

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2019</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☒ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>PLY GEM 401(K) SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>003</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>02/01/2005</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>003</u>	1c Effective date of plan <u>02/01/2005</u>	
1b Three-digit plan number (PN) ▶	<u>003</u>				
1c Effective date of plan <u>02/01/2005</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>PLY GEM INDUSTRIES, INC.</u> <u>5020 WESTON PKWY</u> <u>SUITE 400</u> <u>CARY, NC 27513</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>11-1727150</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>919-677-3900</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>339900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>11-1727150</u>	2c Plan Sponsor's telephone number <u>919-677-3900</u>	2d Business code (see instructions) <u>339900</u>	
2b Employer Identification Number (EIN) <u>11-1727150</u>					
2c Plan Sponsor's telephone number <u>919-677-3900</u>					
2d Business code (see instructions) <u>339900</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2020	KATY THEROUX
	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

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

Form 5500 (2019)
v. 190130

3a Plan administrator's name and address ☐ Same as Plan Sponsor PLY GEM INDUSTRIES, INC. PLY GEM INDUSTRIES, INC. 5020 WESTON PKWY SUITE 400 CARY, NC 27513		3b Administrator's EIN 11-1727150 3c Administrator's telephone number 919-677-3900
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 10164
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) 8927
a(2) Total number of active participants at the end of the plan year		6a(2) 0
b Retired or separated participants receiving benefits.....		6b 0
c Other retired or separated participants entitled to future benefits		6c 0
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 0
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 0
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 0
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 3H 3D		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 _____

<div>SCHEDULE A (Form 5500) <div>Department of the Treasury Internal Revenue Service</div><div>Department of Labor Employee Benefits Security Administration</div><div>Pension Benefit Guaranty Corporation</div></div>	<div>Insurance Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div> <div>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019	
A Name of plan PLY GEM 401(K) SAVINGS PLAN	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 PLY GEM INDUSTRIES, INC.	D Employer Identification Number (EIN) 11-1727150

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

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

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-1050034	93629	041322	0	01/01/2019	12/31/2019

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

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end **4** 0**5** Current value of plan's interest under this contract in separate accounts at year end **5** 0**6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GUARANTEED GENERAL ACCOUNT CONTRACT****b** Balance at the end of the previous year **7b** 51050979**c** Additions: (1) Contributions deposited during the year **7c(1)** 5739930
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 1056163
(4) Transferred from separate account **7c(4)** 428737
(5) Other (specify below) **7c(5)** 6977866▶ **LOAN REPAYMENTS TRANSFERS IN**(6) Total additions **7c(6)** 14202696**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 65253675**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 62192375
(2) Administration charge made by carrier **7e(2)** 8648
(3) Transferred to separate account **7e(3)** 301988
(4) Other (specify below) **7e(4)** 2750664▶ **LOAN INITIATIONS, TRANSFERS OUT MISCELLANEOUS OUT FORFEITURES DEBITS**(5) Total deductions **7e(5)** 65253675**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 0

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	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 PLY GEM 401(K) SAVINGS PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 PLY GEM INDUSTRIES, INC.	D Employer Identification Number (EIN) 11-1727150	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND
06-1050034

(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)

KESTRA INVESTMENT SERVICES, LLC.

74-2794194

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	65000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COOK STREET CONSULTING, INC

84-0854432

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	57588	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(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?
13 15 37 50 64	NONE	39300	Yes ☒ No ☐	Yes ☒ No ☐	0	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
PRUDENTIAL RETIREMENT INSURANCE AND	15 64	0
(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.	
PRUDENTIAL RETIREMENT INSURANCE AND 06-1050034	35.000 BPS AND \$0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2019 TO 12/31/2019 GUARANTEED INCOME FUND	
(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
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 PLY GEM 401(K) SAVINGS PLAN	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 PLY GEM INDUSTRIES, INC.	D Employer Identification Number (EIN) 11-1727150	

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	0	264672918
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	144398	0
(2) Participant contributions.....	1b(2)	440907	0
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)	7333473	8604675
(9) Value of interest in common/collective trusts	1c(9)	955811	0
(10) Value of interest in pooled separate accounts	1c(10)	13852920	0
(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)	157509317	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	51050978	0
(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	231287804 273277593
Liabilities			
g	Benefit claims payable	1g	434266 0
h	Operating payables	1h	
i	Acquisition indebtedness	1i	
j	Other liabilities	1j	0 273277593
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	434266 273277593
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	230853538 0

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	4786781
	(B) Participants	2a(1)(B)	14871357
	(C) Others (including rollovers)	2a(1)(C)	6231898
(2)	Noncash contributions	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	25890036
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)	430034
	(F) Other	2b(1)(F)	1056163
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	1486197
(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)	2488871
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	2488871
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		4230028
(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)		38839481
c Other income	2c		75317
d Total income. Add all income amounts in column (b) and enter total	2d		73009930

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	30020426	
(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)		30020426
f Corrective distributions (see instructions)	2f		397508
g Certain deemed distributions of participant loans (see instructions)	2g		2634
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	165307	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		165307
j Total expenses. Add all expense amounts in column (b) and enter total	2j		30585875

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		42424055
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		273277593

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: HUGHES, PITTMAN & GUPTON, LLP

(2) EIN: 56-1415202

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

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

Part IV Compliance Questions

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

During the plan year:

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

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)

	Yes	No	Amount
4a	X		3942440
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?	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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.)	X		
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?	X		
4k	X		
l Has the plan failed to provide any benefit when due under the plan?.....		X	
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 0.

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)
CORNERSTONE BUILDING BRANDS 401(K) PROFIT SHARING PLAN	76-0127701	001

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

A Name of plan <u>PLY GEM 401(K) SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PLY GEM INDUSTRIES, INC.</u>	D Employer Identification Number (EIN) <u>11-1727150</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>22-1211670</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

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

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

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

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

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

Schedule R (Form 5500) 2019
v. 190130

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

a The current year

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****14c**

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

a The corresponding number for the plan year immediately preceding the current plan year

b The corresponding number for the second preceding plan year

15a**15b**

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

a Enter the number of employers who withdrew during the preceding plan year

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers

16a**16b**

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

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

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

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

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

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

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

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

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

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

- 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 _____

PLY GEM 401(K) SAVINGS PLAN

Financial Statements

December 31, 2019 and 2018

PLY GEM 401(K) SAVINGS PLAN

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December 31, 2019 and 2018

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**Hughes Pittman & Gupton, LLP**

1500 Sunday Drive, Suite 300

Raleigh, North Carolina 27607

919.232.5900 919.232.5901 fax

www.hpg.com**Independent Auditors' Report**

Benefits Committee
Ply Gem 401(k) Savings Plan
Cary, North Carolina

Report on the Financial Statements

We have audited the accompanying financial statements of the Ply Gem 401(k) Savings Plan, which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, 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

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 and supplemental schedules that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility for the 2019 Financial Statements

Our responsibility is to express an opinion on the 2019 financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the 2019 financial statements.

Auditors' Responsibility for the 2018 Financial Statements

Our responsibility is to express an opinion on the 2018 financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matters described in the Basis for Disclaimer of Opinion on the 2018 financial statements 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 on the 2018 Financial Statements

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 investment assets held by Prudential Retirement Insurance and Annuity Company and Prudential Bank & Trust, F.S.B, the custodian and trustee of the Plan, and transactions in those assets were excluded from the scope of our audit of the Plan's 2018 financial statements, except for comparing the information provided by the custodian and trustee, which is summarized in Note 3, with the related information included in the financial statements.

Disclaimer of Opinion on the 2018 Financial Statements

Because of the significance of the matter described in the Basis for Disclaimer of Opinion on the 2018 Financial Statements paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion on the 2018 financial statements. Accordingly, we do not express an opinion on these financial statements.

Opinion on the 2019 Financial Statements

In our opinion, the financial statements, referred to above, of the Ply Gem 401(k) Savings Plan as of December 31, 2019, and for the year then ended, present fairly, in all material respects, the net assets available for benefits of the Ply Gem 401(k) Savings Plan as of December 31, 2019, and the changes in net assets available for benefits for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Report on Form and Content of the 2018 Financial Statements in Compliance with DOL Rules and Regulations

The form and content of the information included in the 2018 financial statements, other than that derived from the information certified by the custodian and 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.

Hughes Pattman & Stupen, LLP

Raleigh, North Carolina
October 15, 2020

PLY GEM 401(K) SAVINGS PLAN

Statements of Net Assets Available for Benefits

December 31, 2019 and 2018

	2019	2018
Assets		
Investments at fair value	\$ -	\$ 171,362,237
Investments at contract value	-	52,006,789
Receivables:		
Employer's contributions	-	144,398
Participants' contributions	-	440,907
Notes receivable from participants	8,604,675	7,333,473
Total receivables	8,604,675	7,918,778
Cash	264,672,918	-
Total assets	273,277,593	231,287,804
Liabilities		
Payable to the NCI 401(k) Profit Sharing Plan	273,277,593	-
Accounts payable, return of excess contributions	-	434,266
Net assets available for benefits	\$ -	\$ 230,853,538

See accompanying notes to financial statements

PLY GEM 401(K) SAVINGS PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2019

Additions

Additions to net assets attributed to:

Investment activity:

Net appreciation in fair value of investments \$ 43,069,509

Dividends and interest 3,545,034

Interest income on notes receivable from participants 430,034

Contributions:

Participants' 14,871,357

Employer's 4,786,781

Rollovers 6,231,898

Total contributions 25,890,036

Other income 75,317

Total additions 73,009,930

Deductions

Deductions from net assets attributed to:

Benefits paid to participants 30,420,568

Administrative expenses 165,307

Total deductions 30,585,875

Net increase 42,424,055

Net assets available for benefits as of beginning of year 230,853,538

Net assets available for benefits as of end of year before assets payable to the NCI 401(k) Profit Sharing Plan 273,277,593

Assets payable to the NCI 401(k) Profit Sharing Plan (273,277,593)

Net assets available for benefits as of end of year \$ -

See accompanying notes to financial statements

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN

The following description of the Ply Gem 401(k) Savings 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 substantially all nonunion employees of Ply Gem Industries, Inc., and participating companies, who have completed one month of service and are 18 years of age or older. An employee may enroll in the Plan on the first day of the month subsequent to meeting the eligibility requirements. The Plan was established by merging the assets from plans maintained by affiliated companies. The Plan covers eligible employees of Ply Gem Industries, Inc.; Variform, Inc.; Kroy Building Products, Inc.; Great Lakes Windows, Inc.; MW Manufacturers, Inc.; Alenco Holding Corporation; Mastic Home Exteriors, Inc. (formerly Alcoa Home Exteriors, Inc.); Ply Gem Pacific Windows Corporation; Certainteed Pacific Windows Corporation; Ply Gem Specialty Products LLC; Simonton Windows and Doors, LLC (formerly the Fortune Brand Windows, Inc.); Canyon Stone, Inc.; Atrium Windows and Doors, Inc.; Atrium Extrusion System, Inc; and Silver Line Building Products, LLC. The Plan was amended and restated effective December 1, 2019. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

In April 2018, Ply Gem Industries, Inc. was acquired by Clayton, Dubilier & Rice and was subsequently merged with NCI Building Systems, Inc. in November 2018. In May 2019, the name was changed to Cornerstone Building Brands, Inc. (the “Company” or “Plan Sponsor”).

Prudential Retirement Insurance and Annuity Company (the “Custodian”) and Prudential Bank & Trust, F.S.B. (the “Trustee”) serve as the Plan’s custodian, trustee, and recordkeeper. The Benefits Committee serves as the plan administrator.

Plan Merger

Effective January 1, 2020, all participant account balances in the Plan were merged into the NCI 401(k) Profit Sharing Plan. On this date, the assets of the Plan were merged into the NCI 401(k) Profit Sharing Plan. Effective January 1, 2020, the NCI 401(k) Profit Sharing Plan name changed to Cornerstone Building Brands 401(k) Profit Sharing Plan.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (continued)

Contributions

Participants considered non-highly compensated may elect to contribute from 1% up to 100% of their pretax compensation, subject to certain Internal Revenue Code (“IRC”) limitations. Effective December 1, 2018, participants may elect to contribute from 1% up to 100% of their compensation as a Roth contribution. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing rollover distributions from other qualified plans.

The Company may, at its sole discretion, make matching contributions in an amount from 0% to 100% of an eligible participant’s deferrals, up to a maximum of 6% of a participant’s compensation. The Company elected to make matching contributions up to 50% of the first 6% of employee deferrals, except for employees of Alenco Holding Corporation who received up to a 25% match on the first 6% of employee deferrals and employees of Silver Line Building Products, LLC who received up to a 50% match on the first 4% of employee deferrals.

The Plan also allows the Company to make discretionary nonelective contributions, which are allocated to participants’ accounts based on their pro rata portion of total compensation. Participants must be employed on the last day of the plan year and have otherwise met the eligibility requirements to be a participant in the Plan to be eligible for the nonelective contributions. Each participating company may make a discretionary nonelective contribution independent of the other participating employers. The Company did not make any discretionary nonelective contributions in 2019.

Participants’ Accounts

Each participant’s account is credited with the participant’s contribution and allocations of (a) the Company’s matching and discretionary nonelective contributions, if any, and (b) Plan earnings, and charged with 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.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (continued)

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in employer matching and discretionary nonelective contributions occurs according to the following schedule:

Years of Service for Vesting Purposes	Percentage Vested
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5 or more	100%

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to the lesser of \$50,000 or 50% of their vested account balance. The maximum loan term is five years, unless for the purchase of a primary residence, in which case, the repayment period is not to exceed ten years. The loans is secured by the balance in the participant's account and bears interest at the bank Prime rate plus 1%. Principal and interest is paid ratably through payroll deductions. Upon termination of service, the balance of any outstanding loan becomes due and the participant's vested account balance will be used as a taxable distribution to pay the outstanding loan if not otherwise repaid. A participant may have only one loan outstanding at any time.

Payment of Benefits

Upon termination of service due to death, disability, retirement, or termination for any other reason, a participant may elect to receive his or her vested account balance in a single lump sum or a series of payments. Upon separation of service, if the participant's vested balance is less than \$1,000, then the balance will be automatically distributed in a single lump sum, or in certain instances, distributed to an individual retirement account.

Participants may make withdrawals prior to termination of employment. Hardship withdrawals are available to Plan participants, as defined by the Plan and permitted by the IRC. Hardship withdrawals are limited to the participant's salary deferral contributions, which shall not include earnings thereon.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (concluded)

Participants who have attained the age of 59½ are allowed to receive a distribution of all or any portion of their vested account balance in a single, lump-sum payment.

Forfeited Accounts

Forfeitures occur upon termination of employment by a participant who is not fully vested. Forfeiture amounts may be used to reduce current or future employer contributions, pay for allowable Plan expenses, or provide additional allocations for Plan participants.

During 2019, \$48,155 of forfeitures were reallocated to certain Plan participants, \$296,045 of forfeitures were used to pay employer contributions, and \$61,007 were used to pay allowable Plan expenses. As of December 31, 2019, the forfeiture account balance of \$267,810 was transferred to the NCI 401(k) Profit Sharing Plan. As of December 31, 2018, forfeited nonvested accounts totaled \$245,083.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value, except fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements. See Note 5 for discussion of investments at contract value.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (concluded)

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 includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Return of Excess Contributions

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 distributed the 2018 excess contributions to the applicable participants prior to March 15th of the following year.

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participants' accounts and are included in administrative expenses. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

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.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 3: INFORMATION CERTIFIED BY THE TRUSTEE AND CUSTODIAN

All investment information disclosed in the accompanying financial statements and supplemental schedules, including investments held and notes receivable from participants as of December 31, 2019 and 2018, net appreciation in fair value of investments, interest and dividends, and interest income on notes receivable from participants for 2019, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by the Trustee and Custodian.

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 measurements) and the lowest priority to unobservable inputs (level 3 measurements). 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 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.

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

Following is a description of the valuation methodologies used for investments measured at fair value. There have been no changes to the methodologies used as of December 31, 2018.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 4: FAIR VALUE MEASUREMENTS (concluded)

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 and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The Plan Sponsor has determined that the Prudential Total Return Bond Q Fund is more representative of a level 2 fund.

Pooled separate account - Valued at net asset value based on the market value of the underlying investments, such as equities, preferred stock, bonds, real estate, and mutual funds. The majority of the underlying securities have observable level 1 quoted pricing inputs. While the underlying asset values are quoted prices, unit values of a pooled separate account are determined by dividing the value of each fund's net assets by the total number of units outstanding on the valuation date. The valuation of fund units is published daily and is the basis for current transactions.

The Plan's investments were liquidated prior to December 31, 2019, and all Plan assets are payable to the NCI 401(k) Profit Sharing Plan as of December 31, 2019. The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2018:

	2018			
	Investments at Fair Value			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$127,664,986	\$ 29,844,331	\$ -	\$157,509,317
Pooled separate account	-	13,852,920	-	13,852,920
Total investments at fair value	\$127,664,986	\$ 43,697,251	\$ -	\$171,362,237

NOTE 5: INVESTMENTS AT CONTRACT VALUE

Certain Plan participants invest in the Guaranteed Income Fund and the New York Life Anchor Account I Fund, fully benefit-responsive investment contracts, with the Custodian. The Guaranteed Income Fund primarily invests in corporate bonds, mortgage loans, private securities, and structured bonds. The New York Life Anchor Account I Fund primarily invests in the New York Life Group Annuity Contract.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 5: INVESTMENTS AT CONTRACT VALUE (concluded)

Because the investment contracts are fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contracts. Contract value, as reported to the Plan by the Custodian, represents contributions made under the contracts, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the plan document (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity-wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Such events include (1) an uncured violation of the Plan's investment guidelines, (2) a breach of material obligation under the contract, (3) a material misrepresentation, and (4) a material amendment to the agreement without the consent of the issuer.

These contracts were liquidated prior to December 31, 2019, and all proceeds are payable to the NCI 401(k) Profit Sharing Plan as of December 31, 2019.

NOTE 6: INCOME TAX STATUS

The Plan obtained its latest opinion letter dated April 29, 2014, in which the IRS stated that the Prudential Insurance Company of America Prototype Non-standardized Profit Sharing Plan with cash or deferred arrangement, as then designed, was qualified under Section 401(a) of the IRC, and that any employer adopting this form of the plan would be considered to have a plan qualified under Section 401(a) of the IRC. Therefore, the related trust is exempt from taxation. Once qualified, the plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the opinion letter. However, the plan administrator and the Plan's tax counsel believe that the Plan was designed and has operated in compliance with the applicable requirements of the IRC for the 2019 plan year. Therefore, no provision for income taxes has been included in the Plan's financial statements.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 6: INCOME TAX STATUS (concluded)

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 federal and state tax authorities.

NOTE 7: RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

The Plan invests in certain funds managed by the Trustee and Custodian; therefore, transactions related to these funds qualify as party in interest transactions. Fees incurred by the Plan for investment management services are included in net appreciation in fair value of investments, as they are paid through an administrative agreement rather than a direct payment. During 2019, the Plan made direct payments of \$125,907 to an investment advisor and \$39,400 for recordkeeping services. The Company pays directly any other fees related to the Plan's operations.

NOTE 8: DELINQUENT PARTICIPANT CONTRIBUTIONS

Title I of ERISA requires that all employee contributions be submitted to the Plan as soon as administratively possible, but no later than the 15th business day of the month following the month of being withheld from compensation. In 2019, participant contributions totaling \$622,443 were not remitted timely. The contributions were remitted to the Plan in 2019, but lost earnings have not yet been calculated or remitted. In 2018, participant contributions totaling \$2,130,103 were not remitted timely. During 2018, \$124,210 of late remittances were remitted in May 2018, and lost earnings were recalculated and remitted to the Plan in May and June of 2018. The remaining late contributions of \$2,005,893 were remitted to the Plan in 2018 and lost earnings were remitted in September 2020. In 2017, participant contributions totaling \$37,096 were not remitted timely. Plan management remitted the amount in March 2017 and lost earnings were remitted in September 2020. In 2016, participant contributions totaling \$1,277,008 were not remitted timely. Plan management remitted \$961,883 in April 2016 and \$315,125 in May 2016, and lost earnings were remitted in September 2020.

NOTE 9: SUBSEQUENT EVENTS

The plan administrator has evaluated subsequent events through October 15, 2020, the date these financial statements were available for issuance, and determined that there were no events that have occurred that would require adjustment to or disclosure in these financial statements.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4i - Schedule of Assets Held as of End of Year

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
* Participant loans:				
		Loans with interest rates ranging between 3.25% and 9.75%	**	<u>\$ 8,604,675</u>

* Denotes party in interest

** Cost omitted for participant-directed investments

Note: Information in this schedule as reported by Prudential Retirement Insurance and Annuity Company and Prudential Bank & Trust, F.S.B.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4a - Schedule of Delinquent Participant Contributions

For the Year Ended December 31, 2019

Participant Contributions Transferred Late to Plan			Total that Constitutes Nonexempt Prohibited Transactions				
Check Here if Late Participant Loan Repayments are Included: ☐			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51	
\$	1,277,008	*	\$ 1,277,008	\$ -	\$ -	\$ -	-
	37,096	**	37,096	-	-	-	-
	2,005,893	***	2,005,893	-	-	-	-
	622,443	****	622,443	-	-	-	-
\$	3,942,440		\$ 3,942,440	\$ -	\$ -	\$ -	-

* Amounts were remitted in April 2016 and May 2016, and lost earnings were remitted in September 2020.

** Amounts were remitted in March 2017, and lost earnings were remitted in September 2020.

*** Amounts were remitted in January 2018, March 2018, April 2018, May 2018, June 2018, July 2018, August 2018, October 2018, and November 2018. Lost earnings were remitted in September 2020.

**** Amounts were remitted in January 2019, February 2019, March 2019, April 2019, May 2019, June 2019, July 2019, and November 2019. Lost earnings have not yet been calculated or remitted.

PLY GEM 401(K) SAVINGS PLAN

Financial Statements

December 31, 2019 and 2018

PLY GEM 401(K) SAVINGS PLAN

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December 31, 2019 and 2018

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**Hughes Pittman & Gupton, LLP**

1500 Sunday Drive, Suite 300

Raleigh, North Carolina 27607

919.232.5900 919.232.5901 fax

www.hpg.com**Independent Auditors' Report**

Benefits Committee
Ply Gem 401(k) Savings Plan
Cary, North Carolina

Report on the Financial Statements

We have audited the accompanying financial statements of the Ply Gem 401(k) Savings Plan, which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, 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

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 and supplemental schedules that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility for the 2019 Financial Statements

Our responsibility is to express an opinion on the 2019 financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the 2019 financial statements.

Auditors' Responsibility for the 2018 Financial Statements

Our responsibility is to express an opinion on the 2018 financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matters described in the Basis for Disclaimer of Opinion on the 2018 financial statements 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 on the 2018 Financial Statements

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 investment assets held by Prudential Retirement Insurance and Annuity Company and Prudential Bank & Trust, F.S.B, the custodian and trustee of the Plan, and transactions in those assets were excluded from the scope of our audit of the Plan's 2018 financial statements, except for comparing the information provided by the custodian and trustee, which is summarized in Note 3, with the related information included in the financial statements.

Disclaimer of Opinion on the 2018 Financial Statements

Because of the significance of the matter described in the Basis for Disclaimer of Opinion on the 2018 Financial Statements paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion on the 2018 financial statements. Accordingly, we do not express an opinion on these financial statements.

Opinion on the 2019 Financial Statements

In our opinion, the financial statements, referred to above, of the Ply Gem 401(k) Savings Plan as of December 31, 2019, and for the year then ended, present fairly, in all material respects, the net assets available for benefits of the Ply Gem 401(k) Savings Plan as of December 31, 2019, and the changes in net assets available for benefits for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Report on Form and Content of the 2018 Financial Statements in Compliance with DOL Rules and Regulations

The form and content of the information included in the 2018 financial statements, other than that derived from the information certified by the custodian and 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.

Hughes Pattman & Stupen, LLP

Raleigh, North Carolina
October 15, 2020

PLY GEM 401(K) SAVINGS PLAN

Statements of Net Assets Available for Benefits

December 31, 2019 and 2018

	<u>2019</u>	<u>2018</u>
Assets		
Investments at fair value	\$ -	\$ 171,362,237
Investments at contract value	-	52,006,789
Receivables:		
Employer's contributions	-	144,398
Participants' contributions	-	440,907
Notes receivable from participants	8,604,675	7,333,473
Total receivables	<u>8,604,675</u>	<u>7,918,778</u>
Cash	<u>264,672,918</u>	-
Total assets	273,277,593	231,287,804
Liabilities		
Payable to the NCI 401(k) Profit Sharing Plan	273,277,593	-
Accounts payable, return of excess contributions	<u>-</u>	<u>434,266</u>
Net assets available for benefits	<u><u>\$ -</u></u>	<u><u>\$ 230,853,538</u></u>

See accompanying notes to financial statements

PLY GEM 401(K) SAVINGS PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2019

Additions

Additions to net assets attributed to:

Investment activity:

Net appreciation in fair value of investments \$ 43,069,509

Dividends and interest 3,545,034

Interest income on notes receivable from participants 430,034

Contributions:

Participants' 14,871,357

Employer's 4,786,781

Rollovers 6,231,898

Total contributions 25,890,036

Other income 75,317

Total additions 73,009,930

Deductions

Deductions from net assets attributed to:

Benefits paid to participants 30,420,568

Administrative expenses 165,307

Total deductions 30,585,875

Net increase 42,424,055

Net assets available for benefits as of beginning of year 230,853,538

Net assets available for benefits as of end of year before assets payable to the NCI 401(k) Profit Sharing Plan 273,277,593

Assets payable to the NCI 401(k) Profit Sharing Plan (273,277,593)

Net assets available for benefits as of end of year \$ -

See accompanying notes to financial statements

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN

The following description of the Ply Gem 401(k) Savings 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 substantially all nonunion employees of Ply Gem Industries, Inc., and participating companies, who have completed one month of service and are 18 years of age or older. An employee may enroll in the Plan on the first day of the month subsequent to meeting the eligibility requirements. The Plan was established by merging the assets from plans maintained by affiliated companies. The Plan covers eligible employees of Ply Gem Industries, Inc.; Variform, Inc.; Kroy Building Products, Inc.; Great Lakes Windows, Inc.; MW Manufacturers, Inc.; Alenco Holding Corporation; Mastic Home Exteriors, Inc. (formerly Alcoa Home Exteriors, Inc.); Ply Gem Pacific Windows Corporation; Certainteed Pacific Windows Corporation; Ply Gem Specialty Products LLC; Simonton Windows and Doors, LLC (formerly the Fortune Brand Windows, Inc.); Canyon Stone, Inc.; Atrium Windows and Doors, Inc.; Atrium Extrusion System, Inc; and Silver Line Building Products, LLC. The Plan was amended and restated effective December 1, 2019. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

In April 2018, Ply Gem Industries, Inc. was acquired by Clayton, Dubilier & Rice and was subsequently merged with NCI Building Systems, Inc. in November 2018. In May 2019, the name was changed to Cornerstone Building Brands, Inc. (the “Company” or “Plan Sponsor”).

Prudential Retirement Insurance and Annuity Company (the “Custodian”) and Prudential Bank & Trust, F.S.B. (the “Trustee”) serve as the Plan’s custodian, trustee, and recordkeeper. The Benefits Committee serves as the plan administrator.

Plan Merger

Effective January 1, 2020, all participant account balances in the Plan were merged into the NCI 401(k) Profit Sharing Plan. On this date, the assets of the Plan were merged into the NCI 401(k) Profit Sharing Plan. Effective January 1, 2020, the NCI 401(k) Profit Sharing Plan name changed to Cornerstone Building Brands 401(k) Profit Sharing Plan.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (continued)

Contributions

Participants considered non-highly compensated may elect to contribute from 1% up to 100% of their pretax compensation, subject to certain Internal Revenue Code (“IRC”) limitations. Effective December 1, 2018, participants may elect to contribute from 1% up to 100% of their compensation as a Roth contribution. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing rollover distributions from other qualified plans.

The Company may, at its sole discretion, make matching contributions in an amount from 0% to 100% of an eligible participant’s deferrals, up to a maximum of 6% of a participant’s compensation. The Company elected to make matching contributions up to 50% of the first 6% of employee deferrals, except for employees of Alenco Holding Corporation who received up to a 25% match on the first 6% of employee deferrals and employees of Silver Line Building Products, LLC who received up to a 50% match on the first 4% of employee deferrals.

The Plan also allows the Company to make discretionary nonelective contributions, which are allocated to participants’ accounts based on their pro rata portion of total compensation. Participants must be employed on the last day of the plan year and have otherwise met the eligibility requirements to be a participant in the Plan to be eligible for the nonelective contributions. Each participating company may make a discretionary nonelective contribution independent of the other participating employers. The Company did not make any discretionary nonelective contributions in 2019.

Participants’ Accounts

Each participant’s account is credited with the participant’s contribution and allocations of (a) the Company’s matching and discretionary nonelective contributions, if any, and (b) Plan earnings, and charged with 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.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (continued)

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in employer matching and discretionary nonelective contributions occurs according to the following schedule:

Years of Service for Vesting Purposes	Percentage Vested
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5 or more	100%

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to the lesser of \$50,000 or 50% of their vested account balance. The maximum loan term is five years, unless for the purchase of a primary residence, in which case, the repayment period is not to exceed ten years. The loans is secured by the balance in the participant's account and bears interest at the bank Prime rate plus 1%. Principal and interest is paid ratably through payroll deductions. Upon termination of service, the balance of any outstanding loan becomes due and the participant's vested account balance will be used as a taxable distribution to pay the outstanding loan if not otherwise repaid. A participant may have only one loan outstanding at any time.

Payment of Benefits

Upon termination of service due to death, disability, retirement, or termination for any other reason, a participant may elect to receive his or her vested account balance in a single lump sum or a series of payments. Upon separation of service, if the participant's vested balance is less than \$1,000, then the balance will be automatically distributed in a single lump sum, or in certain instances, distributed to an individual retirement account.

Participants may make withdrawals prior to termination of employment. Hardship withdrawals are available to Plan participants, as defined by the Plan and permitted by the IRC. Hardship withdrawals are limited to the participant's salary deferral contributions, which shall not include earnings thereon.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 1: DESCRIPTION OF PLAN (concluded)

Participants who have attained the age of 59½ are allowed to receive a distribution of all or any portion of their vested account balance in a single, lump-sum payment.

Forfeited Accounts

Forfeitures occur upon termination of employment by a participant who is not fully vested. Forfeiture amounts may be used to reduce current or future employer contributions, pay for allowable Plan expenses, or provide additional allocations for Plan participants.

During 2019, \$48,155 of forfeitures were reallocated to certain Plan participants, \$296,045 of forfeitures were used to pay employer contributions, and \$61,007 were used to pay allowable Plan expenses. As of December 31, 2019, the forfeiture account balance of \$267,810 was transferred to the NCI 401(k) Profit Sharing Plan. As of December 31, 2018, forfeited nonvested accounts totaled \$245,083.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value, except fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements. See Note 5 for discussion of investments at contract value.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (concluded)

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 includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Return of Excess Contributions

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 distributed the 2018 excess contributions to the applicable participants prior to March 15th of the following year.

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participants' accounts and are included in administrative expenses. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

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.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 3: INFORMATION CERTIFIED BY THE TRUSTEE AND CUSTODIAN

All investment information disclosed in the accompanying financial statements and supplemental schedules, including investments held and notes receivable from participants as of December 31, 2019 and 2018, net appreciation in fair value of investments, interest and dividends, and interest income on notes receivable from participants for 2019, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by the Trustee and Custodian.

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 measurements) and the lowest priority to unobservable inputs (level 3 measurements). 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 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.

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

Following is a description of the valuation methodologies used for investments measured at fair value. There have been no changes to the methodologies used as of December 31, 2018.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 4: FAIR VALUE MEASUREMENTS (concluded)

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 and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The Plan Sponsor has determined that the Prudential Total Return Bond Q Fund is more representative of a level 2 fund.

Pooled separate account - Valued at net asset value based on the market value of the underlying investments, such as equities, preferred stock, bonds, real estate, and mutual funds. The majority of the underlying securities have observable level 1 quoted pricing inputs. While the underlying asset values are quoted prices, unit values of a pooled separate account are determined by dividing the value of each fund's net assets by the total number of units outstanding on the valuation date. The valuation of fund units is published daily and is the basis for current transactions.

The Plan's investments were liquidated prior to December 31, 2019, and all Plan assets are payable to the NCI 401(k) Profit Sharing Plan as of December 31, 2019. The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2018:

	2018			
	Investments at Fair Value			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$127,664,986	\$ 29,844,331	\$ -	\$157,509,317
Pooled separate account	-	13,852,920	-	13,852,920
Total investments at fair value	\$127,664,986	\$ 43,697,251	\$ -	\$171,362,237

NOTE 5: INVESTMENTS AT CONTRACT VALUE

Certain Plan participants invest in the Guaranteed Income Fund and the New York Life Anchor Account I Fund, fully benefit-responsive investment contracts, with the Custodian. The Guaranteed Income Fund primarily invests in corporate bonds, mortgage loans, private securities, and structured bonds. The New York Life Anchor Account I Fund primarily invests in the New York Life Group Annuity Contract.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 5: INVESTMENTS AT CONTRACT VALUE (concluded)

Because the investment contracts are fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contracts. Contract value, as reported to the Plan by the Custodian, represents contributions made under the contracts, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the plan document (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity-wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA.

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Such events include (1) an uncured violation of the Plan's investment guidelines, (2) a breach of material obligation under the contract, (3) a material misrepresentation, and (4) a material amendment to the agreement without the consent of the issuer.

These contracts were liquidated prior to December 31, 2019, and all proceeds are payable to the NCI 401(k) Profit Sharing Plan as of December 31, 2019.

NOTE 6: INCOME TAX STATUS

The Plan obtained its latest opinion letter dated April 29, 2014, in which the IRS stated that the Prudential Insurance Company of America Prototype Non-standardized Profit Sharing Plan with cash or deferred arrangement, as then designed, was qualified under Section 401(a) of the IRC, and that any employer adopting this form of the plan would be considered to have a plan qualified under Section 401(a) of the IRC. Therefore, the related trust is exempt from taxation. Once qualified, the plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the opinion letter. However, the plan administrator and the Plan's tax counsel believe that the Plan was designed and has operated in compliance with the applicable requirements of the IRC for the 2019 plan year. Therefore, no provision for income taxes has been included in the Plan's financial statements.

PLY GEM 401(K) SAVINGS PLAN

Notes to Financial Statements

December 31, 2019 and 2018

NOTE 6: INCOME TAX STATUS (concluded)

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 federal and state tax authorities.

NOTE 7: RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

The Plan invests in certain funds managed by the Trustee and Custodian; therefore, transactions related to these funds qualify as party in interest transactions. Fees incurred by the Plan for investment management services are included in net appreciation in fair value of investments, as they are paid through an administrative agreement rather than a direct payment. During 2019, the Plan made direct payments of \$125,907 to an investment advisor and \$39,400 for recordkeeping services. The Company pays directly any other fees related to the Plan's operations.

NOTE 8: DELINQUENT PARTICIPANT CONTRIBUTIONS

Title I of ERISA requires that all employee contributions be submitted to the Plan as soon as administratively possible, but no later than the 15th business day of the month following the month of being withheld from compensation. In 2019, participant contributions totaling \$622,443 were not remitted timely. The contributions were remitted to the Plan in 2019, but lost earnings have not yet been calculated or remitted. In 2018, participant contributions totaling \$2,130,103 were not remitted timely. During 2018, \$124,210 of late remittances were remitted in May 2018, and lost earnings were recalculated and remitted to the Plan in May and June of 2018. The remaining late contributions of \$2,005,893 were remitted to the Plan in 2018 and lost earnings were remitted in September 2020. In 2017, participant contributions totaling \$37,096 were not remitted timely. Plan management remitted the amount in March 2017 and lost earnings were remitted in September 2020. In 2016, participant contributions totaling \$1,277,008 were not remitted timely. Plan management remitted \$961,883 in April 2016 and \$315,125 in May 2016, and lost earnings were remitted in September 2020.

NOTE 9: SUBSEQUENT EVENTS

The plan administrator has evaluated subsequent events through October 15, 2020, the date these financial statements were available for issuance, and determined that there were no events that have occurred that would require adjustment to or disclosure in these financial statements.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4i - Schedule of Assets Held as of End of Year

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
* Participant loans:				
		Loans with interest rates ranging between 3.25% and 9.75%	**	<u>\$ 8,604,675</u>

* Denotes party in interest

** Cost omitted for participant-directed investments

Note: Information in this schedule as reported by Prudential Retirement Insurance and Annuity Company and Prudential Bank & Trust, F.S.B.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4a - Schedule of Delinquent Participant Contributions

For the Year Ended December 31, 2019

Participant Contributions Transferred Late to Plan			Total that Constitutes Nonexempt Prohibited Transactions				
Check Here if Late Participant Loan Repayments are Included: ☐			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51	
\$	1,277,008	*	\$ 1,277,008	\$ -	\$ -	\$ -	
	37,096	**	37,096	-	-	-	
	2,005,893	***	2,005,893	-	-	-	
	622,443	****	622,443	-	-	-	
\$	3,942,440		\$ 3,942,440	\$ -	\$ -	\$ -	

* Amounts were remitted in April 2016 and May 2016, and lost earnings were remitted in September 2020.

** Amounts were remitted in March 2017, and lost earnings were remitted in September 2020.

*** Amounts were remitted in January 2018, March 2018, April 2018, May 2018, June 2018, July 2018, August 2018, October 2018, and November 2018. Lost earnings were remitted in September 2020.

**** Amounts were remitted in January 2019, February 2019, March 2019, April 2019, May 2019, June 2019, July 2019, and November 2019. Lost earnings have not yet been calculated or remitted.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4i - Schedule of Assets Held as of End of Year

December 31, 2019

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
* Participant loans:				
		Loans with interest rates ranging between 3.25% and 9.75%	**	<u>\$ 8,604,675</u>

* Denotes party in interest

** Cost omitted for participant-directed investments

Note: Information in this schedule as reported by Prudential Retirement Insurance and Annuity Company and Prudential Bank & Trust, F.S.B.

PLY GEM 401(K) SAVINGS PLAN

EIN: 11-1727150

Plan Number: 003

Schedule H, Line 4a - Schedule of Delinquent Participant Contributions

For the Year Ended December 31, 2019

Participant Contributions Transferred Late to Plan			Total that Constitutes Nonexempt Prohibited Transactions				
Check Here if Late Participant Loan Repayments are Included: ☐			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51	
\$	1,277,008	*	\$ 1,277,008	\$ -	\$ -	\$ -	-
	37,096	**	37,096	-	-	-	-
	2,005,893	***	2,005,893	-	-	-	-
	622,443	****	622,443	-	-	-	-
\$	3,942,440		\$ 3,942,440	\$ -	\$ -	\$ -	-

* Amounts were remitted in April 2016 and May 2016, and lost earnings were remitted in September 2020.

** Amounts were remitted in March 2017, and lost earnings were remitted in September 2020.

*** Amounts were remitted in January 2018, March 2018, April 2018, May 2018, June 2018, July 2018, August 2018, October 2018, and November 2018. Lost earnings were remitted in September 2020.

**** Amounts were remitted in January 2019, February 2019, March 2019, April 2019, May 2019, June 2019, July 2019, and November 2019. Lost earnings have not yet been calculated or remitted.