

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 24pt; font-weight: bold;">2018</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2018 or fiscal plan year beginning <u>07/01/2018</u> and ending <u>06/30/2019</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) <u>COVID-19</u>

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(K) SHARING 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>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/1980</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>07/01/1980</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>07/01/1980</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>ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.</u> <u>32 OLD SLIP</u> <u>10TH FL</u> <u>NEW YORK, NY 10005</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>13-2804089</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>212-620-7970</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541330</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>13-2804089</u>	2c Plan Sponsor's telephone number <u>212-620-7970</u>	2d Business code (see instructions) <u>541330</u>	
2b Employer Identification Number (EIN) <u>13-2804089</u>					
2c Plan Sponsor's telephone number <u>212-620-7970</u>					
2d Business code (see instructions) <u>541330</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.	06/24/2020	JOHN MCCUE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	06/24/2020	JOHN MCCUE
	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 <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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	5 214
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 159 6a(2) 163 6b 0 6c 66 6d 229 6e 0 6f 229 6g 214 6h 11
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2G 2J 2R 3D 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)** ☐ **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 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 07/01/2018 and ending 06/30/2019		
A Name of plan ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(K) SHARING SHARING PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.	D Employer Identification Number (EIN) 13-2804089	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

USB FINANCIAL SERVICES, INC.

13-2638166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 54 71 63 99	INVESTMENT	141829	Yes ☒ No ☐	Yes ☒ No ☐	0	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 ☐

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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 H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
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For calendar plan year 2018 or fiscal plan year beginning 07/01/2018 and ending 06/30/2019		
A Name of plan ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(K) SHARING SHARING PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.	D Employer Identification Number (EIN) 13-2804089	

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

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)	252000	450000
(2) Participant contributions	1b(2)	52269	72062
(3) Other.....	1b(3)	6802	7952
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	2040911	1946206
(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)	237824	507679
(B) Common.....	1c(4)(B)	5147732	4329898
(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)	380870	330743
(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)	9992948	11671627
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	326511	143460

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	18437867	19459627

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		87
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	87

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	18437867	19459540
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	450000	
(B) Participants	2a(1)(B)	1450766	
(C) Others (including rollovers)	2a(1)(C)	105910	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2006676
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)	18857	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		18857
(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)	420731	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		420731
(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)		
(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)		759440
c Other income.....	2c		3095
d Total income. Add all income amounts in column (b) and enter total	2d		3208799

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2043779	
(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)		2043779
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)	141829	
(4) Other	2i(4)	1518	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		143347
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2187126

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1021673
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: GRASSI & CO., CPAS, P.C.

(2) EIN: 11-3266576

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		98908
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.
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For calendar plan year 2018 or fiscal plan year beginning 07/01/2018 and ending 06/30/2019

A Name of plan <u>ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(K) SHARING SHARING PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.</u>	D Employer Identification Number (EIN) <u>13-2804089</u>

Part I	Distributions
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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	<u>0</u>
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>13-3874463</u> <u>36-3865716</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.)
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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
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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
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ 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):

**ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN**

FINANCIAL STATEMENTS

JUNE 30, 2019

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN

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INDEPENDENT AUDITORS' REPORT

To The Board of Trustees
Robert Silman Associates Structural Engineers, D.P.C.
401(k) Profit Sharing Plan

Report on the Financial Statements

We have audited the accompanying financial statements of Robert Silman Associates Structural Engineers, D.P.C. 401(k) Profit Sharing Plan, which comprise the statements of net assets available for benefits at June 30, 2019 and 2018, and the related statement of changes in net assets available for benefits for the year ended June 30, 2019, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Robert Silman Associates Structural Engineers, D.P.C. 401(k) Profit Sharing Plan at June 30, 2019 and 2018, and the changes in its net assets available for benefits for the year ended June 30, 2019 in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) at June 30, 2019 and Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the year ended June 30, 2019, referred to as "supplemental information," is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Grassi & Co., CPAs, P.C.

GRASSI & CO., CPAs, P.C.

Jericho, New York

April 15, 2020

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2019 AND 2018

	<u>2019</u>	<u>2018</u>
ASSETS:		
Investments, at fair value	<u>\$ 18,598,869</u>	<u>\$ 17,745,926</u>
RECEIVABLES:		
Employer contributions	450,000	252,000
Participants' contributions	72,062	52,269
Rollover contributions	7,952	6,802
Notes receivable from participants	<u>330,743</u>	<u>380,870</u>
Total Receivables	<u>860,757</u>	<u>691,941</u>
Total Assets	<u>19,459,626</u>	<u>18,437,867</u>
LIABILITIES:		
Other payables	<u>87</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 19,459,539</u>	<u>\$ 18,437,867</u>

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

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED JUNE 30, 2019

ADDITIONS TO PLAN ASSETS ATTRIBUTED TO:

Investment Income:

Net appreciation in fair value of investments	\$ 759,439
Interest and dividend income	420,731
Other income	<u>3,095</u>
Total Investment Income	<u>1,183,265</u>

Interest income on notes receivable from participants	<u>18,857</u>
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Contributions:

Employer	450,000
Participants	1,450,766
Rollover	<u>105,910</u>
Total Contributions	<u>2,006,676</u>

Total Additions	<u>3,208,798</u>
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DEDUCTIONS FROM PLAN ASSETS ATTRIBUTED TO:

Benefits paid to participants	2,012,912
Deemed distributions of participant loans	30,867
Administrative expenses	141,829
Other expense	<u>1,518</u>

Total Deductions	<u>2,187,126</u>
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NET INCREASE	1,021,672
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	<u>18,437,867</u>
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End of year	<u>\$ 19,459,539</u>
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The accompanying notes are an integral part of these financial statements.

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 1 - Description of Plan

The following description of the Robert Silman Associates Structural Engineers, D.P.C. 401(k) Profit Sharing Plan (the "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, which was established on July 1, 1980 and amended and restated on July 1, 2016, is a defined contribution profit sharing plan covering all eligible employees of Robert Silman Associates, PLLC. Robert Silman Associates Structural Engineers, D.P.C. is the Plan sponsor ("Sponsor"). Employees who are age 21 or older are eligible to make contributions. Employees who have one year of service and are age 21 or older are eligible to receive profit sharing contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Investments of the Plan are held by the Plan custodian, UBS Financial Services, Inc. ("UBS"). The custodian invests all contributions as directed by the participants, and allocates to each participant's account its proportionate share of investment income. The Plan administrator is responsible for oversight of the Plan. The Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan administrator. The record-keeper for the Plan is Correll Co. ("Correll" or the "Record-Keeper"). The trustee of the Plan is Robert Silman Associates, PLLC.

Contributions

Each year, participants may contribute a percentage of their eligible annual compensation, as defined in the Plan, provided that such contributions do not exceed the limitations under the Internal Revenue Code (the "Code") of \$19,000 for 2019 and \$18,500 for 2018, plus a maximum of \$6,000 in catch-up contributions for participants who have attained age 50 before the end of the Plan year. Contributions may be made as a pre-tax deferral. Highly compensated employees are subject to additional limits set forth in the Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor may also make discretionary profit sharing contributions to the Plan at the option of the Sponsor's board of trustees and allocate them among participants eligible to share in the contribution for the Plan year. Profit sharing contributions are invested as directed by the participants. During the year ended June 30, 2019, the Company made a \$450,000 profit sharing contribution to the Plan.

Additional contributions to the Plan may include the following:

- A discretionary qualified non-elective contribution solely to correct a failure of non-discrimination testing.

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 1 - Description of Plan (cont'd.)

Participant Accounts

Each participant's account is credited with the participant's contributions, as well as allocations of the Sponsor's profit sharing contribution and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants shall have a vested percentage in their employer contribution accounts according to a graded vesting schedule based on years of service as follows:

<u>Years of Service</u>	<u>Percent Vested</u>
At least 2	20%
3 but less than 4	40%
4 but less than 5	60%
5 but less than 6	80%
6 or more	100%

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participants' accounts and bear interest at one percentage point above prime rate as defined by the Plan. The interest rate is determined as of the date of origination and is fixed for the loan term. Principal and interest are paid ratably through monthly payroll deductions over a period not to exceed five years, unless the funds are used to acquire a principal residence, in which case the maximum repayment period is 30 years.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant or beneficiary may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump-sum amount or in annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. The Plan also allows certain withdrawals at age 59½ and hardship withdrawals.

Forfeitures

At June 30, 2019 and 2018, forfeited nonvested accounts totaled \$0. These accounts will be used first to pay the administrative expenses of the Plan and then allocated to the other participant accounts. During the year ended June 30, 2019, \$4,973 in forfeitures was allocated to participant accounts.

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The financial statements are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Cash and Cash Equivalents

The Plan considers all highly liquid investments with original maturities of three months or less when purchased to be cash equivalents.

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 3 for a discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document. The Plan administrator will charge a reasonable fee to the participant to process and administer participant loans. No allowance for credit losses has been recorded as of June 30, 2019 or 2018. Interest rates on loans outstanding at June 30, 2019 range from 4.25% to 8.75%.

Administrative Expenses

Administrative expenses are paid by the participants and charged to each participant's account. For the year ended June 30, 2019, participants paid \$141,829 in investment advisory and management fees to UBS Financial Services, Inc., a related party and the Plan's custodian.

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 2 - Summary of Significant Accounting Policies (cont'd.)

Payment of Benefits

Benefits are recorded when paid.

Note 3 - Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under Financial Accounting Standards Board Accounting Standards Codification Topic 820 are described as follows:

Level 1 - Inputs to the valuation methodology are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan can access at the measurement date.

Level 2 - Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- Quoted prices for similar assets or liabilities in active markets.
- Quoted prices for identical or similar assets or liabilities in inactive markets.
- Inputs other than quoted prices that are observable for the asset or liability.
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs that are unobservable inputs for the asset or liability.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2019 and 2018.

Corporate stocks, Preferred stocks and Investment in partnerships: Valued at the closing price reported on the active market on which the individual securities are traded.

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

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 3 - Fair Value Measurements (cont'd.)

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value at June 30, 2019 and 2018.

	<u>Assets at Fair Value at June 30, 2019</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and cash equivalents	\$ 1,946,206	\$ -	\$ -	\$ 1,946,206
Common stock	4,329,898	-	-	4,329,898
Preferred stock	507,679	-	-	507,679
Investment in partnerships	143,459	-	-	143,459
Exchange traded funds	11,671,627	-	-	11,671,627
Total Assets at Fair Value	<u>\$ 18,598,869</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 18,598,869</u>

	<u>Assets at Fair Value at June 30, 2018</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and cash equivalents	\$ 2,040,911	\$ -	\$ -	\$ 2,040,911
Common stock	5,147,732	-	-	5,147,732
Preferred stock	237,824	-	-	237,824
Investment in partnerships	326,511	-	-	326,511
Exchange traded funds	9,992,948	-	-	9,992,948
Total Assets at Fair Value	<u>\$ 17,745,926</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 17,745,926</u>

Note 4 - Related Party Transactions and Party-in-Interest Transactions

Certain Plan investments are held in cash and money-market accounts with UBS Financial Services, Inc., the custodian as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions.

Notes receivable from participants also qualify as party-in-interest transactions.

Note 5 - Plan Termination

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

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2019

Note 6 - Tax Status

The Plan is a prototype plan that has received a favorable determination letter dated March 31, 2014 issued by the National Office of the Internal Revenue Service ("IRS") stating that the Plan is qualified under Internal Revenue Code Section 401. Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code and, therefore, believe that the Plan is qualified and the related trust is tax exempt.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2015.

Note 7 - Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. 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.

Note 8 - Subsequent Events

Subsequent to June 30, 2019, local, U.S. and world governments have declared a global pandemic due to the coronavirus disease (COVID-19). Most industries are experiencing disruption to business operations and the impact of reduced consumer spending. There is unprecedented uncertainty surrounding the duration of the pandemic, its potential economic ramifications, and any government actions to mitigate them. Although it cannot be reasonably determined at this time whether this will have a long-term impact, in the short-term, this has caused significant losses in U.S. and global markets and the values of investment securities, which could negatively impact participants' account balances and the amounts reported in the statements of net assets available for benefits.

The Plan administrator has evaluated all events or transactions that occurred after June 30, 2019 through April 15, 2020, which is the date that the financial statements were available to be issued. During this period, there were no material subsequent events requiring disclosure except as noted above.

SUPPLEMENTAL SCHEDULES

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
	Preferred Stock:			
	BACPRB	Bank of America Co Ser Gg 6.000% Preferred Cbl Par Value - 25.00 USD	**	\$ 139,823
	BACPRK	Bank of America Corp 5.875% Preferred Cbl Par Value -25.00 USD	**	70,366
	BBTPRD	Bb&T Corporation (Bbt) 5.850% Preferred Cbl Par Value -25.00 USD	**	118,455
	WFCPRN	Wells Fargo And Company 5.200% (Wfc) 5.200% Pref Cbl 25.00 USD	**	179,035
				<u>\$ 507,679</u>
	Common Stock:			
	AAPL	Apple Inc	**	\$ 247,598
	AIG	American Intl Group Inc Com New	**	5,221
	AMT	American Tower Corp Reit	**	105,496
	AMZN	Amazon.Com Inc	**	287,832
	ASIX	Advansix Inc	**	107,712
	BABA	Alibaba Group Hldg Ltd Spon Adr	**	132,171
	BAC	Bank Of Amer Corp	**	415,570
	BP	Bp Plc Spon Adr	**	60,340
	CAH	Cardinal Health Inc	**	4,427
	CELG	Celgene Corp	**	166,577
	CVET	Covetrus Inc	**	294
	CVX	Chevron Corp	**	43,803
	CX	Cemex S.A.B. De C.V. Spon Adr	**	8,480
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	DNKN	Dunkin Brands Group Inc	**	4,461
	EW	Edwards Lifesciences Corp	**	183,816
	FB	Facebook Inc Cl A	**	253,023
	FBHS	Fortune Brands Home & Sec Inc Com	**	88,780
	GD	Genl Dynamics Corp	**	88,365
	GOOG	Alphabet Inc Cl C	**	48,641
	GTX	Garrett Motion Inc	**	31
	HON	Honeywell Intl Inc	**	87,993
	HSIC	Schein Henry Inc	**	2,097
	INTC	Intel Corp	**	112,495
	ITW	Illinois Tool Works Inc	**	83,850
	JNJ	Johnson & Johnson Com	**	86,075
	KTB	Kontoor Brands Inc	**	280
	LOW	Lowe's Companies Inc	**	3,128
	LTC	LTC Properties Inc Real Estate Investmnt Tr	**	457
	MKL	Markel Corp (Holding Co)	**	32,688
	MRK	Merck & Co Inc New Com	**	4,528
	MSFT	Microsoft Corp	**	172,942
	NOW	Servicenow Inc	**	85,117
	NSC	Norfolk Stn Corp	**	108,635
	NTNX	Nutanix Inc Cl A	**	72,476
	PEP	Pepsico Inc	**	89,431
	PG	Procter & Gamble Co	**	88,817
	PJT	Pjt Partners Inc - A	**	132,987
	PXD	Pioneer Nat Res Co	**	15,386
	RACE	Ferrari N V Eur	**	67,635
	REZI	Resideo Technologies Inc	**	66
	SIRI	Sirius XM Hldgs Inc Com	**	39,445

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ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
	Common Stock (cont'd.):			
	SWKS	Skyworks Solutions Inc	**	\$ 89,015
	SYK	Stryker Corp	**	171,043
	SYN	Synthetic Biologics Inc	**	6
	T	At&T Inc	**	138,999
	TOT	Total S.A. France Spon Adr	**	84,076
	TSLA	Tesla Inc	**	4,469
	TTWO	Take-Two Interactive Software	**	11,353
	UAA	Under Armour Inc Cl A	**	148,321
	UNP	Union Pacific Corp	**	103,495
	V	Visa Inc Cl A	**	16,661
	VFC	Vf Corp	**	6,289
	VNO	Vornado Realty Trust	**	1,667
	XOM	Exxon Mobil Corp	**	2,835
	ZIOP	Ziopharm Oncology Inc	**	5,381
				<u>\$ 4,329,898</u>
	Exchange Traded Funds:			
	ABIA	Fund Class A	**	\$ 8,418
	AGDYX	AB High Income Fund Class Advisor	**	231,933
	AGTHX	Fund of America Class A	**	3,400
	AIDYX	AB Intermediate Diversified Municipal Portfolio Fund Class Adv	**	138,714
	ALTVX	AB Muni Income Fund National Portfolio Fund Class Advisor	**	138,607
	AMRFX	Amer Funds American Mutual Fund Class F2	**	56,719
	BFAFX	American Funds Bond Fund of America F-1	**	15,427
	BIL	Spdr Ser Tr Spdr Bloomberg Barclays 1-3 Month T-Bill Etf	**	631,101
	BISOX	Blackrock Short Obligations Fund Class Instl	**	170,979
	BMCSX	Blackrock High Equity Income Fund Service Class	**	1,193
	CHCLX	AB Discovery Growth Fund Class A	**	12,819
	CHCYX	AB Discovery Growth Fund Class Advisor	**	7,034
	CIBRX	Columbia Total Return Bond Fund Class R	**	7,207
	CSIEX	Calvert Equity Fund Class A	**	2,527
	CSRSX	Cohen & Steers Realty Shares	**	21,290
	DEM	Wisdomtree Emerging Markets High Divid Fund Etf	**	428,602
	DES	Wisdomtree Us Smallcap Divid Fund Etf	**	352,620
	DFDIX	Delaware Smid Cap Growth Fund Class I	**	1,977
	DLS	Wisdomtree Intl Smallcap Divid Fund Etf	**	8,128
	DON	Wisdomtree Us Midcap Divid Etf	**	945,472
	DVY	Ishares Select Divid Etf	**	7,467
	DWM	Wisdomtree Intl Equity Fund Etf	**	1,233,524
	DWX	Spdr S&P Intl Divid Etf	**	366,442
	EEM	Ishares Msci Emerging Markets Etf	**	125,383
	EISMX	Smid Cap Fund Class I	**	2,008
	EPLPX	Mainstay Epoch Us Equity Yield Class A	**	25,646
	EUFN	Ishares Msci Europe Financials Etf	**	160,355
	EWH	Ishares Msci Hong Kong Etf	**	79,400
	EWJ	Ishares Msci Japan Etf	**	3,329
	EWRE	Invesco S&P 500 Equal Weight Real Estate Etf	**	509
	FAHDX	Fidelity Advisor High Income Advantage Fund Class A	**	17,642
	FCGAX	Franklin Growth Fund Advisor Class	**	13,208
	FIATX	Fidelity Advisors Intl Appreciation Fund Class M	**	34
	FKGRX	Ft-Franklin Growth A	**	35,707
	GFAFX	American Funds Growth Fund of Amer F-1	**	16,049
	GFFFX	America Fund Class F2	**	26,718

See independent auditors' report.

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
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Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
	Exchange Traded Funds (cont'd.):			
GRSRX		Cohen & Steers Global Realty Fund Class R	**	\$ 838
GXC		Spdr S&P China Etf	**	956
HFOAX		Janus Henderson International Opportunities Fund Cl A	**	2,929
IBB		Ishares Nasdaq Biotechnology Etf	**	3,819
IEF		Ishares 7-10 Year Treas Bond Etf	**	2,200
IHOAX		Hartford International Opportunities Fund Cl A	**	20,475
IHOIX		Hartford International Opportunities Fd Cl I	**	12,336
IHOSX		The Hartford Intl Opportunities Fund-R4	**	10,441
IWB		Ishares Russell 1000 Etf	**	3,419
IWD		Ishares Russell 1000 Value Etf	**	22,391
IWF		Ishares Russell 1000 Growth Etf	**	827,136
IWN		Ishares Russell 2000 Value Etf	**	5,543
IWO		Ishares Russell 2000 Growth Etf	**	423,434
IWP		Ishares Russell Mid-Cap Growth Etf	**	786,812
IWR		Ishares Russell Midcap Etf	**	3,464
IWS		Ishares Russell Mid-Cap Value Etf	**	4,635
IYC		Ishares U.S. Consumer	**	2,613
IYR		Ishares Us Real Estate	**	3,056
IYW		Ishares U.S. Technology Etf	**	3,760
JDTRX		Pgim Short-Term Corp Bond Cl R	**	7,091
JFAMX		Jp Morgan Emerging Markets Class A	**	6,129
JMVCVX		Janus Henderson Mid Cap Value Fund Class T Shares	**	17,770
JQLAX		John Hancock Multimanager Lifestyle Aggressive Portfolio Fund Class R2	**	4,438
JQLBX		John Hancock Multimanager Lifestyle Balanced Portfolio Fund Class R2	**	22,840
JQLCX		John Hancock Multimanager Lifestyle Conservative Portfolio Fund Class R2	**	9,334
JQLGX		John Hancock Multimanager Lifestyle Growth Portfolio Fund Class R2	**	128,727
JQLMX		John Hancock Multimanager Lifestyle Moderate Portfolio Fund Class R2	**	12,294
KSDVX		Keeley Small Cap Dividend Value Fund Cl A	**	13,495
KWEB		Kraneshares Csi China Internet Etf	**	73,616
KXI		Ishares Global Consumer Staples Etf	**	1,579
LDLFX		Lord Abbett Short Duration Income Fund Class F	**	92,676
LPDAX		Blackrock Lifepath Dynamic 2060 Fund Class A	**	1,978
LPRDX		Blackrock Lifepath Dynamic 2030 Fund Class A	**	365,598
LPRFX		Blackrock Lifepath Dynamic 2050 Fund Class A	**	20,885
LPVAX		Blackrock Lifepath Dynamic 2055 Fund Class Investor A	**	2,808
LQD		Ishares Iboxx \$ Inv Grade Corporate Bond Etf	**	230,582
LZOEX		Lazard Emerging Market Portfolio-Open Shares	**	4,815
MGGPX		Morgan Stanley Global Opportunity Cl A	**	3,352
MHYIX		Mainstay Mackay High Yield Corporate Bond Fund Class I	**	6,497
MWTRX		Metropolitan West Total Return Bond Fund	**	20,677
NWJCX		Nationwide Ziegler Nyse Arca Tech 100 Index Fund Class A	**	1,952
OIDAX		Invesco Oppenheimer International Diversified A	**	789
OPGIX		Invesco Oppenheimer Global Opportunities A	**	3,054
OPGVX		Invesco Oppenheimer Limited-Term Government A	**	24,113
OPPAX		Invesco Oppenheimer Global A	**	10,366
OPTFX		Invesco Oppenheimer Capital Appreciation A	**	133
PARWX		Parnassus Endeavor Fund Investor	**	8,956
PFF		Ishares Pfd & Income Securities Etf	**	2,616
PIFZX		Pgim Short-Term Corp Bond Cl Z	**	17,788
PIGFX		Pioneer Fundamental Growth Class A	**	27,985
PKSFX		Virtus Kar Small-Cap Core Fund Class I	**	3,172
PNBAX		Allianzgi Nfj Large-Cap Value Fund Class A	**	303
POAGX		Primecap Odyssey Fds Aggressive Growth Fund	**	2,774
PRFSX		T Rowe Price Tax Free Short Intermediate Fund	**	126,659
PRSMX		T Rowe Price Summit Municipal Intermediate Fund	**	249,904
PSDYX		Putnam Ultra Short Duration Income Fund Class Y	**	22,159
PZFXV		John Hancock Classic Value Fund Class A	**	45,391

See independent auditors' report.

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Exchange Traded Funds (cont'd.):			
	RHS	Invesco S&P 500 Equal Weight Consumer Staples Etf	**	\$ 3,346
	RICEX	American Funds Investment Company of America Fd Class R4	**	5,203
	RMFEX	American Funds American Mutual Fund Class R4	**	31,358
	SHRAX	Clearbridge Aggressive Growth Fund Class A	**	20,810
	SHY	Ishares 1-3 Yr Treas Bond Etf	**	392,616
	SVUIX	Guggenheim Mid Cap Value Institutional Fund Class Institutional	**	6,760
	TGBAX	Templeton Global Bond Adv	**	6,664
	TGVAX	Thornburg International Value Fund Class A	**	26,008
	TIP	Ishares Tips Bond Etf	**	193,561
	TLT	Ishares 20+ Year Treas Bond Etf	**	147,818
	TRBCX	T Rowe Price Blue Chip Growth Fund Inc	**	3,473
	TRLGX	T Rowe Price Institutional Large Cap Growth Fund	**	1,927
	USNQX	Usaa Nasdaq-100 Index Fund Class NI	**	3,003
	VBR	Vanguard Small-Cap Value Etf	**	37,465
	VCSAX	Vanguard Consumer Staples Index Fund Admiral	**	2,507
	VDADX	Vanguard Dividend Apprec Index Admiral	**	13,979
	VDC	Vanguard Consumer Staples Etf	**	37,190
	VEA	Vanguard Ftse Developed Market Etf	**	16,475
	VFH	Vanguard Financials Etf	**	2,760
	VFIAX	Vanguard 500 Index Fund Admiral	**	26,451
	VFIFX	Vanguard Target Retirement 2050 Inv	**	4,078
	VGIT	Vanguard Inter Term Treas Etf	**	8,048
	VGIT	Vanguard Information Technology Etf	**	1,687
	VHT	Vanguard Health Care Etf	**	51,660
	VIOG	Vanguard S&P Small-Cap 600 Growth Etf	**	3,600
	VNQ	Vanguard Real Estate Etf	**	265,521
	VOE	Vanguard Mid-Cap Value Etf	**	22,268
	VONV	Vanguard Russell 1000 Value Etf	**	1,053,394
	VOX	Vanguard Communication Services Etf	**	8,669
	VPU	Vanguard Utilities Etf	**	19,940
	VTI	Vanguard Total Stock Market Etf	**	37,372
	VTIVX	Vanguard Target Retirement Fund 2045	**	4,832
	VTV	Vanguard Value Etf	**	22,184
	VUG	Vanguard Growth Etf	**	27,776
	VWETX	Vanguard Long Term Investment Grade Fund Admiral	**	3,655
	VWO	Vanguard Ftse Emerging Markets Etf	**	34,619
	WBSIX	William Blair Small Cap Growth Fund Class I	**	1,792
	WEIMX	Teton Westwood Mighty Mites Class I	**	3,987
	WSMDX	Blair William Small Mid Cap Growth I	**	1,938
	XSW	Spdr S&P Software & Services Etf	**	82,093
				<u>\$ 11,671,627</u>
	Investments in Partnerships:			
	BX	Blackstone Group Lp/The Unit Repstg Ltd Partnership Int	**	\$ 26,652
	ET	Energy Transfer Lp Units Ltd Partnership Mlp	**	116,807
				<u>\$ 143,459</u>
	Cash and Cash Equivalents:			
*	UBS Financial Services	Cash and cash equivalents	**	\$ 1,946,206
		Total Investments, at fair value		\$ 18,598,869
*	Participant Loans	Interest rates ranging from 4.25% to 8.75%	\$ -0-	330,743
	Total			<u><u>\$ 18,929,612</u></u>

* Indicates party-in-interest to the Plan.

** Cost information is not required for participant-directed investments.

See independent auditors' report.

Schedule H - Part IV - Line 4a - Schedule of Delinquent Participant Contributions
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
FOR THE YEAR ENDED JUNE 30, 2019

Participant contributions transferred late to the plan	Total that constitutes nonexempt prohibited transactions			Total fully corrected under VFCP and PTE 2002-1
	Contributions not corrected	Contributions corrected outside VFCP	Contributions pending correction in VFCP	
Check here if late participant loan repayments are included: X				
June 30, 2019	\$ 13,294	\$ -	\$ -	\$ -
June 30, 2018	44,212			
June 30, 2017	41,402			
	<u>\$ 98,908</u>			

See independent auditors' report.

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

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	PXD	Pioneer Nat Res Co	**	15,386
	RACE	Ferrari N V Eur	**	67,635
	REZI	Resideo Technologies Inc	**	66
	SIRI	Sirius XM Hldgs Inc Com	**	39,445

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Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b)	(c)	(d)	(e)
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	TOT	Total S.A. France Spon Adr	**	84,076
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	TTWO	Take-Two Interactive Software	**	11,353
	UAA	Under Armour Inc Cl A	**	148,321
	UNP	Union Pacific Corp	**	103,495
	V	Visa Inc Cl A	**	16,661
	VFC	Vf Corp	**	6,289
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	XOM	Exxon Mobil Corp	**	2,835
	ZIOP	Ziopharm Oncology Inc	**	5,381
				<u>\$ 4,329,898</u>
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	AGDYX	AB High Income Fund Class Advisor	**	231,933
	AGTHX	Fund of America Class A	**	3,400
	AIDYX	AB Intermediate Diversified Municipal Portfolio Fund Class Adv	**	138,714
	ALTVX	AB Muni Income Fund National Portfolio Fund Class Advisor	**	138,607
	AMRFX	Amer Funds American Mutual Fund Class F2	**	56,719
	BFAFX	American Funds Bond Fund of America F-1	**	15,427
	BIL	Spdr Ser Tr Spdr Bloomberg Barclays 1-3 Month T-Bill Etf	**	631,101
	BISOX	Blackrock Short Obligations Fund Class Instl	**	170,979
	BMCSX	Blackrock High Equity Income Fund Service Class	**	1,193
	CHCLX	AB Discovery Growth Fund Class A	**	12,819
	CHCYX	AB Discovery Growth Fund Class Advisor	**	7,034
	CIBRX	Columbia Total Return Bond Fund Class R	**	7,207
	CSIEX	Calvert Equity Fund Class A	**	2,527
	CSRSX	Cohen & Steers Realty Shares	**	21,290
	DEM	Wisdomtree Emerging Markets High Divid Fund Etf	**	428,602
	DES	Wisdomtree Us Smallcap Divid Fund Etf	**	352,620
	DFDIX	Delaware Smid Cap Growth Fund Class I	**	1,977
	DLS	Wisdomtree Intl Smallcap Divid Fund Etf	**	8,128
	DON	Wisdomtree Us Midcap Divid Etf	**	945,472
	DVY	Ishares Select Divid Etf	**	7,467
	DWM	Wisdomtree Intl Equity Fund Etf	**	1,233,524
	DWX	Spdr S&P Intl Divid Etf	**	366,442
	EEM	Ishares Msci Emerging Markets Etf	**	125,383
	EISMX	Smid Cap Fund Class I	**	2,008
	EPLPX	Mainstay Epoch Us Equity Yield Class A	**	25,646
	EUFN	Ishares Msci Europe Financials Etf	**	160,355
	EWJ	Ishares Msci Hong Kong Etf	**	79,400
	EWJ	Ishares Msci Japan Etf	**	3,329
	EWRE	Invesco S&P 500 Equal Weight Real Estate Etf	**	509
	FAHDX	Fidelity Advisor High Income Advantage Fund Class A	**	17,642
	FCGAX	Franklin Growth Fund Advisor Class	**	13,208
	FIATX	Fidelity Advisors Intl Appreciation Fund Class M	**	34
	FKGRX	Ft-Franklin Growth A	**	35,707
	GFAFX	American Funds Growth Fund of Amer F-1	**	16,049
	GFFFX	America Fund Class F2	**	26,718

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
	Exchange Traded Funds (cont'd.):			
GRSRX		Cohen & Steers Global Realty Fund Class R	**	\$ 838
GXC		Spdr S&P China Etf	**	956
HFOAX		Janus Henderson International Opportunities Fund Cl A	**	2,929
IBB		Ishares Nasdaq Biotechnology Etf	**	3,819
IEF		Ishares 7-10 Year Treas Bond Etf	**	2,200
IHOAX		Hartford International Opportunities Fund Cl A	**	20,475
IHOIX		Hartford International Opportunities Fd Cl I	**	12,336
IHOSX		The Hartford Intl Opportunities Fund-R4	**	10,441
IWB		Ishares Russell 1000 Etf	**	3,419
IWD		Ishares Russell 1000 Value Etf	**	22,391
IWF		Ishares Russell 1000 Growth Etf	**	827,136
IWN		Ishares Russell 2000 Value Etf	**	5,543
IWO		Ishares Russell 2000 Growth Etf	**	423,434
IWP		Ishares Russell Mid-Cap Growth Etf	**	786,812
IWR		Ishares Russell Midcap Etf	**	3,464
IWS		Ishares Russell Mid-Cap Value Etf	**	4,635
IYC		Ishares U.S. Consumer	**	2,613
IYR		Ishares Us Real Estate	**	3,056
IYW		Ishares U.S. Technology Etf	**	3,760
JDTRX		Pgim Short-Term Corp Bond Cl R	**	7,091
JFAMX		Jp Morgan Emerging Markets Class A	**	6,129
JMVCVX		Janus Henderson Mid Cap Value Fund Class T Shares	**	17,770
JQLAX		John Hancock Multimanager Lifestyle Aggressive Portfolio Fund Class R2	**	4,438
JQLBX		John Hancock Multimanager Lifestyle Balanced Portfolio Fund Class R2	**	22,840
JQLCX		John Hancock Multimanager Lifestyle Conservative Portfolio Fund Class R2	**	9,334
JQLGX		John Hancock Multimanager Lifestyle Growth Portfolio Fund Class R2	**	128,727
JQLMX		John Hancock Multimanager Lifestyle Moderate Portfolio Fund Class R2	**	12,294
KSDVX		Keeley Small Cap Dividend Value Fund Cl A	**	13,495
KWEB		Kraneshares Csi China Internet Etf	**	73,616
KXI		Ishares Global Consumer Staples Etf	**	1,579
LDLFX		Lord Abbett Short Duration Income Fund Class F	**	92,676
LPDAX		Blackrock Lifepath Dynamic 2060 Fund Class A	**	1,978
LPRDX		Blackrock Lifepath Dynamic 2030 Fund Class A	**	365,598
LPRFX		Blackrock Lifepath Dynamic 2050 Fund Class A	**	20,885
LPVAX		Blackrock Lifepath Dynamic 2055 Fund Class Investor A	**	2,808
LQD		Ishares Iboxx \$ Inv Grade Corporate Bond Etf	**	230,582
LZOEX		Lazard Emerging Market Portfolio-Open Shares	**	4,815
MGGPX		Morgan Stanley Global Opportunity Cl A	**	3,352
MHYIX		Mainstay Mackay High Yield Corporate Bond Fund Class I	**	6,497
MWTRX		Metropolitan West Total Return Bond Fund	**	20,677
NWJCX		Nationwide Ziegler Nyse Arca Tech 100 Index Fund Class A	**	1,952
OIDAX		Invesco Oppenheimer International Diversified A	**	789
OPGIX		Invesco Oppenheimer Global Opportunities A	**	3,054
OPGVX		Invesco Oppenheimer Limited-Term Government A	**	24,113
OPPAX		Invesco Oppenheimer Global A	**	10,366
OPTFX		Invesco Oppenheimer Capital Appreciation A	**	133
PARWX		Parnassus Endeavor Fund Investor	**	8,956
PFF		Ishares Pfd & Income Securities Etf	**	2,616
PIFZX		Pgim Short-Term Corp Bond Cl Z	**	17,788
PIGFX		Pioneer Fundamental Growth Class A	**	27,985
PKSFX		Virtus Kar Small-Cap Core Fund Class I	**	3,172
PNBAX		Allianzgi Nfj Large-Cap Value Fund Class A	**	303
POAGX		Primecap Odyssey Fds Aggressive Growth Fund	**	2,774
PRFSX		T Rowe Price Tax Free Short Intermediate Fund	**	126,659
PRSMX		T Rowe Price Summit Municipal Intermediate Fund	**	249,904
PSDYX		Putnam Ultra Short Duration Income Fund Class Y	**	22,159
PZFXV		John Hancock Classic Value Fund Class A	**	45,391

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-2804089
Plan Number: 002

ROBERT SILMAN ASSOCIATES STRUCTURAL ENGINEERS, D.P.C. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT JUNE 30, 2019

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Exchange Traded Funds (cont'd.):			
RHS		Invesco S&P 500 Equal Weight Consumer Staples Etf	**	\$ 3,346
RICEX		American Funds Investment Company of America Fd Class R4	**	5,203
RMFEX		American Funds American Mutual Fund Class R4	**	31,358
SHRAX		Clearbridge Aggressive Growth Fund Class A	**	20,810
SHY		Ishares 1-3 Yr Treas Bond Etf	**	392,616
SVUIX		Guggenheim Mid Cap Value Institutional Fund Class Institutional	**	6,760
TGBAX		Templeton Global Bond Adv	**	6,664
TGVAX		Thornburg International Value Fund Class A	**	26,008
TIP		Ishares Tips Bond Etf	**	193,561
TLT		Ishares 20+ Year Treas Bond Etf	**	147,818
TRBCX		T Rowe Price Blue Chip Growth Fund Inc	**	3,473
TRLGX		T Rowe Price Institutional Large Cap Growth Fund	**	1,927
USNQX		Usaa Nasdaq-100 Index Fund Class NI	**	3,003
VBR		Vanguard Small-Cap Value Etf	**	37,465
VCSAX		Vanguard Consumer Staples Index Fund Admiral	**	2,507
VDADX		Vanguard Dividend Apprec Index Admiral	**	13,979
VDC		Vanguard Consumer Staples Etf	**	37,190
VEA		Vanguard Ftse Developed Market Etf	**	16,475
VFH		Vanguard Financials Etf	**	2,760
VFIAX		Vanguard 500 Index Fund Admiral	**	26,451
VFIFX		Vanguard Target Retirement 2050 Inv	**	4,078
VGIT		Vanguard Inter Term Treas Etf	**	8,048
VGIT		Vanguard Information Technology Etf	**	1,687
VHT		Vanguard Health Care Etf	**	51,660
VIOG		Vanguard S&P Small-Cap 600 Growth Etf	**	3,600
VNQ		Vanguard Real Estate Etf	**	265,521
VOE		Vanguard Mid-Cap Value Etf	**	22,268
VONV		Vanguard Russell 1000 Value Etf	**	1,053,394
VOX		Vanguard Communication Services Etf	**	8,669
VPU		Vanguard Utilities Etf	**	19,940
VTI		Vanguard Total Stock Market Etf	**	37,372
VTIVX		Vanguard Target Retirement Fund 2045	**	4,832
VTI		Vanguard Value Etf	**	22,184
VUG		Vanguard Growth Etf	**	27,776
VWETX		Vanguard Long Term Investment Grade Fund Admiral	**	3,655
VWO		Vanguard Ftse Emerging Markets Etf	**	34,619
WBSIX		William Blair Small Cap Growth Fund Class I	**	1,792
WEIMX		Teton Westwood Mighty Mites Class I	**	3,987
WSMDX		Blair William Small Mid Cap Growth I	**	1,938
XSW		Spdr S&P Software & Services Etf	**	82,093
				<u>\$ 11,671,627</u>
	Investments in Partnerships:			
BX		Blackstone Group Lp/The Unit Repstg Ltd Partnership Int	**	\$ 26,652
ET		Energy Transfer Lp Units Ltd Partnership Mlp	**	116,807
				<u>\$ 143,459</u>
	Cash and Cash Equivalents:			
* UBS Financial Services		Cash and cash equivalents	**	\$ 1,946,206
	Total Investments, at fair value			\$ 18,598,869
* Participant Loans		Interest rates ranging from 4.25% to 8.75%	\$ -0-	330,743
Total				<u><u>\$ 18,929,612</u></u>

* Indicates party-in-interest to the Plan.

** Cost information is not required for participant-directed investments.

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		and ending	
A Name of plan		B Three-digit plan number (PN) ►	
C Plan sponsor's name as shown on line 2a of Form 5500		D Employer Identification Number (EIN)	

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)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(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	
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	
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	

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)	
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers)	2a(1)(C)	
(2)	Noncash contributions	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans	2b(1)(E)	
	(F) Other	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	
(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)	
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	

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

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		
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)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		
j Total expenses. Add all expense amounts in column (b) and enter total	2j		

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		
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:

(2) EIN:

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			
4b			

	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			
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			
e Was this plan covered by a fidelity bond?			
4e			
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			
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			
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			
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			
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			
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			
l Has the plan failed to provide any benefit when due under the plan?.....			
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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.)

Attachment to 2018 Form 5500
Schedule H, line 4a - Schedule of Delinquent Participant Contributions

Plan Name Robert Silman Associates Structural Engineers, D.P.C. 401(k) Sharing Plan **EIN** 13-2804089
Plan Sponsor's Name Robert Silman Associates Structural Engineers, D.P.C. **DPN** C. 002

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
Check here if Late Participant Loan Repayments are included: ☒	98,908	0	0	0