# 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.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
MCKEON ROLLING STEEL DOOR CO, INC 401(K) PROFIT SHARING PLAN

**1b** Three-digit plan number (PN) ▶ 001

**1c** Effective date of plan 01/01/2015

**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)
MCKEON ROLLING STEEL DOOR CO, INC

44 SAWGRASS DRIVE
BELLPORT, NY 11713

**2b** Employer Identification Number (EIN)
13-3384605

**2c** Plan Sponsor's telephone number
631-803-3000

**2d** Business code (see instructions)
331310

**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. | 10/15/2020 | JOSEPH J. MCKEON |
| | **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:<br>**a** Sponsor's name<br>**c** Plan Name | **4b** EIN<br>**4d** PN | |
| **5** Total number of participants at the beginning of the plan year | **5** | 124 |
| **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)** | 122 |
| **a(2)** Total number of active participants at the end of the plan year | **6a(2)** | 119 |
| **b** Retired or separated participants receiving benefits | **6b** | 0 |
| **c** Other retired or separated participants entitled to future benefits | **6c** | 4 |
| **d** Subtotal. Add lines **6a(2)**, **6b**, and **6c** | **6d** | 123 |
| **e** Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 0 |
| **f** Total. Add lines **6d** and **6e**. | **6f** | 123 |
| **g** Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 45 |
| **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 2K 2T 3D

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

| **9a** Plan funding arrangement (check all that apply) | | **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)** [ ] **A** (Insurance Information)
- **(4)** [ ] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

**11c** Enter the Receipt Confirmation Code for the 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 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
MCKEON ROLLING STEEL DOOR CO, INC 401(K) PROFIT SHARING PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
MCKEON ROLLING STEEL DOOR CO, INC

**D** Employer Identification Number (EIN)
13-3384605

## 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) | | 26550 |
| **(2)** Participant contributions | 1b(2) | | 0 |
| **(3)** Other | 1b(3) | | |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 0 | 354 |
| **(2)** U.S. Government securities | 1c(2) | | |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | | |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | | |
| **(9)** Value of interest in common/collective trusts | 1c(9) | | |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | | |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | | |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | | |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | 723843 | 1270422 |
| **(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 | 723843 | 1297326 |
| | **Liabilities** | | | |
| **g** | Benefit claims payable | 1g | | |
| **h** | Operating payables | 1h | | |
| **i** | Acquisition indebtedness | 1i | | |
| **j** | Other liabilities | 1j | | 542 |
| **k** | Total liabilities (add all amounts in lines 1g through1j) | 1k | 0 | 542 |
| | **Net Assets** | | | |
| **l** | Net assets (subtract line 1k from line 1f) | 1l | 723843 | 1296784 |

## 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) | 167398 | |
| | **(B)** Participants | 2a(1)(B) | 284573 | |
| | **(C)** Others (including rollovers) | 2a(1)(C) | 0 | |
| | **(2)** Noncash contributions | 2a(2) | 0 | |
| | **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 451971 |
| **b** | **Earnings on investments:** | | | |
| | **(1)** Interest: | | | |
| | **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 0 | |
| | **(B)** U.S. Government securities | 2b(1)(B) | 0 | |
| | **(C)** Corporate debt instruments | 2b(1)(C) | 0 | |
| | **(D)** Loans (other than to participants) | 2b(1)(D) | 0 | |
| | **(E)** Participant loans | 2b(1)(E) | 0 | |
| | **(F)** Other | 2b(1)(F) | 0 | |
| | **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 0 |
| | **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| | **(B)** Common stock | 2b(2)(B) | 0 | |
| | **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | 56990 | |
| | **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 56990 |
| | **(3)** Rents | 2b(3) | | |
| | **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 109980 | |
| | **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 0 | |
| | **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 109980 |
| | **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | 0 | |
| | **(B)** Other | 2b(5)(B) | 0 | |
| | **(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) | | 0 |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | 0 |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | 0 |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | 0 |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | 0 |
| c Other income | 2c | | 0 |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 618941 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 38916 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | 0 | |
| (3) Other | 2e(3) | 0 | |
| (4) Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 38916 |
| f Corrective distributions (see instructions) | 2f | | 0 |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 0 |
| h Interest expense | 2h | | 0 |
| i Administrative expenses: (1) Professional fees | 2i(1) | 7084 | |
| (2) Contract administrator fees | 2i(2) | 0 | |
| (3) Investment advisory and management fees | 2i(3) | 0 | |
| (4) Other | 2i(4) | 0 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 7084 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 46000 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 572941 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 0 |
| (2) From this plan | 2l(2) | | 0 |

## 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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

**(1)** Name: GRASSI & CO., CPAS, P.C. **(2)** EIN: 11-3266576

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

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

## Part IV Compliance Questions

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

During the plan year:

| | | 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 | | 5272 |
| **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 | | 73000 |
| 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 | X | | |

**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
MCKEON ROLLING STEEL DOOR CO, INC 401(K) PROFIT SHARING PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
MCKEON ROLLING STEEL DOOR CO, INC

**D** Employer Identification Number (EIN)
13-3384605

## Part I Distributions

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

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

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

EIN(s): 20-3691658

**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** 2

## 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_____

# MCKEON ROLLING STEEL DOOR CO., 401(k) PROFIT SHARING PLAN INC.

## FINANCIAL STATEMENTS

## DECEMBER 31, 2019

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN

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GRASSI
ADVISORS & ACCOUNTANTS

# INDEPENDENT AUDITORS' REPORT

To The Board of Trustees
McKeon Rolling Steel Door Co., Inc. 401(k) Profit Sharing Plan
Bellport, New York

## Report on the Financial Statements

We were engaged to audit the accompanying financial statements of McKeon Rolling Steel Door Co., Inc. 401(k) Profit Sharing Plan (the "Plan"), which comprise the statement of net assets available for benefits at December 31, 2019, and the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

## Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

## Auditors' Responsibility

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

## Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Mid Atlantic Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that Mid Atlantic Trust Company holds certain Plan 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 financial statements. Accordingly, we do not express an opinion on these financial statements.



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MOORE
AN INDEPENDENT FIRM
ASSOCIATED WITH MOORE
GLOBAL NETWORK LIMITED

**Other Matter - 2018 Financial Statements**

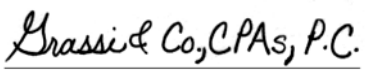
Plan management is responsible for accompanying statement of net assets available for benefits of McKeon Rolling Steel Door Co., Inc. 401(k) Profit Sharing Plan as of December 31, 2018 in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statement nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by Plan management. Accordingly, we do not express an opinion, a conclusion, or provide any form of assurance on the financial statement.

**Other Matter - Supplemental Schedules**

The supplemental Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year) at December 31, 2019, Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions for the year ended December 31, 2019 and Schedule H, Part IV, Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2019 are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 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.

**Report on Form and Content in Compliance With DOL Rules and Regulations - 2019**

The form and content of the information included in the 2019 financial statements and supplemental schedules, 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 Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



GRASSI & CO., CPAs, P.C.

Jericho, New York
October 14, 2020

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018

ASSETS

| | 2019 | 2018 (Unaudited) |
|---|---|---|
| CASH AND CASH EQUIVALENTS | $ 354 | $ - |
| INVESTMENTS: | | |
| Investments at fair value | 1,270,422 | 723,843 |
| RECEIVABLES: | | |
| Employer contributions | 26,550 | 21,091 |
| TOTAL ASSETS | 1,297,326 | 744,934 |
| LIABILITIES | | |
| EXCESS CONTRIBUTIONS PAYABLE | 542 | - |
| NET ASSETS AVAILABLE FOR BENEFITS | $ 1,296,784 | $ 744,934 |

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

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2019

| | | |
|---|---|---|
| ADDITIONS TO PLAN ASSETS ATTRIBUTED TO: | | |
| Investment income: | | |
| Net appreciation in fair value of investments | $ | 109,980 |
| Dividend income | | 56,990 |
| Total investment income | | 166,970 |
| Contributions: | | |
| Employer contributions | | 146,307 |
| Participant contributions | | 284,573 |
| Total contributions | | 430,880 |
| Total Additions | | 597,850 |
| DEDUCTIONS FROM PLAN ASSETS ATTRIBUTED TO: | | |
| Benefits paid to participants | | 38,916 |
| Administrative expenses | | 7,084 |
| Total Deductions | | 46,000 |
| NET INCREASE | | 551,850 |
| NET ASSETS AVAILABLE FOR BENEFITS: | | |
| Beginning of year | | 744,934 |
| End of year | $ | 1,296,784 |

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

## Note 1 - Description of Plan

The following description of McKeon Rolling Steel Door Co., Inc. 401(k) Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

### General

The Plan, which was established on January 1, 2015, and restated on January 1, 2018 and November 22, 2019, is a defined contribution profit sharing plan covering all eligible employees of McKeon Rolling Steel Door Co., Inc., McKeon Management Group, Inc., McKeon Door West, Inc., McKeon Door East, Inc., McKeon Management Group, Inc., McKeon Door of Nevada, Inc. Quality Installations East, Inc., and McKeon Door of DC, Inc. (collectively, the "Sponsor") who have three months of service and are age 21 or older.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). Prior to November 22, 2019, the Plan used Mid Atlantic Trust Company ("Mid Atlantic") as the custodian and Paychex Retirement Services as the recordkeeper. Subsequent to November 22, 2019, the Plan used Capital Bank & Trust Company ("Capital Bank") as the custodian, and its affiliate American Funds Service Company ("American Funds") as the recordkeeper.

The Board of Trustees is responsible for oversight of the Plan. The Sponsor determines the appropriateness of the Plan's investment offerings, and monitors investment performance. Mid Atlantic is also the trustee over certain investments of the Plan that were in their custody at December 31, 2019, see Note 3. The investments in custody of Capital Bank are not certified.

### Contributions

Each year, participants may contribute up to 92% of eligible annual compensation, as defined in the Plan, provided that such contributions do not exceed the limitations under the Internal Revenue Code (the "Code") for 2019 of $19,000, plus a maximum of $6,000 in catch-up contributions for participants who have attained age 50 before the end of the Plan year. Contributions may be made as a pre-tax deferral or after-tax (Roth) deferral. Highly compensated employees are subject to additional limits set forth in the Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor makes safe harbor matching contributions of 100% of the first 3% of eligible compensation plus an additional 50% for the next 2% of eligible compensation, not to exceed 5% of the participant's eligible compensation. The matching contribution is invested as directed by the participant. In 2019, The Sponsor made matching contributions of $146,307.

The Sponsor, at its sole discretion, may make profit sharing contributions to participants who are employed on the last day of the plan year and have completed at least three consecutive months of eligibility service beginning on the employee's date of hire. The Sponsor has not made such contributions during the year ended December 31, 2019.

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

Participant Accounts

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

Vesting

Participants are immediately vested in their contributions and Sponsor safe harbor matching contributions plus actual earnings thereon. Vesting in the Sponsor's profit sharing contribution portion of their accounts is based on years of continuous service as follows:

| Years of Service | Vesting Percentage |
|---|---|
| Less than 2 years | 0% |
| 2 | 20% |
| 3 | 40% |
| 4 | 60% |
| 5 | 80% |
| 6 | 100% |

In addition, a participant becomes 100% vested in all allocated Sponsor contributions upon death, disability or the attainment of age 65 while employed by the Sponsor.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at two percentage points above the prime rate, as defined by the Plan. The interest rate is determined as of the date of origination and is fixed for the loan term. Principal and interest is paid ratably through monthly payroll deductions over a period not to exceed five years. Prior to the Plan restatement on November 22, 2019, participants were unable to borrow from their fund accounts in the form of a loan.

Excess Contributions Payable

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service ("IRS") are recorded as a liability with a corresponding reduction to contributions. The Plan did not distribute the 2019 excess contributions to the applicable participants prior to March 15, 2020.

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

Payment of Benefits

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

Forfeitures

At December 31, 2019 and 2018, forfeited nonvested accounts totaled $7,621 and $0, respectively. These accounts will be used to offset employer safe harbor contributions. During the year ended December 31, 2019, no forfeitures were used to reduce employer safe harbor contributions from forfeited nonvested accounts.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan administrator determines the Plan's valuation policies utilizing information provided by the Plan's investment advisers. See Note 4 for a discussion of fair value measurements.

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

Payment of Benefits

Benefit payments are recorded when paid.

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

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Sponsor and are excluded from these financial statements. Investment-related expenses are included in net appreciation or depreciation in fair value of investments. Certain administrative functions are performed by officers or employees of the Sponsor. No such officer or employee receives compensation from the Plan.

Note 3 - Information Prepared and Certified by Trustee

The following information included in the accompanying financial statements was obtained from data that has been prepared and certified as complete and accurate by Mid Atlantic Trust Company, the trustee of the Plan, as of December 31, 2019 and 2018, and for the year ended December 31, 2019. This information has not been audited by the independent auditors.

| | 2019 | 2018 |
|---|---|---|
| Investments at fair value: | | |
| Mutual funds | $ 558 | $ 723,843 |
| Cash and cash equivalents | $ 33 | $ - |

| | |
|---|---|
| Investment Income: | |
| Net appreciation in fair value of investments | $ 105,232 |
| Dividend income | 12,661 |
| | $ 117,893 |

Note 4 - Fair Value Measurements

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

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

Note 4 - Fair Value Measurements (cont'd.)

Level 2 - Inputs to the valuation methodology include:

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

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

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

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.

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

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although 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.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value at December 31, 2019 and 2018. Classification within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. For the year ended December 31, 2019, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3.

| | Assets at Fair Value at December 31, 2019 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual funds | $1,270,422 | $ - | $ - | $ 1,270,422 |
| Total Assets at Fair Value | $1,270,422 | $ - | $ - | $ 1,270,422 |

| | Assets at Fair Value at December 31, 2018 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual funds | $ 723,843 | $ - | $ - | $ 723,843 |
| Total Assets at Fair Value | $ 723,843 | $ - | $ - | $ 723,843 |

Note 5 - Related Party Transactions and Party-In-Interest Transactions

One custodian of the Plan assets is Capital Bank & Trust Company, and its affiliate American Funds Service Company, is the recordkeeper. Therefore, fees paid to these entities qualify as party-in-interest transactions.

Certain Plan investments are shares of mutual funds managed by American Funds Service Company. Therefore, the transactions related to these investments qualify as party-in-interest transactions. Fees paid by the Plan for investment management services are included in the net change in the fair value of investments.

The other custodian and trustee of the Plan assets is Mid Atlantic Trust Company, for investments held (see Note 3). Therefore, fees paid to this entity qualify as party-in-interest transactions.

Note 6 - Plan Termination

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

Note 7 - Tax Status

The Plan has adopted Benetech Inc. ("Benetech") volume submitter profit sharing plan. Accordingly, the Plan is permitted to rely on Benetech's opinion letters. The IRS has determined and informed Benetech by a letter dated March 31, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Code. Although the Plan has been amended since receiving the opinion letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code, and therefore, believes that the Plan is qualified and the related trust is tax exempt.

U.S. GAAP requires Plan management to evaluate uncertain tax positions taken by the Plan and recognize a tax benefit only if it is more likely than not that the tax position would be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that at December 31, 2019, 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 for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2016.

Note 8 - 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 9 - Delinquent Participant Contributions

During the year ended December 31, 2019, the Sponsor did not submit employee contributions of $5,272 in a timely manner. This requires the Sponsor to file notice with the IRS and the Department of Labor, which will result in the payment of an excise tax by the Sponsor.

Note 10 - Reconciliation of Financial Statements to the Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2019 and 2018 to the Form 5500:

| | 2019 | 2018 |
|---|---|---|
| Net assets available for benefits per the financial statements | $ 1,296,784 | $ 744,934 |
| Employer contributions receivable | - | (21,091) |
| Net assets available for benefits per the Form 5500 | $ 1,296,784 | $ 723,843 |

The following is a reconciliation of net increase in net assets available for benefits per the financial statements for the year ended December 31, 2019 to the Form 5500:

| | |
|---|---|
| Net increase in net assets available for benefits per the financial statements | $ 551,850 |
| Add: Employer contributions receivable at December 31, 2018 | 21,091 |
| Net increase in net asset available for benefits per the Form 5500 | $ 572,941 |

Note 11 - Subsequent Events

Subsequent to December 31, 2019, local, U.S. and world governments have declared a global pandemic due to the coronavirus disease ("COVID-19"). Most industries are experiencing disruption to business operations and the impact of reduced consumer spending. There is unprecedented uncertainty surrounding the duration of the pandemic, its potential economic ramifications, and any government actions to mitigate them. Although it cannot be reasonably determined at this time whether this will have a long-term impact, in the short-term, this has caused significant losses in U.S. and global markets and the values of investment securities which could negatively impact participants' account balances and the amounts reported in the statements of net assets available for benefits.

In response to the financial effects of COVID-19, the U.S. Congress approved the Coronavirus Aid, Relief and Economic Security ("CARES") Act on March 27, 2020. Certain of the CARES Act provisions increase the maximum loan amount participants may borrow from the lesser of $50,000 or 50% of the value of the participant's vested balance to the lesser of $100,000 or 100% of the vested balance, delay loan repayments for one year, allow hardship withdrawals related to COVID-19 of up to $100,000 that can be redeposited to a qualified plan within three years without tax penalty, and allow for certain other benefits. The CARES Act does not require formal amendment to the Plan document until the last day of the Plan year beginning on or after January 1, 2022 as long as the Plan operates within the revised limits.

The Plan administrator has evaluated all events or transactions that occurred after December 31, 2019 through October 14, 2020, which is the date that the financial statements were available to be issued. During this period, there were no material subsequent events requiring disclosure, except as noted above.

SUPPLEMENTAL SCHEDULES

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-3384605
Plan Number: 001

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT DECEMBER 31, 2019

| (a) | (b) Identity of Issuer, Borrower, Lessor or Similar Party | (c) Description of Investment | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Investments | | | |
| | *Mutual Funds:* | | | |
| * | American Funds | AMERICAN FUNDS 2020 TARGET DATE RETIRE R2E | ** | $ 118,463 |
| * | American Funds | AMERICAN FUNDS 2025 TARGET DATE RETIRE R2E | ** | 126,618 |
| * | American Funds | AMERICAN FUNDS 2030 TARGET DATE RETIRE R2E | ** | 215,434 |
| * | American Funds | AMERICAN FUNDS 2035 TARGET DATE RETIRE R2E | ** | 131,671 |
| * | American Funds | AMERICAN FUNDS 2040 TARGET DATE RETIRE R2E | ** | 226,623 |
| * | American Funds | AMERICAN FUNDS 2045 TARGET DATE RETIRE R2E | ** | 6,161 |
| * | American Funds | AMERICAN FUNDS 2050 TARGET DATE RETIRE R2E | ** | 16,006 |
| * | American Funds | AMERICAN FUNDS 2055 TARGET DATE RETIRE R2E | ** | 61,487 |
| * | American Funds | AMERICAN FUNDS 2060 TARGET DATE RETIRE R2E | ** | 18,900 |
| * | American Funds | AMERICAN FUNDS AMCAP R2E | ** | 43,698 |
| * | American Funds | AMERICAN FUNDS AMERICAN MUTUAL FUND CLASS R-3 | ** | 272 |
| * | American Funds | AMERICAN FUNDS BOND FUND OF AMER R2E | ** | 12,708 |
| * | American Funds | AMERICAN FUNDS EUROPACIFIC GROWTH R2E | ** | 24,190 |
| * | American Funds | AMERICAN FUNDS INTERM BD FD OF AMER R2E | ** | 13,364 |
| * | American Funds | AMERICAN FUNDS INVESTMENT CO OF AMER R2E | ** | 61,446 |
| * | American Funds | AMERICAN FUNDS NEW WORLD FUND CLASS R-3 | ** | 64 |
| * | American Funds | AMERICAN FUNDS NEW WORLD R2E | ** | 35,102 |
| * | American Funds | AMERICAN FUNDS U.S. GOVERNMENT SECURITIES FUND CLASS R-3 | ** | 36 |
| * | American Funds | AMERICAN FUNDS US GOVERNMENT SEC R2E | ** | 11,242 |
| * | American Funds | AMERICAN FUNDS WASHINGTON MUTUAL R2E | ** | 110,997 |
| | Columbia | COLUMBIA LARGE CAP ENHANCED CORE FUND CLASS R | ** | 68 |
| | Invesco | INVESCO GLOBAL REAL ESTATE R | ** | 426 |
| | Janus | JANUS HENDERSON TRITON FUND CLASS R | ** | 50 |
| | Lord Abbett | LORD ABBETT HIGH YIELD FUND CLASS R3 | ** | 22 |
| | Lord Abbett | LORD ABBETT HIGH YIELD R2 | ** | 273 |
| | MFS | MFS BLENDED RESEARCH SMALL CAP EQ R2 | ** | 35,057 |
| | MFS | MFS MASSACHUSETTS INVESTORS GROWTH STOCK FUND CLASS R2 | ** | 16 |
| | MFS | MFS RESEARCH INTERNATIONAL FUND CLASS R2 | ** | 1 |
| | Putnam | PUTNAM INTERNATIONAL VALUE FUND CLASS R | ** | 1 |
| | Voya | VOYA INTERMEDIATE BOND FUND CLASS R | ** | 26 |
| | | Total Mutual Funds | | 1,270,422 |
| | *Cash and Cash Equivalents:* | | | |
| | Fidelity | FIDELITY GOVERNMENT MONEY MARKET | ** | 33 |
| * | American Funds | AMERICAN FUNDS US GOVT MONEY MARKET R2E | ** | 321 |
| | | Total Cash and Cash Equivalents | | 354 |
| | | Total Assets Held | | $ 1,270,776 |

* Indicates party-in-interest to the Plan.
** Cost information is not required for participant-directed investments and therefore is not included.

See independent auditors' report.

Schedule H - Part IV - Line 4j - Schedule of Reportable Transactions
Attachment - Form 5500
Plan EIN: 13-3384605
Plan Number: 001

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF REPORTABLE TRANSACTIONS
FOR THE YEAR ENDED DECEMBER 31, 2019

| (a) Identity of party involved | (b) Description of asset (include interest rate and maturity in case of a 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 (issue aggregate total) | (i) Net gain or (loss) |
|---|---|---|---|---|---|---|---|---|
| American Funds | AMERICAN FUNDS WASHINGTON MUTUAL R2E | $ 111,850 | $ - | $ - | $ - | $ 111,850 | $ 111,850 | $ - |
| | AMERICAN FUNDS WASHINGTON MUTUAL R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2020 TRGT DATE RETIRE R2E | 119,568 | - | - | - | 119,568 | 119,568 | - |
| | AMERICAN FUNDS 2020 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2025 TRGT DATE RETIRE R2E | 126,897 | - | - | - | 126,897 | 126,897 | - |
| | AMERICAN FUNDS 2025 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2030 TRGT DATE RETIRE R2E | 459,337 | - | - | - | 459,337 | 459,337 | - |
| | AMERICAN FUNDS 2030 TRGT DATE RETIRE R2E | - | 246,420 | - | - | 243,765 | 246,420 | 2,655 |
| American Funds | AMERICAN FUNDS 2035 TRGT DATE RETIRE R2E | 199,171 | - | - | - | 199,171 | 199,171 | - |
| | AMERICAN FUNDS 2035 TRGT DATE RETIRE R2E | - | 69,227 | - | - | 68,123 | 69,227 | 1,104 |
| American Funds | AMERICAN FUNDS 2040 TRGT DATE RETIRE R2E | 225,892 | - | - | - | 225,892 | 225,892 | - |
| | AMERICAN FUNDS 2040 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |

See independent auditors' report.

Schedule H - Part IV - Line 4a - Schedule of Delinquent Participant Contributions
Attachment - Form 5500
Plan EIN: 13-3384605
Plan Number: 001

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
FOR THE YEAR ENDED DECEMBER 31, 2019

| Participant contributions transferred late to the plan | Total that constitute nonexempt prohibited transactions | | | Total fully corrected under VFCP and PTE 2002-51 |
|---|---|---|---|---|
| | Contributions not corrected | Contributions corrected outside VFCP | Contributions pending correction in VFCP | |
| Check here if late participant loan repayments are included: **X** | $ - | $ - | $ 5,272 | $ - |

See independent auditors' report.

Schedule H - Part IV - Line 4i - Schedule of Assets (Held at End of Year)
Attachment - Form 5500
Plan EIN: 13-3384605
Plan Number: 001

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT DECEMBER 31, 2019

| (a) | (b) Identity of Issuer, Borrower, Lessor or Similar Party | (c) Description of Investment | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Investments | | | |
| | *Mutual Funds:* | | | |
| * | American Funds | AMERICAN FUNDS 2020 TARGET DATE RETIRE R2E | ** | $ 118,463 |
| * | American Funds | AMERICAN FUNDS 2025 TARGET DATE RETIRE R2E | ** | 126,618 |
| * | American Funds | AMERICAN FUNDS 2030 TARGET DATE RETIRE R2E | ** | 215,434 |
| * | American Funds | AMERICAN FUNDS 2035 TARGET DATE RETIRE R2E | ** | 131,671 |
| * | American Funds | AMERICAN FUNDS 2040 TARGET DATE RETIRE R2E | ** | 226,623 |
| * | American Funds | AMERICAN FUNDS 2045 TARGET DATE RETIRE R2E | ** | 6,161 |
| * | American Funds | AMERICAN FUNDS 2050 TARGET DATE RETIRE R2E | ** | 16,006 |
| * | American Funds | AMERICAN FUNDS 2055 TARGET DATE RETIRE R2E | ** | 61,487 |
| * | American Funds | AMERICAN FUNDS 2060 TARGET DATE RETIRE R2E | ** | 18,900 |
| * | American Funds | AMERICAN FUNDS AMCAP R2E | ** | 43,698 |
| * | American Funds | AMERICAN FUNDS AMERICAN MUTUAL FUND CLASS R-3 | ** | 272 |
| * | American Funds | AMERICAN FUNDS BOND FUND OF AMER R2E | ** | 12,708 |
| * | American Funds | AMERICAN FUNDS EUROPACIFIC GROWTH R2E | ** | 24,190 |
| * | American Funds | AMERICAN FUNDS INTERM BD FD OF AMER R2E | ** | 13,364 |
| * | American Funds | AMERICAN FUNDS INVESTMENT CO OF AMER R2E | ** | 61,446 |
| * | American Funds | AMERICAN FUNDS NEW WORLD FUND CLASS R-3 | ** | 64 |
| * | American Funds | AMERICAN FUNDS NEW WORLD R2E | ** | 35,102 |
| * | American Funds | AMERICAN FUNDS U.S. GOVERNMENT SECURITIES FUND CLASS R-3 | ** | 36 |
| * | American Funds | AMERICAN FUNDS US GOVERNMENT SEC R2E | ** | 11,242 |
| * | American Funds | AMERICAN FUNDS WASHINGTON MUTUAL R2E | ** | 110,997 |
| | Columbia | COLUMBIA LARGE CAP ENHANCED CORE FUND CLASS R | ** | 68 |
| | Invesco | INVESCO GLOBAL REAL ESTATE R | ** | 426 |
| | Janus | JANUS HENDERSON TRITON FUND CLASS R | ** | 50 |
| | Lord Abbett | LORD ABBETT HIGH YIELD FUND CLASS R3 | ** | 22 |
| | Lord Abbett | LORD ABBETT HIGH YIELD R2 | ** | 273 |
| | MFS | MFS BLENDED RESEARCH SMALL CAP EQ R2 | ** | 35,057 |
| | MFS | MFS MASSACHUSETTS INVESTORS GROWTH STOCK FUND CLASS R2 | ** | 16 |
| | MFS | MFS RESEARCH INTERNATIONAL FUND CLASS R2 | ** | 1 |
| | Putnam | PUTNAM INTERNATIONAL VALUE FUND CLASS R | ** | 1 |
| | Voya | VOYA INTERMEDIATE BOND FUND CLASS R | ** | 26 |
| | | Total Mutual Funds | | 1,270,422 |
| | *Cash and Cash Equivalents:* | | | |
| | Fidelity | FIDELITY GOVERNMENT MONEY MARKET | ** | 33 |
| * | American Funds | AMERICAN FUNDS US GOVT MONEY MARKET R2E | ** | 321 |
| | | Total Cash and Cash Equivalents | | 354 |
| | | Total Assets Held | | $ 1,270,776 |

* Indicates party-in-interest to the Plan.
** Cost information is not required for participant-directed investments and therefore is not included.

See independent auditors' report.

Schedule H - Part IV - Line 4j - Schedule of Reportable Transactions
Attachment - Form 5500
Plan EIN: 13-3384605
Plan Number: 001

MCKEON ROLLING STEEL DOOR CO., INC. 401(k) PROFIT SHARING PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE OF REPORTABLE TRANSACTIONS
FOR THE YEAR ENDED DECEMBER 31, 2019

| (a) Identity of party involved | (b) Description of asset (include interest rate and maturity in case of a 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 (issue aggregate total) | (i) Net gain or (loss) |
|---|---|---|---|---|---|---|---|---|
| American Funds | AMERICAN FUNDS WASHINGTON MUTUAL R2E | $ 111,850 | $ - | $ - | $ - | $ 111,850 | $ 111,850 | $ - |
| | AMERICAN FUNDS WASHINGTON MUTUAL R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2020 TRGT DATE RETIRE R2E | 119,568 | - | - | - | 119,568 | 119,568 | - |
| | AMERICAN FUNDS 2020 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2025 TRGT DATE RETIRE R2E | 126,897 | - | - | - | 126,897 | 126,897 | - |
| | AMERICAN FUNDS 2025 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |
| American Funds | AMERICAN FUNDS 2030 TRGT DATE RETIRE R2E | 459,337 | - | - | - | 459,337 | 459,337 | - |
| | AMERICAN FUNDS 2030 TRGT DATE RETIRE R2E | - | 246,420 | - | - | 243,765 | 246,420 | 2,655 |
| American Funds | AMERICAN FUNDS 2035 TRGT DATE RETIRE R2E | 199,171 | - | - | - | 199,171 | 199,171 | - |
| | AMERICAN FUNDS 2035 TRGT DATE RETIRE R2E | - | 69,227 | - | - | 68,123 | 69,227 | 1,104 |
| American Funds | AMERICAN FUNDS 2040 TRGT DATE RETIRE R2E | 225,892 | - | - | - | 225,892 | 225,892 | - |
| | AMERICAN FUNDS 2040 TRGT DATE RETIRE R2E | - | - | - | - | - | - | - |

See independent auditors' report.