. The Company also offers an additional profit sharing contribution that may be contributed at the discretion of the Company's board of directors. For the years ended December 31, 2018 and 2017, profit sharing contributions totaled approximately \$1,048,000 and \$1,032,000, respectively. Prior to January 1, 2018, the discretionary profit sharing contribution was invested in a portfolio of investments directed by the Company (non-participant directed). Effective January 1, 2018, participants may direct the investments of the discretionary profit sharing contribution.

Funding policy: The Company's funding policy for the safe harbor contribution is to make the contributions concurrently with the employee's portion of the 401(k) contributions to the Plan. The profit sharing contributions are made to the Plan on an annual basis based on management's discretion.

Participants' accounts: Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contribution, including any additional profit sharing contribution and (b) Plan earnings and is charged with an allocation of administrative expenses, if any, are paid by the Plan. Allocations are based on participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 1. Description of Plan (Continued)

Vesting: Participants immediately vest in their contributions as well as the Company's safe harbor non-elective contributions, plus actual earnings thereon. Vesting in the Company's profit sharing contribution is based on years of service without incurring a break in service as defined in the plan agreement in accordance with the following schedule:

<u>Years of Service</u>	<u>Vesting</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years	100%

Payment of benefits: Participants are entitled to receive a lump-sum amount equal to the value of their vested account balance upon termination or separation of service.

Forfeited accounts: Forfeitures of non-vested Company contributions are used to reduce employer contributions. Forfeitures of approximately \$93,000 and \$59,000 for the years ended December 31, 2018 and 2017, respectively, were used to reduce employer contributions. As of December 31, 2018 and 2017 there were approximately \$19,000 and \$55,000, respectively, of forfeited non-vested accounts.

Plan termination: Although it has not expressed any intent to do so, the Company reserves the right to terminate the Plan at any time, subject to Plan provisions. In the event of termination of the Plan, participants will become 100% vested in their accounts.

Note 2. Significant Accounting Policies

Basis of accounting: The Plan's records are kept on the modified cash basis, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Under the modified cash basis of accounting, income is recognized when cash is received, benefits are recognized when paid and investments are recorded at fair value, except the guaranteed insurance contract, which is recorded at contract value due to it being fully benefit responsive.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Administrative expenses: The Plan provides that administrative expenses of the Plan are to be paid by the Plan or by the Company, at the Company's discretion.

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 at the measurement date. See Note 4 for discussion of fair value measurements. Purchases and sale of securities are recorded on a trade-date basis. Net (depreciation) appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 2. Significant Accounting Policies (Continued)

Use of estimates: The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits. Actual results could differ from those estimates.

Benefit payments: Benefits are recorded when paid.

Risks and uncertainties: The Plan holds various 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 participants' account balances and the amounts reported in the statements of net assets available for benefits. Four pooled separate accounts comprise approximately 48% and 42% of the Plan's total investments at December 31, 2018 and 2017, respectively. In addition, the Plan's guaranteed investment contract accounts for approximately 22% and 23% of the Plan's total investments at December 31, 2018 and 2017, respectively.

Recently issued accounting pronouncement: In August 2018, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to the Disclosure Requirements for Fair Value Measurement*, which modifies the disclosure requirements for fair value measurements by removing, modifying, and adding certain disclosures. ASU 2018-13 is effective for the Plan for fiscal years beginning after December 31, 2019. The Plan is permitted to early adopt any removed or modified disclosures and delay adoption of the additional disclosures until their effective date. The Plan is currently evaluating the impact of this new standard on its financial statements.

Subsequent events: The Plan has evaluated subsequent events for potential recognition and/or disclosure through October 10, 2019, the date the financial statements were available to be issued.

Note 3. Information Certified and Provided by Voya Institutional Trust Company

The following is a summary of the Plan's asset information as of December 31, 2018 and 2017, and for the years then ended, included throughout the Plan's financial statements and supplemental schedule that were prepared by or derived from information provided by the trustee and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustee that information provided to the Plan Administrator by the trustee related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following assets.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 3. Information Certified and Provided by Voya Institutional Trust Company (Continued)

	2018	2017
Participant directed:		
Pooled separate accounts	\$ 22,066,274	\$ 13,448,254
Non-participant directed:		
Pooled separate accounts	-	9,913,873
	<u>\$ 22,066,274</u>	<u>\$ 23,362,127</u>
Guaranteed investment contract:		
Participant directed:		
Voya Fixed Account	\$ 6,251,410	\$ 1,187,314
Non-participant directed:		
Voya Fixed Account	-	5,919,447
	<u>\$ 6,251,410</u>	<u>\$ 7,106,761</u>

The trustee also certified to the completeness and accuracy of net (depreciation) appreciation in the fair value of the investments of \$1,111,905 and \$3,751,656 and interest and dividends of \$89,603 and \$121,558 related to the aforementioned investments for the years ended December 31, 2018 and 2017, respectively.

Note 4. Fair Value Measurements

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

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 assets 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.

An 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. At December 31, 2018 and 2017, there were no assets or liabilities measured within the fair value hierarchy.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 4. Fair Value Measurements (Continued)

The following tables summarize investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2018 and 2017. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

Investment	2018			
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Pooled separate accounts				
Large-cap US equity ⁽¹⁾	\$ 13,738,577	None	Daily	None
Mid-cap US equity ⁽²⁾	1,733,584	None	Daily	None
Small-cap US equity ⁽³⁾	1,478,798	None	Daily	None
International equity ⁽⁴⁾	1,797,066	None	Daily	None
Fixed income ⁽⁵⁾	1,498,886	None	Daily	None
Balanced/asset allocation ⁽⁶⁾	1,819,363	None	Daily	None
	<u>\$ 22,066,274</u>			

Investment	2017			
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Pooled separate accounts				
Large-cap US equity ⁽¹⁾	\$ 14,147,891	None	Daily	None
Mid-cap US equity ⁽²⁾	1,989,167	None	Daily	None
Small-cap US equity ⁽³⁾	1,750,264	None	Daily	None
International equity ⁽⁴⁾	2,265,845	None	Daily	None
Fixed income ⁽⁵⁾	1,863,112	None	Daily	None
Balanced/asset allocation ⁽⁶⁾	1,345,848	None	Daily	None
	<u>\$ 23,362,127</u>			

⁽¹⁾ This category includes investments whose objective is to either seek substantial dividend income as well as long-term growth of capital or provide an investment return matching the return of the S&P 500 index. Typically these funds invest primarily in stocks of companies similar in size to those in the S&P 500 index.

⁽²⁾ This category's investment objective is to seek long-term capital appreciation. The funds may invest in domestic equity securities with growth potential and/or companies within the range of the market capitalization of the Russell Midcap Value index.

⁽³⁾ Investments in this category seek capital appreciation by investing in either growth or value stocks issued by companies with small-sized market capitalization believed to be undervalued in the marketplace or possess above average potential.

⁽⁴⁾ The pooled separate accounts in this category primarily invest at least 80% of assets in equity and debt securities of issuers from Europe and developing market countries.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 4. Fair Value Measurements (Continued)

- (5) The investment option invests primarily in intermediate-term, fixed-income investments such as public and private corporate bonds, commercial and residential mortgages, asset-backed securities, and United States government and agency-backed securities. The fund invests at least 80% of its net assets, plus any borrowings for investment purposes, in a diversified portfolio of fixed-income instruments of varying maturities, represented by forwards or derivatives such as options, futures contracts, or swap agreements, at the time of each purchase. It invests in securities denominated in foreign currencies and in securities of foreign issuers, including securities tied to emerging market countries.
- (6) The pooled separate accounts in this category primarily seek a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests primarily in underlying Voya Investments funds, domestic and foreign equity, real asset and alternative investments, and fixed-income funds according to an asset allocation strategy designed for investors having a retirement investment goal close to the year in the fund's name.

Note 5. Non-participant Directed Investments

Information about the net assets and the significant components of the changes in net assets relating to the non-participant directed investments as of and for the years ended December 31 is as follows:

	2018	2017
Net assets:		
Pooled separate accounts	\$ -	\$ 9,913,873
Guaranteed investment contract	-	5,919,447
	<u>\$ -</u>	<u>\$ 15,833,320</u>
Changes in net assets:		
Contributions	\$ -	\$ 1,032,423
Transfers	-	(14,913)
Dividends and interest	-	86,879
Net appreciation	-	1,807,507
Benefits paid to participants	-	(1,663,363)
	<u>\$ -</u>	<u>\$ 1,248,533</u>

Note 6. Guaranteed Investment Contract with Insurance Company

The Plan entered into a traditional investment contract with Voya Retirement Insurance and Annuity Company (Voya), an affiliate of Voya Institutional Trust Company. The contract met the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under each contract, plus earnings, less participant withdrawals, and administrative expenses. The contract value of the traditional investment contract at December 31, 2018 and 2017 was \$6,251,410 and \$7,106,761, respectively.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 6. Guaranteed Investment Contract with Insurance Company (Continued)

The traditional investment contract held by the Plan during the year is a guaranteed investment contract. The contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than 1.05%. Such interest rates are reviewed on a quarterly basis for resetting. The contract permits the insurance company to terminate the agreement prior to the scheduled maturity date.

The Plan's ability to receive amounts due in accordance with fully benefit-responsive investment contracts is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events limit the ability of the Plan to transact at contract value with the issuer. Examples of such events include the following:

1. The Plan's failure to qualify under Section 401(a) of the Internal Revenue Code or the failure of the trust to be tax-exempt under Section 501(a) of the Internal Revenue Code;
2. Premature termination of the contract;
3. Plan termination or merger;
4. Changes to the Plan's prohibition on competing investment; and
5. Bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures of spin-offs of a subsidiary) that significantly affect the Plan's normal operations.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuer and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Examples of such events include the following:

1. An uncured violation of the Plan's investment guidelines;
2. A breach of material obligation under the contract;
3. A material misrepresentation; and
4. A material amendment to the agreements without the consent of the issuer.

Note 7. Related Party Transactions

The Plan invests in various pooled separate accounts and guaranteed investment contracts managed by an affiliate of Voya Institutional Trust Company (Voya). Voya is the trustee of the Plan; therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan to Voya amounted to \$6,188 and \$2,500 for the years ended December 31, 2018 and 2017, respectively.

InterDesign, Inc. Profit Sharing Plan

Notes to Financial Statements (Modified Cash Basis)

Note 8. Tax Status

Effective January 1, 2015, the Plan adopted a non-standardized form of a prototype plan sponsored by Voya Retirement Insurance and Annuity Company. The prototype plan has obtained a favorable opinion letter dated September 1, 2014 from the Internal Revenue Service as to the prototype plan's qualified status. The Plan Administrator believes the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code.

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. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 9. Subsequent Event

On June 21, 2019, the Plan was amended to permit participant loan provisions effective July 1, 2019.

Supplemental Schedule

InterDesign, Inc. Profit Sharing Plan

Employer No. 34-1145527

Plan No. 001

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

(Modified Cash Basis)

December 31, 2018

(a)	(b)	(c)	(e)
	Identity of Party, Issuer, Borrower, Lessor or Similar	Description of Investments, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Current Value
		Registered investment companies:	
* Voya Investors Trust		VY T. Rowe Price Capital Appreciation Portfolio	\$ 4,733,393
American Funds		American Funds AMCAP Fund	3,308,798
The Vanguard Group		Vanguard Value Index Fund	2,789,051
The Vanguard Group		Vanguard 500 Index Fund	2,763,745
American Funds		American Funds EuroPacific	1,089,999
The Vanguard Group		Vanguard Small Cap Index Fund	837,854
Pacific Investment Management Company		PIMCO Income Fund	783,772
American Funds		American Funds New World	707,067
Victory Capital		Victory Sycamore Established Value Fund	619,273
The Vanguard Group		Vanguard Target Retirement 2045 Fund	458,868
Janus Henderson Investors		Janus Triton Fund	430,540
The Vanguard Group		Vanguard Mid Cap Index Fund	429,772
The Vanguard Group		Vanguard Mid Cap Growth Index Fund	421,320
The Vanguard Group		Vanguard Target Retirement 2035 Fund	411,111
American Funds		American Funds Capital Income Builder	378,083
The Vanguard Group		Vanguard Target Retirement 2055 Fund	282,073
Dimensional Fund Advisors LP		DFA Real Estate Securities Portfolio	263,219
The Vanguard Group		Vanguard Target Retirement 2025 Fund	231,885
The Vanguard Group		Vanguard Small Cap Value Index Fund	210,404
Alliance Bernstein Investments Inc.		AB Global Bond Fund	176,601
The Vanguard Group		Vanguard High-Yield Corporate Fund	160,430
Franklin Templeton Investments		Franklin Utilities Fund	143,590
The Vanguard Group		Vanguard Target Retirement 2060 Fund	129,439
The Vanguard Group		Vanguard Target Retirement 2030 Fund	126,009
The Vanguard Group		Vanguard Target Retirement 2050 Fund	77,237
The Vanguard Group		Vanguard Target Retirement Income Fund	57,239
The Vanguard Group		Vanguard Target Retirement 2040 Fund	44,341
The Vanguard Group		Vanguard Target Retirement 2020 Fund	827
The Vanguard Group		Vanguard Target Retirement 2015 Fund	332
The Vanguard Group		Vanguard Target Retirement 2065 Fund	2
			<u>22,066,274</u>
		Guaranteed investment contract:	
* Voya Retirement Insurance and Annuity Company		Voya Fixed Account	<u>6,251,410</u>
			<u>\$ 28,317,684</u>
* Represents party-in-interest			

Note: The above information has been certified as complete and accurate by Voya Institutional Trust Company, the trustee of the Plan.
Column (d) Cost has been omitted as it is not required under ERISA.