Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2019

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan
- ☐ a DFE (specify) ____

B This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ ☐

D Check box if filing under:
- ☒ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
SILVERLINING INTERIORS, INC. 401(K) PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 03/01/2000

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)
SILVERLINING INTERIORS, INC.

2091 BROADWAY 3RD FLOOR
NEW YORK, NY 10023

2b Employer Identification Number (EIN)
13-3402118

2c Plan Sponsor's telephone number
212-496-7800

2d Business code (see instructions)
236110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2020	DARYL L ANGELL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: **a** Sponsor's name **c** Plan Name	**4b** EIN **4d** PN	
5 Total number of participants at the beginning of the plan year	**5**	317
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	272
a(2) Total number of active participants at the end of the plan year	**6a(2)**	297
b Retired or separated participants receiving benefits	**6b**	3
c Other retired or separated participants entitled to future benefits	**6c**	40
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	340
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	340
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	283
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
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 2F 2G 2J 2T 3D 3H

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(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)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **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 2019 Form M-1 annual report. If the plan was not required to file the 2019 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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2019** **This Form is Open to Public Inspection.**

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
SILVERLINING INTERIORS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SILVERLINING INTERIORS, INC.

D Employer Identification Number (EIN)
13-3402118

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

SENTINEL BENEFTITS GROUP, LLC

20-5916766

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	NONE	23681	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SENTINEL PENSION ADVISORS

04-3422848

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	NONE	19054	Yes [ ] No [X]	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: RAINES & FISCHER LLP	**b** EIN:	13-3217649
c	Position: AUDITOR		
d	Address: 555 FIFTH AVENUE 9TH FLOOR NEW YORK, NY 10017	**e** Telephone:	212-953-9200

Explanation: EMPLOYER CHANGED ACCOUNTANTS TO CITRIN COOPERMAN

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
SILVERLINING INTERIORS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SILVERLINING INTERIORS, INC.

D Employer Identification Number (EIN)
13-3402118

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: METLIFE STABLE VALUE 25157

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
46-6625485-002	C	740457

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EAFE EQUITY INDEX CL R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802495-007	C	7437

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EQUITY INDEX CL R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802168-001	C	699790

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK US DEBT INDEX CL R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802445-010	C	17259

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACROCK RUSSELL 2000 INDEX CL R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802587-004	C	10921

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACROCK MIDCAP EQUITY INDEX CL R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802327-003	C	4235

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

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

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

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

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

a Plan name	
b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
SILVERLINING INTERIORS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SILVERLINING INTERIORS, INC.

D Employer Identification Number (EIN)
13-3402118

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)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	6633	10655
(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)	207020	198115
(9) Value of interest in common/collective trusts	1c(9)	1248608	1480100
(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)	5394185	7273194
(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	6856446	8962064
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	7414	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	7414	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	6849032	8962064

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)	417240	
	(B) Participants	2a(1)(B)	454887	
	(C) Others (including rollovers)	2a(1)(C)	104184	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		976311
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)	9330	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		9330
	(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)	290673	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		290673
	(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)		182293
(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)		976770
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2435377
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	295290	
(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)		295290
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		12394
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)	14661	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		14661
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		322345
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2113032
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unmodified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

b 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: CITRIN COOPERMAN **(2)** EIN: 22-2428965

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:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
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.)	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

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
SILVERLINING INTERIORS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SILVERLINING INTERIORS, INC.

D Employer Identification Number (EIN)
13-3402118

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 27-3169253

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

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

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that 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	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) 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):

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation_____

SILVERLINING INTERIORS, INC. 401(k) PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEAR ENDED DECEMBER 31, 2019

SILVERLINING INTERIORS, INC. 401(k) PLAN
FOR THE YEAR ENDED DECEMBER 31, 2019

Contents

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CITRINCOOPERMAN®
Accountants and Advisors

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee
SilverLining Interiors, Inc. 401(k) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of SilverLining Interiors, Inc. 401(k) Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2019, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with 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.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Fidelity Personal Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2019, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2019 financial statements. Accordingly, we do not express an opinion on the 2019 financial statements referred to in the first paragraph.

CITRINCOOPERMAN®
Accountants and Advisors

Other Matter - Supplemental Schedules

The supplemental schedule H, line 4i - assets (held at end of year) as of December 31, 2019 and schedule H, Line 4j - reportable transactions as of December 31, 2019, are required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

Other Matter - 2018 Financial Statements

The financial statements of the Plan as of December 31, 2018, were audited by predecessor auditors. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Personal Trust Company, the trustee of the Plan. Their report, dated September 26, 2019, indicated that (a) because of the significance of the information that they did not audit, they were unable to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and, accordingly, they did not express an opinion on the financial statements and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the trustee, were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

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

The form and content of the information included in the 2019 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

CitrinCooperman & Company, LLP
CERTIFIED PUBLIC ACCOUNTANTS

New York, New York
October 12, 2020

SILVERLINING INTERIORS, INC. 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018

	2019	2018
Assets:		
Investments:		
Investments at fair value	$ 8,763,949	$ 6,649,426
Receivable:		
Notes receivable from participants	198,115	207,020
Total assets	8,962,064	6,856,446
Liabilities:		
Other liabilities	-	7,414
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,962,064	$ 6,849,032

See accompanying notes to financial statements.

SILVERLINING INTERIORS, INC. 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2019

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 1,159,063
Interest and dividends	290,673
Total investment income	1,449,736
Interest income on notes receivable from participants	9,330
Contributions:	
Participant	454,887
Employer	417,240
Rollover	104,184
Total contributions	976,311
Total additions	2,435,377
Deductions from net assets attributed to:	
Benefits paid to participants	295,290
Deemed distributions	12,394
Administrative expenses	14,661
Total deductions	322,345
Net increase in net assets available for benefits	2,113,032
Net assets available for benefits - beginning of year	6,849,032
NET ASSETS AVAILABLE FOR BENEFITS - END OF YEAR	$ 8,962,064

See accompanying notes to financial statements.

NOTE 1. DESCRIPTION OF PLAN

The following description of SilverLining Interiors, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of Silverlining Interiors, Inc. and its affiliates, Premium Grade Millwork Corp. and Metropolitan Painting and Interiors, Inc. (collectively, the "Company" or "Plan Sponsor"). The Plan is offered to all employees of the Company who are at least 21 years of age and have completed three months of service. Eligible employees are enrolled into the Plan on the first day of the month after eligibility requirements are met. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

Participants may contribute a portion of their annual eligible compensation as a pre-tax deferral, up to the maximum allowed by the Internal Revenue Code ("IRC"), as defined in the Plan. The Plan also allows participants to make after-tax Roth contributions subject to certain limitations determined by the IRC. Participants who have attained the age of 50 before the end of the Plan year are eligible to make catch-up contributions not to exceed IRC limits. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (rollovers). Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan includes an auto enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 3% of eligible compensation and their contributions invested in a designated balanced fund until changed by the participant.

Participants are eligible to receive safe harbor matching contributions after completing one year of service with the Company and upon attaining 21 years of age. Participants who are eligible to receive employer matching contributions and who are employed at the Company as of the last day of the year, may be entitled to an additional discretionary profit-sharing contribution.

The Company contributes safe harbor matching contributions in an amount equal to 3% of a participant's eligible compensation contributed to the Plan. Employer safe harbor matching contributions are subject to certain limitations under the IRC. For the year ended December 31, 2019, the Company made safe harbor matching contributions of $417,240.

The Company may also elect to contribute a discretionary profit sharing contribution on behalf of non-highly compensated participants, as defined by the Plan document. Employer discretionary profit sharing contributions are subject to certain limitations under the IRC. The Company did not make any discretionary profit sharing contributions during the year ended December 31, 2019.

NOTE 1. DESCRIPTION OF PLAN (CONTINUED)

Participant accounts

Each participant's account is credited with the participant's contribution, the Company's contribution, an allocation of investment earnings or losses, and an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions and the Company's safe harbor matching contributions plus actual earnings thereon. Vesting of the Company's discretionary profit sharing contributions and related earnings vest according to the following schedules:

Years of Vesting Service, as Defined	Vesting Interest
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	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 account balance. The maximum term of a note for general purpose may not exceed five years. Participants are allowed to have two outstanding notes at any given time. Principal and interest are paid ratably through payroll deductions. The notes are secured by the balance in the participant's account and bear interest at a rate of prime rate plus 1%, which is commensurate with local prevailing rates as determine by the Plan administrator.

Payment of benefits

Participants may receive all or a portion of their account balance if they terminate employment, become disabled, reach age 59-1/2 or on account of financial hardship, as defined in the IRC. Benefits may be paid in the form of a lump sum, partial payments, or installment payments.

The Plan allows for hardship withdrawals from a participant’s elective deferral account. During the year ended December 31, 2019, the Plan was restated and amended to no longer require participants to try to obtain a Plan loan before requesting a hardship withdrawal, to no longer suspend deferral contributions for a six-month period after receiving a hardship withdrawal, and to include all earnings on elective deferral contributions as part of a hardship withdrawal.

Forfeited accounts

Forfeitures of the non-vested portion of terminated participants' accounts are used to pay administrative expenses or reduce future employer contributions. At December 31, 2019 and 2018, forfeited nonvested accounts totaled $-. For the year ended December 31, 2019, there were no forfeitures used to reduce employer matching contributions.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

The accompanying financial statements of the Plan are prepared using the accrual method of accounting, in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Use of estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits at the date of the financial statements and changes in net assets available for benefits during the year. Accordingly, actual results could differ from those estimates. Any adjustments applied to estimated amounts are recognized in the year such adjustments are determined.

Investment valuation and income recognition

The Plan's investments are stated 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.

The investment in collective trust fund is valued at the net asset value (the "NAV") per unit, as determined by the trustee at year end. The NAV is used as the practical expedient to estimate fair value and is based on the fair value of the underlying investment held by the fund, less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV.

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

Management fees and operating expenses charged to the Plan for investments are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected in the net appreciation or depreciation in the fair market value of such investments.

Fair value measurements

U.S. GAAP defines fair value and established 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 measurement) and the lowest priority to unobservable inputs (Level 3 measurement).

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Fair value measurements (continued)

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

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

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

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

The 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 December 31, 2019 and 2018.

Money Market Funds: Valued at the quoted price reported in an active market in which the individual security is traded.

Mutual Funds: The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily NAV and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Common Collective Trust Fund: is valued using NAV. The NAV of a common collective investment trust fund is based on the market values of the underlying securities in an active market. The beneficial interest of each participant is represented in units. Units are issued and redeemed daily at the fund's closing NAV.

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

Notes receivable from participants

Notes receivable from participant are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2019 and 2018. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Administrative expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants and in-service withdrawal processing fees are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation (depreciation) in fair value of investments.

Payment of benefits

Benefits are recorded when paid by the Plan.

Reclassifications

Certain amounts in the prior year financial statements have been reclassified to conform to the current year presentation. These reclassification adjustments had no effect on the Plan's previously reported net increase in net assets available for benefits.

Subsequent events

The Plan has evaluated subsequent events through October 12, 2020, the date on which these financial statements were available to be issued, and has determined that, except for those described in Note 10, there are no subsequent events that require disclosure under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 855, *Subsequent Events*.

NOTE 3. FAIR VALUE MEASUREMENTS

The following tables summarize the Plan's investments measured at fair value on a recurring basis, categorized by U.S. GAAP's valuation hierarchy, at December 31, 2019 and 2018:

Description	Total at December 31, 2019	Level 1	Level 2	Level 3
Assets in fair value hierarchy:				
Money market funds	$ 10,655	$ 10,655	$ -	$ -
Mutual funds	7,273,194	7,273,194	-	-
Total assets in fair value hierarchy	7,283,849	$ 7,283,849	$ -	$ -
Investments measured at net asset value*	1,480,100			
Total investments at fair value	$ 8,763,949			

NOTE 3. FAIR VALUE MEASUREMENTS (CONTINUED)

Description	Total at December 31, 2018	Level 1	Level 2	Level 3
Assets in fair value hierarchy:				
Money market funds	$ 6,633	$ 6,633	$ -	$ -
Mutual funds	5,394,185	5,394,185	-	-
Total assets in fair value hierarchy	5,400,818	$ 5,400,818	$ -	$ -
Investments measured at net asset value*	1,248,608			
Total investments at fair value	$ 6,649,426			

*In accordance with Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits. See Note 4 for further information.

During the year ended December 31, 2019, there were no transfers between levels of the fair value hierarchy.

NOTE 4. NET ASSET VALUE PER SHARE

The following tables set forth a summary of the Plan's investments with a reported NAV per share at December 31, 2019 and 2018:

	Fair Value Estimated Using Net Asset Value per Share December 31, 2019				
Investment	Fair Value	Unfunded Commitments	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Common collective trust	$ 1,480,100	$ -	Daily	None	None

	Fair Value Estimated Using Net Asset Value per Share December 31, 2018				
Investment	Fair Value	Unfunded Commitments	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Common collective trust	$ 1,248,608	$ -	Daily	None	None

NOTE 5. INFORMATION CERTIFIED BY THE PLAN TRUSTEE

The following tables summarize investment and other asset information regarding the Plan as of December 31, 2019 and 2018, and for the year ended December 31, 2019, included in the Plan's financial statements and supplemental schedules, that were prepared by or derived from information prepared by Fidelity Personal Trust Company (the "Trustee"), and furnished to the Plan administrator. The Plan administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2019	2018
Investments:		
Money market funds*	$ 10,655	$ 6,633
Mutual funds	7,273,194	5,394,185
Common collective trust	1,480,100	1,248,608
Total certified assets	$ 8,763,949	$ 6,649,426
Net appreciation in fair value of investments	$ 1,159,063	
Interest and dividends	$ 290,673	

* Included in money market funds at December 31, 2019 and 2018, was $8,824 and $6,633, respectively, which were not certified by the trustee.

NOTE 6. 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 7. PARTY-IN-INTEREST TRANSACTIONS

Parties in interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Some administrative expenses of the Plan are paid directly by the Company. The Plan currently holds units of money market funds managed by the Trustee. The Trustee is the Plan’s service provider and, therefore, these transactions and the Plan’s payment of fees to the Trustee qualify as party-in-interest transactions. Notes receivable from participants also reflect party-in-interest transactions.

NOTE 8. PLAN TERMINATION

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

NOTE 9. TAX STATUS

The Plan has adopted a volume submitter plan ("VSP") which received an opinion letter from the Internal Revenue Service ("IRS") dated March 31, 2014, stating that the VSP is designed in accordance with the applicable sections of the IRC.

NOTE 9. TAX STATUS (CONTINUED)

Although the VSP has been amended since receiving the opinion letter, the Plan administrator and the Plan's tax counsel believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore, believe 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 (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2019 and 2018, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress for any tax periods.

NOTE 10. SUBSEQUENT EVENTS

In January 2020, Principal Trust Company replaced Fidelity Personal Trust Company, as the new trustee and began providing third-party administrative and plan custodian services for the Plan.

During 2020, the World Health Organization has declared COVID-19 to constitute a "Public Health Emergency of International Concern." The pandemic has disrupted economic markets and the financial impact, duration and spread of the COVID-19 virus are uncertain at this time. The financial performance of the Plan's investments may be impacted by the market's response to the uncertainty of the situation, however, the duration of disruption and related financial impact cannot be reasonably estimated at this time.

In response to the COVID-19 pandemic, on March 27, 2020, the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act") was passed by Congress. The CARES Act provides immediate and temporary relief for retirement plan sponsors and their participants with respect to employer contributions, distributions and participant loans. The provisions of the CARES Act may be effective and operationalized immediately, prior to amending the plan document. Effective April 8, 2020, the Plan was amended to allow for coronavirus-related distributions, increased Plan loan limits and delayed Plan repayments, and waiver of 2020 required minimum distributions.

SUPPLEMENTAL SCHEDULES

SILVERLINING INTERIORS, INC. 401(k) PLAN
SCHEDULE H, LINE 4i - ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019
EIN #: 13-3402118
PLAN NUMBER: 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investments, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	BlackRock EAFE Equity Index CL R	Common collective trust fund	**	$ 7,437
	BlackRock Equity Index Fund CL R	Common collective trust fund	**	699,791
	BlackRock Mid Cap Equity Index Fund CL R	Common collective trust fund	**	4,235
	BlackRock Russell 2000 Index Fund CL R	Common collective trust fund	**	10,921
	BlackRock U.S. Debt Index CL R	Common collective trust fund	**	17,259
	Met Managed GIC ABG Trust	Common collective trust fund	**	740,457
*	Fidelity Government Cash Reserves	Money market fund	**	8,824
*	Fidelity Government Money Market	Money market fund	**	1,831
	Alger Capital Appreciation A	Mutual fund	**	919,378
	American Funds 2015 Target Date Retire R4	Mutual fund	**	1,852,093
	American Funds 2025 Target Date Retire R4	Mutual fund	**	54,103
	American Funds 2035 Target Date Retire R4	Mutual fund	**	103,880
	American Funds 2045 Target Date Retire R4	Mutual fund	**	34,021
	American Funds 2055 Target Date Retire R4	Mutual fund	**	119,470
	American Balanced CL R4	Mutual fund	**	387,482
	American New World Fund R4	Mutual fund	**	47,774
	BlackRock Health Sciences Opp PRT A	Mutual fund	**	1,057,652
	BlackRock Total Return Fund CL A	Mutual fund	**	175,233
	Carillon Eagle Small Cap Growth CL A	Mutual fund	**	140,102
	JHancock Disciplined Value Mid Cap Fund CL R2	Mutual fund	**	677,499
	MFS Global Total Return A	Mutual fund	**	704,172
	MFS International Diversification Fund A	Mutual fund	**	302,767
	MFS Mid Cap Growth Class A	Mutual fund	**	260,160
	Putnam Equity Income Class A	Mutual fund	**	437,408
				8,763,949
*	Notes receivable from participants	Outstanding participant loans (interest rate range of 4.50% - 6.50%) with maturity dates through November 2024	$0	198,115
	TOTAL			$ 8,962,064

* Represents a party-in-interest to the Plan as defined by ERISA.
** Cost information has been omitted for participant-directed investments.

SILVERLINING INTERIORS, INC. 401(k) PLAN
SCHEDULE H, LINE 4j - REPORTABLE TRANSACTIONS
DECEMBER 31, 2019
EIN: 13-3402118
PLAN NUMBER: 002

Series transactions, greater than 5% of assets:

(a) Identity of Party Involved	(b) Description of Asset (Including Interest Rate and Maturity in Case of Loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or Loss
American Funds 2015 Target Date Retire R4	Mutual Fund	$ 490,002	$ -	$ -	$ -	$ 490,002	$ -	$ -
American Funds 2015 Target Date Retire R4	Mutual Fund	$ 245,879	$ 251,411	$ -	$ -	$ 245,879	$ 251,411	$ 5,532
BlackRock Health Sciences Opp PRT A	Mutual Fund	$ 151,726	$ -	$ -	$ -	$ 151,726	$ -	$ -
BlackRock Health Sciences Opp PRT A	Mutual Fund	$ 176,347	$ 203,534	$ -	$ -	$ 176,347	$ 203,534	$ 27,187

See independent auditor's report.

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
BEGINNING MARKET VALUE: 6,643,031.38				
SECURITY TRANSACTIONS EXCEEDING 5%:				
MUTUAL FUNDS/EQUITY				
AMERICAN FUNDS 2015 TRGT DATE RETIRE R4				
PURCHASED 128.596 SHS ON 01/03/2019 AT 10.70	1,375.98	1,375.98	1,375.98	
PURCHASED 581.446 SHS ON 01/03/2019 AT 10.70	6,221.47	6,221.47	6,221.47	
SOLD 107.692 SHS ON 01/09/2019 AT 10.92	1,176.00	1,242.54	1,176.00	66.54-
PURCHASED 123.572 SHS ON 01/10/2019 AT 10.93	1,350.64	1,350.64	1,350.64	
PURCHASED 588.337 SHS ON 01/10/2019 AT 10.93	6,430.52	6,430.52	6,430.52	
SOLD 89.143 SHS ON 01/10/2019 AT 10.93	974.33	1,028.24	974.33	53.91-
PURCHASED 121.975 SHS ON 01/16/2019 AT 10.95	1,335.63	1,335.63	1,335.63	
PURCHASED 566.501 SHS ON 01/16/2019 AT 10.95	6,203.19	6,203.19	6,203.19	
PURCHASED 112.379 SHS ON 01/23/2019 AT 10.99	1,235.05	1,235.05	1,235.05	
PURCHASED 543.254 SHS ON 01/23/2019 AT 10.99	5,970.36	5,970.36	5,970.36	
SOLD 716.48 SHS ON 01/28/2019 AT 10.98	7,866.95	8,260.49	7,866.95	393.54-
PURCHASED 113.175 SHS ON 01/31/2019 AT 11.14	1,260.77	1,260.77	1,260.77	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
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401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 537.149 SHS ON 01/31/2019 AT 11.14	5,983.84	5,983.84	5,983.84	
PURCHASED 25.697 SHS ON 02/01/2019 AT 11.1301	286.01	286.01	286.01	
PURCHASED 112.69 SHS ON 02/06/2019 AT 11.17	1,258.75	1,258.75	1,258.75	
PURCHASED 536.563 SHS ON 02/06/2019 AT 11.17	5,993.41	5,993.41	5,993.41	
SOLD .552 SHS ON 02/07/2019 AT 11.1232	6.14	6.36	6.14	0.22-
SOLD 111.056 SHS ON 02/07/2019 AT 11.13	1,236.05	1,280.00	1,236.05	43.95-
PURCHASED 108.363 SHS ON 02/13/2019 AT 11.19	1,212.58	1,212.58	1,212.58	
PURCHASED 532.294 SHS ON 02/13/2019 AT 11.19	5,956.37	5,956.37	5,956.37	
PURCHASED 113.064 SHS ON 02/21/2019 AT 11.25	1,271.97	1,271.97	1,271.97	
PURCHASED 533.367 SHS ON 02/21/2019 AT 11.25	6,000.38	6,000.38	6,000.38	
PURCHASED 112.663 SHS ON 02/27/2019 AT 11.29	1,271.96	1,271.96	1,271.97	
PURCHASED 513.764 SHS ON 02/27/2019 AT 11.29	5,800.40	5,800.40	5,800.40	
SOLD 1,443.908 SHS ON 02/27/2019 AT 11.29	16,301.72	16,636.51	16,301.72	334.79-
PURCHASED 112.964 SHS ON 03/06/2019 AT 11.26	1,271.97	1,271.97	1,271.97	
PURCHASED 536.063 SHS ON 03/06/2019 AT 11.26	6,036.07	6,036.07	6,036.07	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
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401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 111.289 SHS ON 03/14/2019 AT 11.33	1,260.90	1,260.90	1,260.90	
PURCHASED 520.743 SHS ON 03/14/2019 AT 11.33	5,900.02	5,900.02	5,900.02	
SOLD 253.868 SHS ON 03/19/2019 AT 11.40	2,894.10	2,924.51	2,894.10	30.41-
SOLD .379 SHS ON 03/19/2019 AT 11.3984	4.32	4.37	4.32	0.05-
SOLD .506 SHS ON 03/19/2019 AT 11.4032	5.77	5.83	5.77	0.06-
SOLD .379 SHS ON 03/19/2019 AT 11.3984	4.32	4.37	4.32	0.05-
SOLD 2.909 SHS ON 03/19/2019 AT 11.3991	33.16	33.51	33.16	0.35-
SOLD .379 SHS ON 03/19/2019 AT 11.3984	4.32	4.37	4.32	0.05-
PURCHASED 107.8 SHS ON 03/20/2019 AT 11.42	1,231.08	1,231.08	1,231.08	
PURCHASED 568.085 SHS ON 03/20/2019 AT 11.42	6,487.53	6,487.53	6,487.53	
SOLD 118.596 SHS ON 03/26/2019 AT 11.42	1,354.37	1,366.15	1,354.37	11.78-
PURCHASED 107.896 SHS ON 03/27/2019 AT 11.41	1,231.09	1,231.09	1,231.09	
PURCHASED 568.999 SHS ON 03/27/2019 AT 11.41	6,492.28	6,492.28	6,492.28	
SOLD 638.882 SHS ON 03/29/2019 AT 11.45	7,315.20	7,359.15	7,315.20	43.95-
PURCHASED 107.051 SHS ON 04/03/2019 AT 11.50	1,231.09	1,231.09	1,231.09	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 552.984 SHS ON 04/03/2019 AT 11.50	6,359.32	6,359.32	6,359.32	
PURCHASED 106.679 SHS ON 04/10/2019 AT 11.54	1,231.08	1,231.08	1,231.08	
PURCHASED 547.178 SHS ON 04/10/2019 AT 11.54	6,314.43	6,314.43	6,314.43	
SOLD 34.799 SHS ON 04/11/2019 AT 11.5202	400.89	400.84	400.88	0.05
SOLD 1,731.602 SHS ON 04/15/2019 AT 11.55	20,000.00	19,945.99	20,000.00	54.01
SOLD 1,328.257 SHS ON 04/16/2019 AT 11.54	15,328.09	15,299.94	15,328.09	28.15
PURCHASED 133.411 SHS ON 04/17/2019 AT 11.53	1,538.23	1,538.23	1,538.23	
PURCHASED 549.65 SHS ON 04/17/2019 AT 11.53	6,337.46	6,337.46	6,337.46	
SOLD .403 SHS ON 04/24/2019 AT 11.5633	4.66	4.64	4.66	0.02
PURCHASED 133.064 SHS ON 04/25/2019 AT 11.56	1,538.22	1,538.22	1,538.22	
PURCHASED 535.357 SHS ON 04/25/2019 AT 11.56	6,188.73	6,188.73	6,188.73	
PURCHASED 132.834 SHS ON 05/03/2019 AT 11.58	1,538.22	1,538.22	1,538.22	
PURCHASED 523.168 SHS ON 05/03/2019 AT 11.58	6,058.28	6,058.28	6,058.29	
SOLD 116.852 SHS ON 05/07/2019 AT 11.50	1,343.80	1,346.06	1,343.80	2.26-
SOLD 116.852 SHS ON 05/07/2019 AT 11.50	1,343.80	1,346.06	1,343.80	2.26-

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 116.852 SHS ON 05/07/2019 AT 11.50	1,343.80	1,346.06	1,343.80	2.26-
SOLD 116.852 SHS ON 05/07/2019 AT 11.50	1,343.80	1,346.06	1,343.80	2.26-
PURCHASED 133.992 SHS ON 05/08/2019 AT 11.48	1,538.23	1,538.23	1,538.23	
PURCHASED 549.136 SHS ON 05/08/2019 AT 11.48	6,304.08	6,304.08	6,304.08	
PURCHASED 133.991 SHS ON 05/15/2019 AT 11.48	1,538.22	1,538.22	1,538.22	
PURCHASED 540.725 SHS ON 05/15/2019 AT 11.48	6,207.52	6,207.52	6,207.52	
SOLD 13.486 SHS ON 05/21/2019 AT 11.4704	154.69	155.34	154.68	0.65-
PURCHASED 132.032 SHS ON 05/23/2019 AT 11.44	1,510.45	1,510.45	1,510.45	
PURCHASED 551.166 SHS ON 05/23/2019 AT 11.44	6,305.34	6,305.34	6,305.34	
SOLD 16.554 SHS ON 05/23/2019 AT 11.4401	189.38	190.68	189.38	1.30-
PURCHASED 134.932 SHS ON 05/30/2019 AT 11.40	1,538.22	1,538.22	1,538.22	
PURCHASED 538.789 SHS ON 05/30/2019 AT 11.40	6,142.19	6,142.19	6,142.19	
PURCHASED 133.497 SHS ON 06/05/2019 AT 11.52	1,537.89	1,537.89	1,537.89	
PURCHASED 532.544 SHS ON 06/05/2019 AT 11.52	6,134.91	6,134.91	6,134.91	
PURCHASED 130.099 SHS ON 06/12/2019 AT 11.61	1,510.45	1,510.45	1,510.45	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 535.374 SHS ON 06/12/2019 AT 11.61	6,215.69	6,215.69	6,215.69	
PURCHASED 137.395 SHS ON 06/19/2019 AT 11.71	1,608.90	1,608.90	1,608.90	
PURCHASED 535.482 SHS ON 06/19/2019 AT 11.71	6,270.49	6,270.49	6,270.49	
SOLD 82.023 SHS ON 06/24/2019 AT 11.77	965.41	944.85	965.41	20.56
PURCHASED 132.177 SHS ON 06/26/2019 AT 11.69	1,545.15	1,545.15	1,545.15	
PURCHASED 525.538 SHS ON 06/26/2019 AT 11.69	6,143.54	6,143.54	6,143.54	
PURCHASED 116.541 SHS ON 07/03/2019 AT 11.84	1,379.85	1,379.85	1,379.85	
PURCHASED 509.909 SHS ON 07/03/2019 AT 11.84	6,037.32	6,037.32	6,037.32	
PURCHASED 117.036 SHS ON 07/10/2019 AT 11.79	1,379.85	1,379.85	1,379.85	
PURCHASED 515.562 SHS ON 07/10/2019 AT 11.79	6,078.48	6,078.48	6,078.48	
SOLD 53.299 SHS ON 07/12/2019 AT 11.8199	629.99	614.14	629.99	15.85
PURCHASED 117.036 SHS ON 07/17/2019 AT 11.79	1,379.85	1,379.85	1,379.85	
PURCHASED 526.655 SHS ON 07/17/2019 AT 11.79	6,209.26	6,209.26	6,209.26	
PURCHASED 116.443 SHS ON 07/24/2019 AT 11.85	1,379.85	1,379.85	1,379.85	
PURCHASED 538.443 SHS ON 07/24/2019 AT 11.85	6,380.55	6,380.55	6,380.55	

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PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 879.189 SHS ON 07/24/2019 AT 11.85	10,418.39	10,132.86	10,418.39	285.53
PURCHASED 119.11 SHS ON 07/31/2019 AT 11.75	1,399.54	1,399.54	1,399.54	
PURCHASED 548.577 SHS ON 07/31/2019 AT 11.75	6,445.78	6,445.78	6,445.78	
PURCHASED 118.34 SHS ON 08/07/2019 AT 11.66	1,379.85	1,379.85	1,379.84	
PURCHASED 565.868 SHS ON 08/07/2019 AT 11.66	6,598.02	6,598.02	6,598.02	
SOLD 367.386 SHS ON 08/07/2019 AT 11.66	4,283.72	4,234.81	4,283.72	48.91
SOLD 715.494 SHS ON 08/09/2019 AT 11.72	8,385.59	8,247.40	8,385.59	138.19
PURCHASED 119.055 SHS ON 08/14/2019 AT 11.59	1,379.85	1,379.85	1,379.85	
PURCHASED 585.669 SHS ON 08/14/2019 AT 11.59	6,787.90	6,787.90	6,787.90	
PURCHASED 118.439 SHS ON 08/23/2019 AT 11.65	1,379.81	1,379.81	1,379.81	
PURCHASED 573.142 SHS ON 08/23/2019 AT 11.65	6,677.11	6,677.11	6,677.10	
SOLD 315.963 SHS ON 08/27/2019 AT 11.68	3,690.45	3,642.33	3,690.45	48.12
PURCHASED 123.452 SHS ON 08/28/2019 AT 11.71	1,445.62	1,445.62	1,445.62	
PURCHASED 554.246 SHS ON 08/28/2019 AT 11.71	6,490.22	6,490.22	6,490.22	
PURCHASED 143.367 SHS ON 09/05/2019 AT 11.84	1,697.46	1,697.46	1,697.47	

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 550.936 SHS ON 09/05/2019 AT 11.84	6,523.08	6,523.08	6,523.08	
SOLD 253.165 SHS ON 09/09/2019 AT 11.85	3,000.00	2,918.99	3,000.01	81.01
PURCHASED 563.154 SHS ON 09/11/2019 AT 11.86	6,679.01	6,679.01	6,679.01	
PURCHASED 143.125 SHS ON 09/11/2019 AT 11.86	1,697.46	1,697.46	1,697.46	
PURCHASED 142.936 SHS ON 09/18/2019 AT 11.87	1,696.65	1,696.65	1,696.65	
PURCHASED 574.278 SHS ON 09/18/2019 AT 11.87	6,816.68	6,816.68	6,816.68	
SOLD 930.199 SHS ON 09/24/2019 AT 11.85	11,022.86	10,728.10	11,022.86	294.76
PURCHASED 141.676 SHS ON 09/25/2019 AT 11.83	1,676.03	1,676.03	1,676.03	
PURCHASED 556.648 SHS ON 09/25/2019 AT 11.83	6,585.15	6,585.15	6,585.15	
SOLD 1,249.913 SHS ON 09/25/2019 AT 11.83	14,786.47	14,417.11	14,786.47	369.36
PURCHASED 141.123 SHS ON 10/03/2019 AT 11.77	1,661.02	1,661.02	1,661.02	
PURCHASED 577.02 SHS ON 10/03/2019 AT 11.77	6,791.52	6,791.52	6,791.53	
SOLD 974.788 SHS ON 10/03/2019 AT 11.77	11,473.25	11,244.78	11,473.25	228.47
SOLD 646.509 SHS ON 10/07/2019 AT 11.80	7,628.81	7,457.88	7,628.81	170.93
PURCHASED 139.214 SHS ON 10/10/2019 AT 11.79	1,641.33	1,641.33	1,641.33	

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 558.986 SHS ON 10/10/2019 AT 11.79	6,590.44	6,590.44	6,590.44	
PURCHASED .417 SHS ON 10/10/2019 AT 11.7986	4.92	4.92	4.92	
PURCHASED 57.66 SHS ON 10/10/2019 AT 11.79	679.81	679.81	679.81	
SOLD 51.437 SHS ON 10/11/2019 AT 11.83	608.50	593.42	608.50	15.08
PURCHASED 139.816 SHS ON 10/17/2019 AT 11.88	1,661.02	1,661.02	1,661.01	
PURCHASED 553.712 SHS ON 10/17/2019 AT 11.88	6,578.10	6,578.10	6,578.10	
PURCHASED 142.806 SHS ON 10/23/2019 AT 11.90	1,699.39	1,699.39	1,699.39	
PURCHASED 556.2 SHS ON 10/23/2019 AT 11.90	6,618.78	6,618.78	6,618.78	
PURCHASED 143.324 SHS ON 10/30/2019 AT 11.96	1,714.16	1,714.16	1,714.16	
PURCHASED 564.673 SHS ON 10/30/2019 AT 11.96	6,753.49	6,753.49	6,753.49	
SOLD 1,788.005 SHS ON 11/04/2019 AT 12.03	21,509.70	20,637.32	21,509.70	872.38
PURCHASED 678.025 SHS ON 11/06/2019 AT 12.02	8,149.86	8,149.86	8,149.86	
PURCHASED 125.737 SHS ON 11/06/2019 AT 12.02	1,511.36	1,511.36	1,511.36	
PURCHASED 125.528 SHS ON 11/14/2019 AT 12.04	1,511.36	1,511.36	1,511.36	
PURCHASED 570.974 SHS ON 11/14/2019 AT 12.04	6,874.53	6,874.53	6,874.53	

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 236.502 SHS ON 11/14/2019 AT 12.04	2,847.49	2,730.87	2,847.48	116.62
PURCHASED 125.308 SHS ON 11/21/2019 AT 12.06	1,511.22	1,511.22	1,511.21	
PURCHASED 589.866 SHS ON 11/21/2019 AT 12.06	7,113.78	7,113.78	7,113.78	
SOLD 209.265 SHS ON 11/21/2019 AT 12.06	2,523.74	2,416.87	2,523.74	106.87
SOLD 306.959 SHS ON 11/22/2019 AT 12.07	3,705.00	3,545.17	3,705.00	159.83
PURCHASED 133.729 SHS ON 11/27/2019 AT 12.13	1,622.13	1,622.13	1,622.13	
PURCHASED 582.86 SHS ON 11/27/2019 AT 12.13	7,070.09	7,070.09	7,070.09	
SOLD .582 SHS ON 12/02/2019 AT 12.0619	7.02	6.72	7.02	0.30
PURCHASED 122.796 SHS ON 12/06/2019 AT 12.13	1,489.52	1,489.52	1,489.52	
PURCHASED 557.151 SHS ON 12/06/2019 AT 12.13	6,758.24	6,758.24	6,758.24	
PURCHASED 126.924 SHS ON 12/12/2019 AT 12.18	1,545.93	1,545.93	1,545.93	
PURCHASED 639.784 SHS ON 12/12/2019 AT 12.18	7,792.57	7,792.57	7,792.57	
SOLD 577.682 SHS ON 12/12/2019 AT 12.18	7,036.17	6,676.69	7,036.17	359.48
SOLD 578.522 SHS ON 12/12/2019 AT 12.18	7,046.40	6,686.40	7,046.40	360.00
SOLD 498.008 SHS ON 12/12/2019 AT 12.18	6,065.74	5,755.84	6,065.74	309.90

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 3,522.145 SHS ON 12/17/2019 AT 12.25	43,146.28	40,707.97	43,146.28	2,438.31
PURCHASED 95.218 SHS ON 12/19/2019 AT 12.2701	1,168.33	1,168.33	1,168.32	
PURCHASED 342.295 SHS ON 12/19/2019 AT 12.27	4,199.96	4,199.96	4,199.96	
PURCHASED 30.724 SHS ON 12/20/2019 AT 12.2901	377.60	377.60	377.60	
PURCHASED 231.556 SHS ON 12/20/2019 AT 12.29	2,845.82	2,845.82	2,845.82	
PURCHASED 125.685 SHS ON 12/24/2019 AT 12.30	1,545.92	1,545.92	1,545.93	
PURCHASED 569.385 SHS ON 12/24/2019 AT 12.30	7,003.43	7,003.43	7,003.44	
PURCHASED 81.34 SHS ON 12/31/2019 AT 11.85	963.88	963.88	963.88	
PURCHASED 371.235 SHS ON 12/31/2019 AT 11.85	4,399.14	4,399.14	4,399.13	
PURCHASED 3,049.108 SHS ON 12/31/2019 AT 11.83 FOR REINVESTMENT	36,070.95	36,070.95	36,131.93	
PURCHASED 3,024.98 SHS ON 12/31/2019 AT 11.83 FOR REINVESTMENT	35,785.51	35,785.51	35,846.01	
TOTAL	741,412.53	735,880.48	741,533.99	5,532.05
BLACKROCK HEALTH SCIENCES OPPS INV A				
PURCHASED 31.047 SHS ON 01/03/2019 AT 51.6797	1,604.50	1,604.50	1,604.51	
PURCHASED 2.602 SHS ON 01/03/2019 AT 51.6833	134.48	134.48	134.47	

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 29.304 SHS ON 01/10/2019 AT 54.6198	1,600.58	1,600.58	1,600.58	
PURCHASED 2.462 SHS ON 01/10/2019 AT 54.6304	134.50	134.50	134.47	
SOLD 11.303 SHS ON 01/10/2019 AT 54.6182	617.35	565.48	617.37	51.87
PURCHASED 29.621 SHS ON 01/16/2019 AT 55.3094	1,638.32	1,638.32	1,638.34	
PURCHASED 2.432 SHS ON 01/16/2019 AT 55.3043	134.50	134.50	134.51	
PURCHASED 29.03 SHS ON 01/23/2019 AT 55.9108	1,623.09	1,623.09	1,623.07	
PURCHASED 2.405 SHS ON 01/23/2019 AT 55.921	134.49	134.49	134.46	
PURCHASED 28.444 SHS ON 01/31/2019 AT 57.07	1,623.30	1,623.30	1,623.30	
PURCHASED 2.357 SHS ON 01/31/2019 AT 57.0683	134.51	134.51	134.51	
SOLD 1.344 SHS ON 01/31/2019 AT 57.0685	76.70	67.28	76.70	9.42
PURCHASED 15.018 SHS ON 02/01/2019 AT 57.1308	857.99	857.99	857.98	
PURCHASED 2.245 SHS ON 02/06/2019 AT 57.216	128.45	128.45	128.46	
PURCHASED 28.053 SHS ON 02/06/2019 AT 57.2199	1,605.19	1,605.19	1,605.19	
PURCHASED 9.421 SHS ON 02/07/2019 AT 56.6511	533.71	533.71	533.70	
PURCHASED 21.819 SHS ON 02/07/2019 AT 56.6502	1,236.05	1,236.05	1,236.05	

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PURCHASED 2.339 SHS ON 02/13/2019 AT 57.3151	134.06	134.06	134.07	
PURCHASED 28.787 SHS ON 02/13/2019 AT 57.3207	1,650.09	1,650.09	1,650.07	
SOLD 298.364 SHS ON 02/19/2019 AT 58.17	17,355.83	14,949.50	17,355.83	2,406.33
PURCHASED 2.32 SHS ON 02/21/2019 AT 57.7759	134.04	134.04	134.03	
PURCHASED 28.581 SHS ON 02/21/2019 AT 57.7698	1,651.12	1,651.12	1,651.12	
PURCHASED 2.305 SHS ON 02/27/2019 AT 58.1518	134.04	134.04	134.06	
PURCHASED 28.368 SHS ON 02/27/2019 AT 58.1599	1,649.88	1,649.88	1,649.88	
PURCHASED 2.351 SHS ON 03/06/2019 AT 57.014	134.04	134.04	134.05	
PURCHASED 28.935 SHS ON 03/06/2019 AT 57.0202	1,649.88	1,649.88	1,649.87	
PURCHASED 1.355 SHS ON 03/13/2019 AT 58.3764	79.10	79.10	79.09	
PURCHASED 2.3 SHS ON 03/14/2019 AT 58.2696	134.02	134.02	134.09	
PURCHASED 28.31 SHS ON 03/14/2019 AT 58.2798	1,649.90	1,649.90	1,650.47	
PURCHASED 28.3 SHS ON 03/14/2019 AT 58.3004	1,649.90	1,649.90	1,649.89	
PURCHASED 2.299 SHS ON 03/14/2019 AT 58.2949	134.02	134.02	134.03	
SOLD 28.31 SHS ON 03/14/2019 AT 58.2798	1,649.90	1,420.44	1,650.47	229.46

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SOLD 2.3 SHS ON 03/14/2019 AT 58.2696	134.02	115.40	134.09	18.62
PURCHASED 259.748 SHS ON 03/19/2019 AT 58.80	15,273.17	15,273.17	15,273.18	
PURCHASED 49.219 SHS ON 03/19/2019 AT 58.8005	2,894.10	2,894.10	2,894.08	
PURCHASED 30.147 SHS ON 03/20/2019 AT 58.4496	1,762.08	1,762.08	1,762.09	
PURCHASED 2.293 SHS ON 03/20/2019 AT 58.4605	134.05	134.05	134.03	
PURCHASED 2.332 SHS ON 03/27/2019 AT 57.4786	134.04	134.04	134.02	
PURCHASED 30.661 SHS ON 03/27/2019 AT 57.4697	1,762.08	1,762.08	1,762.09	
SOLD 64.096 SHS ON 03/29/2019 AT 58.3202	3,738.09	3,227.41	3,738.08	510.68
PURCHASED 2.297 SHS ON 04/03/2019 AT 58.3587	134.05	134.05	134.08	
PURCHASED 30.188 SHS ON 04/03/2019 AT 58.3702	1,762.08	1,762.08	1,762.07	
PURCHASED 2.29 SHS ON 04/10/2019 AT 58.5371	134.05	134.05	134.03	
PURCHASED 29.835 SHS ON 04/10/2019 AT 58.5299	1,746.24	1,746.24	1,746.24	
PURCHASED 90.234 SHS ON 04/11/2019 AT 57.73	5,209.21	5,209.21	5,209.21	
SOLD 4.399 SHS ON 04/11/2019 AT 57.7358	253.98	221.79	253.95	32.19
PURCHASED 2.491 SHS ON 04/17/2019 AT 53.8177	134.06	134.06	134.07	

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PURCHASED 32.74 SHS ON 04/17/2019 AT 53.8204	1,762.08	1,762.08	1,762.07	
SOLD 45.359 SHS ON 04/24/2019 AT 54.9604	2,492.95	2,287.27	2,492.93	205.68
PURCHASED 31.727 SHS ON 04/25/2019 AT 55.5391	1,762.09	1,762.09	1,762.12	
PURCHASED 2.414 SHS ON 04/25/2019 AT 55.5302	134.05	134.05	134.07	
SOLD 31.904 SHS ON 04/26/2019 AT 56.1497	1,791.40	1,609.10	1,791.41	182.30
PURCHASED 30.6 SHS ON 05/03/2019 AT 56.5993	1,731.94	1,731.94	1,731.96	
PURCHASED 2.369 SHS ON 05/03/2019 AT 56.5893	134.06	134.06	134.09	
SOLD 1,454.984 SHS ON 05/06/2019 AT 57.01	82,948.64	73,399.50	82,948.64	9,549.14
PURCHASED 24.022 SHS ON 05/07/2019 AT 55.9404	1,343.80	1,343.80	1,343.79	
PURCHASED 2.392 SHS ON 05/08/2019 AT 56.0493	134.07	134.07	134.05	
PURCHASED 26.307 SHS ON 05/08/2019 AT 56.0402	1,474.25	1,474.25	1,474.24	
PURCHASED 26.553 SHS ON 05/15/2019 AT 55.521	1,474.25	1,474.25	1,474.22	
PURCHASED 2.701 SHS ON 05/15/2019 AT 55.5165	149.95	149.95	149.96	
SOLD .514 SHS ON 05/21/2019 AT 56.2257	28.90	25.94	28.89	2.96
PURCHASED 26.38 SHS ON 05/23/2019 AT 56.1107	1,480.20	1,480.20	1,480.18	

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PURCHASED 2.618 SHS ON 05/23/2019 AT 56.1039	146.88	146.88	146.90	
PURCHASED 2.693 SHS ON 05/30/2019 AT 55.6888	149.97	149.97	149.95	
PURCHASED 26.564 SHS ON 05/30/2019 AT 55.6791	1,479.06	1,479.06	1,479.08	
PURCHASED 2.65 SHS ON 06/05/2019 AT 56.5736	149.92	149.92	149.91	
PURCHASED 26.146 SHS ON 06/05/2019 AT 56.5693	1,479.06	1,479.06	1,479.08	
PURCHASED 25.554 SHS ON 06/12/2019 AT 57.67	1,473.70	1,473.70	1,473.70	
PURCHASED 2.547 SHS ON 06/12/2019 AT 57.6639	146.87	146.87	146.89	
PURCHASED 2.479 SHS ON 06/19/2019 AT 59.2618	146.91	146.91	146.91	
PURCHASED 24.857 SHS ON 06/19/2019 AT 59.2598	1,473.02	1,473.02	1,473.03	
SOLD 27.385 SHS ON 06/24/2019 AT 59.3705	1,625.86	1,383.75	1,625.85	242.11
PURCHASED 2.513 SHS ON 06/26/2019 AT 58.4401	146.86	146.86	146.88	
PURCHASED 25.213 SHS ON 06/26/2019 AT 58.45	1,473.70	1,473.70	1,473.70	
SOLD 12.97 SHS ON 07/02/2019 AT 59.8497	776.25	655.54	776.25	120.71
PURCHASED 2.434 SHS ON 07/03/2019 AT 60.3369	146.86	146.86	146.84	
PURCHASED 24.421 SHS ON 07/03/2019 AT 60.33	1,473.32	1,473.32	1,473.32	

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DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 1,495.494 SHS ON 07/08/2019 AT 59.57	89,086.58	75,609.94	89,086.58	13,476.64
PURCHASED 20.306 SHS ON 07/10/2019 AT 59.899	1,216.31	1,216.31	1,216.33	
PURCHASED 2.452 SHS ON 07/10/2019 AT 59.8899	146.85	146.85	146.87	
SOLD 5.552 SHS ON 07/12/2019 AT 59.7785	331.89	280.78	331.90	51.11
PURCHASED 20.313 SHS ON 07/17/2019 AT 59.9306	1,217.37	1,217.37	1,217.36	
PURCHASED 2.662 SHS ON 07/17/2019 AT 59.9399	159.56	159.56	159.53	
PURCHASED 2.648 SHS ON 07/24/2019 AT 60.2606	159.57	159.57	159.59	
PURCHASED 20.176 SHS ON 07/24/2019 AT 60.2701	1,216.01	1,216.01	1,216.01	
PURCHASED 20.324 SHS ON 07/31/2019 AT 59.8312	1,216.01	1,216.01	1,215.98	
PURCHASED 2.668 SHS ON 07/31/2019 AT 59.8201	159.60	159.60	159.63	
PURCHASED 20.135 SHS ON 08/07/2019 AT 59.33	1,194.61	1,194.61	1,194.61	
PURCHASED 2.69 SHS ON 08/07/2019 AT 59.3197	159.57	159.57	159.60	
PURCHASED 18.795 SHS ON 08/14/2019 AT 58.7608	1,104.41	1,104.41	1,104.39	
PURCHASED 2.715 SHS ON 08/14/2019 AT 58.7698	159.56	159.56	159.53	
PURCHASED 2.728 SHS ON 08/23/2019 AT 58.5007	159.59	159.59	159.59	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 18.278 SHS ON 08/23/2019 AT 58.5015	1,069.29	1,069.29	1,069.26	
PURCHASED 2.704 SHS ON 08/28/2019 AT 59.02	159.59	159.59	159.62	
PURCHASED 18.304 SHS ON 08/28/2019 AT 59.0314	1,080.51	1,080.51	1,080.49	
PURCHASED 18.099 SHS ON 09/05/2019 AT 59.70	1,080.51	1,080.51	1,080.51	
PURCHASED 2.673 SHS ON 09/05/2019 AT 59.7007	159.58	159.58	159.58	
PURCHASED 15.456 SHS ON 09/11/2019 AT 59.3685	917.60	917.60	917.62	
PURCHASED 2.688 SHS ON 09/11/2019 AT 59.3713	159.59	159.59	159.59	
PURCHASED 2.682 SHS ON 09/18/2019 AT 59.5004	159.58	159.58	159.58	
PURCHASED 14.757 SHS ON 09/18/2019 AT 59.5006	878.05	878.05	878.04	
PURCHASED 2.712 SHS ON 09/25/2019 AT 58.8274	159.54	159.54	159.55	
PURCHASED 14.93 SHS ON 09/25/2019 AT 58.8285	878.31	878.31	878.33	
PURCHASED 2.78 SHS ON 10/03/2019 AT 57.3777	159.51	159.51	159.49	
PURCHASED 15.443 SHS ON 10/03/2019 AT 57.3716	885.99	885.99	885.96	
PURCHASED 14.332 SHS ON 10/10/2019 AT 57.6891	826.80	826.80	826.81	
PURCHASED 2.767 SHS ON 10/10/2019 AT 57.6798	159.60	159.60	159.63	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
SOLD 5.287 SHS ON 10/11/2019 AT 58.0764	307.05	268.15	307.07	38.90
PURCHASED 2.677 SHS ON 10/17/2019 AT 59.604	159.56	159.56	159.55	
PURCHASED 13.204 SHS ON 10/17/2019 AT 59.5994	786.95	786.95	786.96	
PURCHASED 12.68 SHS ON 10/23/2019 AT 59.9606	760.30	760.30	760.29	
PURCHASED 2.655 SHS ON 10/23/2019 AT 59.9661	159.21	159.21	159.19	
PURCHASED 11.38 SHS ON 10/30/2019 AT 61.7127	702.29	702.29	702.26	
PURCHASED 1.543 SHS ON 10/30/2019 AT 61.7239	95.24	95.24	95.22	
PURCHASED 11.374 SHS ON 11/06/2019 AT 61.3909	698.26	698.26	698.25	
PURCHASED 1.551 SHS ON 11/06/2019 AT 61.3991	95.23	95.23	95.22	
PURCHASED 11.257 SHS ON 11/14/2019 AT 62.2422	700.66	700.66	700.64	
PURCHASED 1.53 SHS ON 11/14/2019 AT 62.2288	95.21	95.21	95.23	
SOLD 5.117 SHS ON 11/14/2019 AT 62.2455	318.51	259.76	318.48	58.75
PURCHASED 1.489 SHS ON 11/21/2019 AT 63.9557	95.23	95.23	95.22	
PURCHASED 11.056 SHS ON 11/21/2019 AT 63.9508	707.04	707.04	707.03	
PURCHASED 1.46 SHS ON 11/27/2019 AT 65.226	95.23	95.23	95.22	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 10.822 SHS ON 11/27/2019 AT 65.2227	705.84	705.84	705.81	
PURCHASED 2.54 SHS ON 12/02/2019 AT 64.6024	164.09	164.09	164.08	
PURCHASED 48.558 SHS ON 12/06/2019 AT 62.7503 FOR REINVESTMENT	3,047.03	3,047.03	3,064.50	
PURCHASED 4.396 SHS ON 12/06/2019 AT 62.7434 FOR REINVESTMENT	275.82	275.82	277.43	
PURCHASED 569.707 SHS ON 12/06/2019 AT 62.75 FOR REINVESTMENT	35,749.12	35,749.12	35,954.21	
PURCHASED 1.461 SHS ON 12/06/2019 AT 63.1075	92.20	92.20	92.20	
PURCHASED 10.947 SHS ON 12/06/2019 AT 63.1077	690.84	690.84	690.87	
PURCHASED 1.461 SHS ON 12/12/2019 AT 63.1006	92.19	92.19	92.19	
PURCHASED 10.701 SHS ON 12/12/2019 AT 63.0988	675.22	675.22	675.23	
PURCHASED 15.439 SHS ON 12/12/2019 AT 63.0993	974.19	974.19	974.20	
PURCHASED 13.659 SHS ON 12/12/2019 AT 63.0983	861.86	861.86	861.88	
PURCHASED 111.508 SHS ON 12/12/2019 AT 63.1001	7,036.17	7,036.17	7,036.15	
PURCHASED 1.044 SHS ON 12/19/2019 AT 64.2625	67.09	67.09	67.09	
PURCHASED .021 SHS ON 12/19/2019 AT 64.2857	1.35	1.35	1.35	

Statement Period 01/01/2019 through 12/31/2019
Account Number 7150011263
FIDELITY PERSONAL TRUST CO TTEE
SILVERLINING INTERIORS, INC.
401(K) PLAN

Schedule Of Reportable Transactions

PLAN NUMBER: EIN NUMBER: 13-3402118

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
PURCHASED 1.404 SHS ON 12/20/2019 AT 64.6795	90.81	90.81	90.80	
PURCHASED 9.602 SHS ON 12/20/2019 AT 64.6719	620.98	620.98	620.96	
PURCHASED 1.419 SHS ON 12/24/2019 AT 64.9612	92.18	92.18	92.15	
PURCHASED 10.516 SHS ON 12/24/2019 AT 64.942	682.93	682.93	682.91	
PURCHASED 18.566 SHS ON 12/31/2019 AT 64.5804	1,199.00	1,199.00	1,198.99	
TOTAL	355,260.12	328,073.25	355,485.30	27,186.87
TOTAL MUTUAL FUNDS/EQUITY	1,096,672.65	1,063,953.73	1,097,019.29	32,718.92
TOTAL SECURITY TRANSACTIONS EXCEEDING 5%		1,063,953.73		

SILVERLINING INTERIORS, INC. 401(k) PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEAR ENDED DECEMBER 31, 2019

SILVERLINING INTERIORS, INC. 401(k) PLAN
FOR THE YEAR ENDED DECEMBER 31, 2019

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Accountants and Advisors

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee
SilverLining Interiors, Inc. 401(k) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of SilverLining Interiors, Inc. 401(k) Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2019, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with 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.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Fidelity Personal Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2019, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2019 financial statements. Accordingly, we do not express an opinion on the 2019 financial statements referred to in the first paragraph.

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Other Matter - Supplemental Schedules

The supplemental schedule H, line 4i - assets (held at end of year) as of December 31, 2019 and schedule H, Line 4j - reportable transactions as of December 31, 2019, are required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

Other Matter - 2018 Financial Statements

The financial statements of the Plan as of December 31, 2018, were audited by predecessor auditors. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Personal Trust Company, the trustee of the Plan. Their report, dated September 26, 2019, indicated that (a) because of the significance of the information that they did not audit, they were unable to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and, accordingly, they did not express an opinion on the financial statements and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the trustee, were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

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

The form and content of the information included in the 2019 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

CitrinCooperman & Company, LLP
CERTIFIED PUBLIC ACCOUNTANTS

New York, New York
October 12, 2020

SILVERLINING INTERIORS, INC. 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018

	2019	2018
Assets:		
Investments:		
Investments at fair value	$ 8,763,949	$ 6,649,426
Receivable:		
Notes receivable from participants	198,115	207,020
Total assets	8,962,064	6,856,446
Liabilities:		
Other liabilities	-	7,414
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,962,064	$ 6,849,032

See accompanying notes to financial statements.

SILVERLINING INTERIORS, INC. 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2019

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 1,159,063
Interest and dividends	290,673
Total investment income	1,449,736
Interest income on notes receivable from participants	9,330
Contributions:	
Participant	454,887
Employer	417,240
Rollover	104,184
Total contributions	976,311
Total additions	2,435,377
Deductions from net assets attributed to:	
Benefits paid to participants	295,290
Deemed distributions	12,394
Administrative expenses	14,661
Total deductions	322,345
Net increase in net assets available for benefits	2,113,032
Net assets available for benefits - beginning of year	6,849,032
NET ASSETS AVAILABLE FOR BENEFITS - END OF YEAR	$ 8,962,064

See accompanying notes to financial statements.

NOTE 1. DESCRIPTION OF PLAN

The following description of SilverLining Interiors, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of Silverlining Interiors, Inc. and its affiliates, Premium Grade Millwork Corp. and Metropolitan Painting and Interiors, Inc. (collectively, the "Company" or "Plan Sponsor"). The Plan is offered to all employees of the Company who are at least 21 years of age and have completed three months of service. Eligible employees are enrolled into the Plan on the first day of the month after eligibility requirements are met. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

Participants may contribute a portion of their annual eligible compensation as a pre-tax deferral, up to the maximum allowed by the Internal Revenue Code ("IRC"), as defined in the Plan. The Plan also allows participants to make after-tax Roth contributions subject to certain limitations determined by the IRC. Participants who have attained the age of 50 before the end of the Plan year are eligible to make catch-up contributions not to exceed IRC limits. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (rollovers). Participants direct the investment of their contributions into various investment options offered by the Plan.

The Plan includes an auto enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 3% of eligible compensation and their contributions invested in a designated balanced fund until changed by the participant.

Participants are eligible to receive safe harbor matching contributions after completing one year of service with the Company and upon attaining 21 years of age. Participants who are eligible to receive employer matching contributions and who are employed at the Company as of the last day of the year, may be entitled to an additional discretionary profit-sharing contribution.

The Company contributes safe harbor matching contributions in an amount equal to 3% of a participant's eligible compensation contributed to the Plan. Employer safe harbor matching contributions are subject to certain limitations under the IRC. For the year ended December 31, 2019, the Company made safe harbor matching contributions of $417,240.

The Company may also elect to contribute a discretionary profit sharing contribution on behalf of non-highly compensated participants, as defined by the Plan document. Employer discretionary profit sharing contributions are subject to certain limitations under the IRC. The Company did not make any discretionary profit sharing contributions during the year ended December 31, 2019.

NOTE 1. DESCRIPTION OF PLAN (CONTINUED)

Participant accounts

Each participant's account is credited with the participant's contribution, the Company's contribution, an allocation of investment earnings or losses, and an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions and the Company's safe harbor matching contributions plus actual earnings thereon. Vesting of the Company's discretionary profit sharing contributions and related earnings vest according to the following schedules:

Years of Vesting Service, as Defined	Vesting Interest
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	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 account balance. The maximum term of a note for general purpose may not exceed five years. Participants are allowed to have two outstanding notes at any given time. Principal and interest are paid ratably through payroll deductions. The notes are secured by the balance in the participant's account and bear interest at a rate of prime rate plus 1%, which is commensurate with local prevailing rates as determine by the Plan administrator.

Payment of benefits

Participants may receive all or a portion of their account balance if they terminate employment, become disabled, reach age 59-1/2 or on account of financial hardship, as defined in the IRC. Benefits may be paid in the form of a lump sum, partial payments, or installment payments.

The Plan allows for hardship withdrawals from a participant’s elective deferral account. During the year ended December 31, 2019, the Plan was restated and amended to no longer require participants to try to obtain a Plan loan before requesting a hardship withdrawal, to no longer suspend deferral contributions for a six-month period after receiving a hardship withdrawal, and to include all earnings on elective deferral contributions as part of a hardship withdrawal.

Forfeited accounts

Forfeitures of the non-vested portion of terminated participants' accounts are used to pay administrative expenses or reduce future employer contributions. At December 31, 2019 and 2018, forfeited nonvested accounts totaled $-. For the year ended December 31, 2019, there were no forfeitures used to reduce employer matching contributions.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting

The accompanying financial statements of the Plan are prepared using the accrual method of accounting, in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Use of estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits at the date of the financial statements and changes in net assets available for benefits during the year. Accordingly, actual results could differ from those estimates. Any adjustments applied to estimated amounts are recognized in the year such adjustments are determined.

Investment valuation and income recognition

The Plan's investments are stated 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.

The investment in collective trust fund is valued at the net asset value (the "NAV") per unit, as determined by the trustee at year end. The NAV is used as the practical expedient to estimate fair value and is based on the fair value of the underlying investment held by the fund, less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV.

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

Management fees and operating expenses charged to the Plan for investments are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected in the net appreciation or depreciation in the fair market value of such investments.

Fair value measurements

U.S. GAAP defines fair value and established 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 measurement) and the lowest priority to unobservable inputs (Level 3 measurement).

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Fair value measurements (continued)

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

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

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

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

The 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 December 31, 2019 and 2018.

Money Market Funds: Valued at the quoted price reported in an active market in which the individual security is traded.

Mutual Funds: The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily NAV and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Common Collective Trust Fund: is valued using NAV. The NAV of a common collective investment trust fund is based on the market values of the underlying securities in an active market. The beneficial interest of each participant is represented in units. Units are issued and redeemed daily at the fund's closing NAV.

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

Notes receivable from participants

Notes receivable from participant are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2019 and 2018. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Administrative expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants and in-service withdrawal processing fees are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation (depreciation) in fair value of investments.

Payment of benefits

Benefits are recorded when paid by the Plan.

Reclassifications

Certain amounts in the prior year financial statements have been reclassified to conform to the current year presentation. These reclassification adjustments had no effect on the Plan's previously reported net increase in net assets available for benefits.

Subsequent events

The Plan has evaluated subsequent events through October 12, 2020, the date on which these financial statements were available to be issued, and has determined that, except for those described in Note 10, there are no subsequent events that require disclosure under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 855, *Subsequent Events*.

NOTE 3. FAIR VALUE MEASUREMENTS

The following tables summarize the Plan's investments measured at fair value on a recurring basis, categorized by U.S. GAAP's valuation hierarchy, at December 31, 2019 and 2018:

Description	Total at December 31, 2019	Level 1	Level 2	Level 3
Assets in fair value hierarchy:				
Money market funds	$ 10,655	$ 10,655	$ -	$ -
Mutual funds	7,273,194	7,273,194	-	-
Total assets in fair value hierarchy	7,283,849	$ 7,283,849	$ -	$ -
Investments measured at net asset value*	1,480,100			
Total investments at fair value	$ 8,763,949			

NOTE 3. FAIR VALUE MEASUREMENTS (CONTINUED)

Description	Total at December 31, 2018	Level 1	Level 2	Level 3
Assets in fair value hierarchy:				
Money market funds	$ 6,633	$ 6,633	$ -	$ -
Mutual funds	5,394,185	5,394,185	-	-
Total assets in fair value hierarchy	5,400,818	$ 5,400,818	$ -	$ -
Investments measured at net asset value*	1,248,608			
Total investments at fair value	$ 6,649,426			

*In accordance with Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits. See Note 4 for further information.

During the year ended December 31, 2019, there were no transfers between levels of the fair value hierarchy.

NOTE 4. NET ASSET VALUE PER SHARE

The following tables set forth a summary of the Plan's investments with a reported NAV per share at December 31, 2019 and 2018:

	Fair Value Estimated Using Net Asset Value per Share December 31, 2019				
Investment	Fair Value	Unfunded Commitments	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Common collective trust	$ 1,480,100	$ -	Daily	None	None

	Fair Value Estimated Using Net Asset Value per Share December 31, 2018				
Investment	Fair Value	Unfunded Commitments	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Common collective trust	$ 1,248,608	$ -	Daily	None	None

NOTE 5. INFORMATION CERTIFIED BY THE PLAN TRUSTEE

The following tables summarize investment and other asset information regarding the Plan as of December 31, 2019 and 2018, and for the year ended December 31, 2019, included in the Plan's financial statements and supplemental schedules, that were prepared by or derived from information prepared by Fidelity Personal Trust Company (the "Trustee"), and furnished to the Plan administrator. The Plan administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2019	2018
Investments:		
Money market funds*	$ 10,655	$ 6,633
Mutual funds	7,273,194	5,394,185
Common collective trust	1,480,100	1,248,608
Total certified assets	$ 8,763,949	$ 6,649,426
Net appreciation in fair value of investments	$ 1,159,063	
Interest and dividends	$ 290,673	

* Included in money market funds at December 31, 2019 and 2018, was $8,824 and $6,633, respectively, which were not certified by the trustee.

NOTE 6. 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 7. PARTY-IN-INTEREST TRANSACTIONS

Parties in interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Some administrative expenses of the Plan are paid directly by the Company. The Plan currently holds units of money market funds managed by the Trustee. The Trustee is the Plan’s service provider and, therefore, these transactions and the Plan’s payment of fees to the Trustee qualify as party-in-interest transactions. Notes receivable from participants also reflect party-in-interest transactions.

NOTE 8. PLAN TERMINATION

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

NOTE 9. TAX STATUS

The Plan has adopted a volume submitter plan ("VSP") which received an opinion letter from the Internal Revenue Service ("IRS") dated March 31, 2014, stating that the VSP is designed in accordance with the applicable sections of the IRC.

NOTE 9. TAX STATUS (CONTINUED)

Although the VSP has been amended since receiving the opinion letter, the Plan administrator and the Plan's tax counsel believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore, believe 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 (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2019 and 2018, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits in progress for any tax periods.

NOTE 10. SUBSEQUENT EVENTS

In January 2020, Principal Trust Company replaced Fidelity Personal Trust Company, as the new trustee and began providing third-party administrative and plan custodian services for the Plan.

During 2020, the World Health Organization has declared COVID-19 to constitute a "Public Health Emergency of International Concern." The pandemic has disrupted economic markets and the financial impact, duration and spread of the COVID-19 virus are uncertain at this time. The financial performance of the Plan's investments may be impacted by the market's response to the uncertainty of the situation, however, the duration of disruption and related financial impact cannot be reasonably estimated at this time.

In response to the COVID-19 pandemic, on March 27, 2020, the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act") was passed by Congress. The CARES Act provides immediate and temporary relief for retirement plan sponsors and their participants with respect to employer contributions, distributions and participant loans. The provisions of the CARES Act may be effective and operationalized immediately, prior to amending the plan document. Effective April 8, 2020, the Plan was amended to allow for coronavirus-related distributions, increased Plan loan limits and delayed Plan repayments, and waiver of 2020 required minimum distributions.

SUPPLEMENTAL SCHEDULES

SILVERLINING INTERIORS, INC. 401(k) PLAN
SCHEDULE H, LINE 4i - ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019
EIN #: 13-3402118
PLAN NUMBER: 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investments, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	BlackRock EAFE Equity Index CL R	Common collective trust fund	**	$ 7,437
	BlackRock Equity Index Fund CL R	Common collective trust fund	**	699,791
	BlackRock Mid Cap Equity Index Fund CL R	Common collective trust fund	**	4,235
	BlackRock Russell 2000 Index Fund CL R	Common collective trust fund	**	10,921
	BlackRock U.S. Debt Index CL R	Common collective trust fund	**	17,259
	Met Managed GIC ABG Trust	Common collective trust fund	**	740,457
*	Fidelity Government Cash Reserves	Money market fund	**	8,824
*	Fidelity Government Money Market	Money market fund	**	1,831
	Alger Capital Appreciation A	Mutual fund	**	919,378
	American Funds 2015 Target Date Retire R4	Mutual fund	**	1,852,093
	American Funds 2025 Target Date Retire R4	Mutual fund	**	54,103
	American Funds 2035 Target Date Retire R4	Mutual fund	**	103,880
	American Funds 2045 Target Date Retire R4	Mutual fund	**	34,021
	American Funds 2055 Target Date Retire R4	Mutual fund	**	119,470
	American Balanced CL R4	Mutual fund	**	387,482
	American New World Fund R4	Mutual fund	**	47,774
	BlackRock Health Sciences Opp PRT A	Mutual fund	**	1,057,652
	BlackRock Total Return Fund CL A	Mutual fund	**	175,233
	Carillon Eagle Small Cap Growth CL A	Mutual fund	**	140,102
	JHancock Disciplined Value Mid Cap Fund CL R2	Mutual fund	**	677,499
	MFS Global Total Return A	Mutual fund	**	704,172
	MFS International Diversification Fund A	Mutual fund	**	302,767
	MFS Mid Cap Growth Class A	Mutual fund	**	260,160
	Putnam Equity Income Class A	Mutual fund	**	437,408
				8,763,949
*	Notes receivable from participants	Outstanding participant loans (interest rate range of 4.50% - 6.50%) with maturity dates through November 2024	$0	198,115
	TOTAL			$ 8,962,064

* Represents a party-in-interest to the Plan as defined by ERISA.
** Cost information has been omitted for participant-directed investments.

SILVERLINING INTERIORS, INC. 401(k) PLAN
SCHEDULE H, LINE 4j - REPORTABLE TRANSACTIONS
DECEMBER 31, 2019
EIN: 13-3402118
PLAN NUMBER: 002

Series transactions, greater than 5% of assets:

(a) Identity of Party Involved	(b) Description of Asset (Including Interest Rate and Maturity in Case of Loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or Loss
American Funds 2015 Target Date Retire R4	Mutual Fund	$ 490,002	$ -	$ -	$ -	$ 490,002	$ -	$ -
American Funds 2015 Target Date Retire R4	Mutual Fund	$ 245,879	$ 251,411	$ -	$ -	$ 245,879	$ 251,411	$ 5,532
BlackRock Health Sciences Opp PRT A	Mutual Fund	$ 151,726	$ -	$ -	$ -	$ 151,726	$ -	$ -
BlackRock Health Sciences Opp PRT A	Mutual Fund	$ 176,347	$ 203,534	$ -	$ -	$ 176,347	$ 203,534	$ 27,187

See independent auditor's report.