Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
FMK MANAGEMENT LLC 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2018

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)
FMK MANAGEMENT LLC

PO BOX 1227
WILDWOOD, FL 34785

2b Employer Identification Number (EIN) 47-2612431

2c Plan Sponsor's telephone number 352-552-5121

2d Business code (see instructions) 722511

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.	10/15/2021	MANDI DECKER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name FMK MANAGEMENT LLC

c Plan Name FMK RESTAURANT GROUP - 401 (K)

4b EIN 47-2612431

4d PN 001

5	Total number of participants at the beginning of the plan year	**5** 379
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)** 379
a(2)	Total number of active participants at the end of the plan year	**6a(2)** 283
b	Retired or separated participants receiving benefits	**6b** 0
c	Other retired or separated participants entitled to future benefits	**6c** 14
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d** 297
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e** 0
f	Total. Add lines **6d** and **6e**.	**6f** 297
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g** 51
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h** 0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2E 2F 2G 2J 2K 2T 3D

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

9a Plan funding arrangement (check all that apply)

- (1) [ ] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] 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) [X] 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) [X] **R** (Retirement Plan Information)
- (2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) [X] **H** (Financial Information)
- (2) [ ] **I** (Financial Information – Small Plan)
- (3) [ ] 0 **A** (Insurance Information)
- (4) [ ] **C** (Service Provider Information)
- (5) [X] **D** (DFE/Participating Plan Information)
- (6) [ ] **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
FMK MANAGEMENT LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
FMK MANAGEMENT LLC

D Employer Identification Number (EIN)
47-2612431

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

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802495-007	C	1987

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802587-004	C	11161

a Name of MTIA, CCT, PSA, or 103-12 IE: DIAMOND HILL LARGE CAP PORTFOLIO

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-4705609-059	C	121

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EQUITY INDEX CIT 1

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802168-001	C	9655

a Name of MTIA, CCT, PSA, or 103-12 IE: LORD ABBETT CORE BOND CIT R1

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
82-1986152-325	C	863

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
FMK MANAGEMENT LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FMK MANAGEMENT LLC

D Employer Identification Number (EIN)
47-2612431

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	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	62
(2) U.S. Government securities	1c(2)	0	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	
(B) All other	1c(3)(B)	0	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	
(B) Common	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)	0	
(6) Real estate (other than employer real property)	1c(6)	0	
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans	1c(8)	806	6068
(9) Value of interest in common/collective trusts	1c(9)	0	23787
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	75582	129362
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	
	(2) Employer real property	1d(2)	0	
e	Buildings and other property used in plan operation	1e	0	
f	Total assets (add all amounts in lines 1a through 1e)	1f	76388	159279
	Liabilities			
g	Benefit claims payable	1g	0	
h	Operating payables	1h	0	
i	Acquisition indebtedness	1i	0	
j	Other liabilities	1j	0	
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	76388	159279

Part II Income and Expense Statement

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

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	0	
	(B) Participants	2a(1)(B)	87022	
	(C) Others (including rollovers)	2a(1)(C)	0	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		87022
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2	
	(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)	21	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		23
	(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)	798	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		798
	(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)		4253
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		13828
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		105924
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	20669	
(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)		20669
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		428
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	1936	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1936
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		23033
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		82891
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unmodified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: WILSON LEWIS **(2)** EIN: 58-2466648

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		20000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**	X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**	X		

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
FMK MANAGEMENT LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
FMK MANAGEMENT LLC

D Employer Identification Number (EIN)
47-2612431

Part I Distributions

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

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

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

EIN(s): 16-1470238 57-1198022

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation_____

FMK RESTAURANT GROUP - 401(K)

Wildwood, Florida

Financial Statements and Supplementary Information

December 31, 2020 and 2019

FMK RESTAURANT GROUP - 401(K)
WILDWOOD, FLORIDA

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION

DECEMBER 31, 2020 AND 2019

CONTENTS

	PAGE
INDEPENDENT AUDITOR'S REPORT	1
FINANCIAL STATEMENTS	
Statements of net assets available for benefits	3
Statements of changes in net assets available for benefits	4
Notes to the financial statements	5 - 11
SUPPLEMENTARY INFORMATION	
Schedule H Line 4(i) - Schedule of Assets Held at End of Year	13

WILSON LEWIS
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee and Management of
FMK Restaurant Group - 401(k)
Wildwood, Florida

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of FMK Restaurant Group - 401(k), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 10, which was certified by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustees hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of and for the year ended December 31, 2020, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

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Atlanta, Georgia 30309
tel: 404-881-1229 | fax: 404-881-8658

6650 Sugarloaf Parkway, Suite 900
Duluth, Georgia 30097
tel: 770-476-1004 | fax: 770-476-0201

Other Matter

The supplemental schedules as of and for the year ended December 31, 2020, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Wilson Lewis

October 8, 2021

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FMK RESTAURANT GROUP - 401(K)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
As of December 31, 2020 and 2019

	2020	2019
ASSETS		
Investments, at fair value	$ 153,211	$ 75,582
Notes receivable from participants	6,068	378
Contributions receivable - employee	1,618	-
Other employer contributions receivable	989	102
Total assets	161,886	$ 76,062
NET ASSETS AVAILABLE FOR BENEFITS	$ 161,886	$ 76,062

See accompanying notes and independent auditor's report.

FMK RESTAURANT GROUP - 401(K)

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the years ended December 31, 2020 and 2019

	2020	2019
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Net (depreciation) appreciation in fair value of investments	$ 18,128	$ 201
Dividend income	801	4,434
Total investment (loss) income	18,929	4,635
Less: investment expenses	(1,936)	(327)
Investment income, net	16,993	4,308
Employee contributions	88,640	71,950
Other employer contributions	839	96
Total contributions	89,479	72,046
Interest income on notes receivable from participants	21	19
Total additions	106,493	76,373
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	(20,669)	(1,481)
Net increase	85,824	74,892
Net assets available for benefits, beginning of year	76,062	1,170
Net assets available for benefits, end of year	$ 161,886	$ 76,062

See accompanying notes and independent auditor's report.

1. DESCRIPTION OF THE PLAN

The following description of the FMK Restaurant Group - 401(k) (the Plan) provides only general information. Readers should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of FMK Management, LLC ("the Company"). The Plan, which is participant-directed, was adopted and effective on January 1, 2018, and has since been amended to remain in compliance with laws and regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. Employees over age 21 are eligible to participate upon completion of service as defined in the Plan documents.

Contributions

Contributions to the Plan include employee deferrals, discretionary matching contributions, and non-elective employer contributions. Employees who elect to enroll in the Plan may elect to have up to 90% of their gross pay contributed as pre-tax or Roth contributions to their account each pay period. This deduction may not exceed the maximum amount allowed under the Internal Revenue Code. The Plan also allows for catch-up contributions subject to Internal Revenue Service (IRS) limitations. Participants direct the investment of these contributions into various investment options offered by the Plan. There were no discretionary match or non-elective employer contributions made for the years ended December 31, 2020 and 2019.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of the Company's contributions, Plan earnings or losses, and plan expenses. Allocations are based on participant earnings or account balances, as defined in the Plan documents.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant or beneficiary may elect to receive the vested interest of his or her account in the form of a single lump-sum distribution or annual installments. For termination of service due to other reasons, a participant may receive the value of the vested interest in their account as a lump-sum distribution.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants are subject to a vesting schedule for discretionary or non-elective employer contributions received plus actual earnings thereon. Discretionary and non-elective employer contributions vest 20% each year beginning after the second year of service.

Notes Receivable from Participants

Participants may borrow from their fund accounts an amount as defined in the Plan documents. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as defined by the Plan documents.

1. DESCRIPTION OF THE PLAN *(continued)*

Forfeited Accounts

Forfeitures of unvested Company contributions from terminated participant accounts can be used to offset future Company contributions or pay Plan administration expenses. There were no forfeitures for the years ended December 31, 2020 and 2019.

Hardship Withdrawals

Withdrawal of a portion of a participant's account will be permitted due to an immediate and heavy financial need, if it meets IRS requirements.

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that could affect certain reported amounts and disclosures of contingent assets and liabilities at the date of the financial statements and the reported income and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Notes Receivable from Participants

Notes receivable from participants are reported at their outstanding principal balances plus any accrued but unpaid interest. Loan origination and other fees are recognized as incurred. Interest income is recognized as it is collected.

Administrative Fees

Substantially all of the administrative expenses of the Plan are paid by the Company. Certain administrative costs and investment fees are paid by the Plan.

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between willing market participants as of the measurement date. This value includes an estimate of surrender charges and market value adjustments as of the measurement date. Actual surrender charges and market value adjustments are determined at the date of payment. See Note 5 for further discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Gains and losses (realized and unrealized) included in changes in net assets available for benefits are reported in net appreciation in fair value investments. Dividends are recorded on the ex-dividend date.

2. SIGNIFICANT ACCOUNTING POLICIES *(continued)*

Benefit Payments

Benefits are recorded when paid.

3. TRANSFER OF PLAN ASSETS

During the year ended December 31, 2020, all of the plans assets were transferred from ADP to Paychex.

4. ACCOUNTING POLICY CHANGE

The Financial Accounting Standards Board (FASB) released ASU 2016-01 Financial Instruments in January 2016 and several related ASU's that provide additional guidance. This amendment eliminates the requirement to classify investments as trading, held to maturity, or available for sale, and requires that investments in equity securities to be measured at fair value with changes in the fair value recognized in net income (not comprehensive income as was previously required). The amendment allows equity investments that do not have readily determinable fair values to be remeasured at fair value either upon the occurrence of an observable price change or upon identification of an impairment and requires enhanced disclosures about those investments. The amendment is effective for fiscal years beginning after December 15, 2018, should be applied by means of a cumulative-effect adjustment to the balance sheet as of the beginning of the fiscal year of adoption. The Plan has adopted this amendment for the year ended December 31, 2019.

5. FAIR VALUE MEASUREMENTS

The Plan applies the provisions of *Fair Value Measurements and Disclosures* (FASB ASC 820) to its recurring and nonrecurring, non-financial measurements. Non-recurring assets are not measured at fair value on an ongoing basis but are subject to fair value adjustments in certain circumstances and on a period basis. In accordance with FASB ASC 820, the fair value of financial instruments is based on market trading information, where available. Absent published market values for an instrument or other assets, management uses observable market data to arrive at its estimates of fair value.

Fair value is defined as an exit price, representing the amount 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. As such, fair value is a market-based measurement that should be determined based on assumptions that market participants would use in pricing an asset or liability. As a basis for considering such assumptions, FASB ASC 820 establishes a three level fair value hierarchy that prioritizes the inputs 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). These tiers include:

Level 1 - quoted prices (unadjusted) in active markets for identical assets or liabilities that the Company can access at the measurement date.

Level 2 - inputs other than quoted prices in active markets that are directly or indirectly observable such as quoted prices for similar instruments in active markets or quoted prices for identical or similar instruments in markets that are not active.

5. FAIR VALUE MEASUREMENTS *(continued)*

Level 3 - unobservable inputs in which little or no market data exists, therefore requiring the Company to develop its own assumptions, such as valuations derived from valuation techniques in which one or more significant value drivers are unobservable.

The following is a description of the valuation methodologies for assets measured at fair value. There have been no changes in the methodologies used for the years ended December 31, 2020 and 2019.

Common Collective Trusts - valued based on net asset values as a practical expedient, as reported by the managers of the collective trust funds and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. These are Level 2 investments. Total Collective Trust funds for the years ended December 31, 2020 and 2019 were $23,785 and $0, respectively.

Mutual Funds - valued at the net asset value if such value is published at or near the reporting date, or for those funds for which such value is unavailable, at the fund manager's estimate of net asset value as of the reporting date. These are Level 1 investments. Total Mutual Funds for the years ended December 31, 2020 and 2019 were $129,364 and $75,582, respectively.

Money Market Fund - valued at original cost plus accrued interest. These are Level 1 investments. Total value held in the Money Market Fund for the years ended December 31, 2020 and 2019 were $62 and $0, respectively.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair values of certain financial instruments could result in a different fair value measurement at the reporting date. There were no transfers between the fair value hierarchy levels during the years ended December 31, 2020 and 2019.

6. INVESTMENTS THAT CALCULATE NET ASSET VALUE PER SHARE

The fair value of the investments using the net asset value as a practical expedient as of December 31, 2020 and 2019 are $23,785 and $0, respectively.

7. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The record-keepers for the Plan for the year ended December 31, 2020 were ADP and Paychex, and for the year ended December 31, 2019, was ADP. Administrative fees for the Plan charged by ADP and Paychex that were paid by the Plan were included as fees charged to participant accounts. Fees paid by the Plan for service fees provided were $1,936 and $327 for the years ended December 31, 2020 and 2019, respectively.

The trustee for the plan is Mid Atlantic Trust Company. Fees charged by Mid Atlanta Trust Company are included as fees to participant accounts. The third party investment manager is Raymond James. Fees charged by Raymond James are paid by the plan sponsor.

8. PLAN TERMINATION

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their profit sharing contributions.

9. TAX STATUS

The Company adopted a prototype plan and trust agreement that received a favorable Internal Revenue Service (IRS) opinion letter dated April 10, 2014. Although the Plan has been amended since receiving the letter, the Plan administrator and management believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRS and, therefore, believe that the Plan is qualified and tax-exempt.

Generally accepted accounting principles prescribe requirements for the recognition, measurement, classification, and disclosure in the financial statements of uncertain tax positions taken or expected to be taken by the Plan. Management has evaluated the Plan's design and operation and has concluded that the Plan is designed and has been operated in compliance with the applicable requirements of the IRS. Further, management believes that the Plan has maintained its tax exempt status and has taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. The Plan is subject to routine audits by the IRS and generally, the Plan's tax returns remain open for federal income tax examination for three years from the date of filing.

10. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risk factors 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 statement of net assets available for benefits.

11. INFORMATION CERTIFIED BY RELIANCE TRUST COMPANY AND MID ATLANTIC TRUST COMPANY (UNAUDITED)

The Plan Sponsor has elected, as permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, to have certain financial statement information certified by the Plan's trustees, Reliance Trust Company and Mid Atlantic Trust Company.

The trustee has certified the investment assets, contributions, transactions, income, fees, participant loans, and the schedule of investments.

11. INFORMATION CERTIFIED BY RELIANCE TRUST COMPANY AND MID ATLANTIC TRUST COMPANY (UNAUDITED) *(continued)*

The information in the following line items, included in the Plan's financial statements, was prepared by the trustee and furnished to the Company. The Company has obtained a certification that such information is complete and accurate and was not audited:

	2020	2019
Statement of net assets available for plan benefits:		
Participant-directed investments	$ 153,211	$ 75,582
Statement of changes in net assets available for benefits:		
Dividend income	$ 801	4,434
Net appreciation (depreciation) in fair value of investments	$ 18,128	201

12. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits and the change in net assets available for benefits per the financial statements to Schedule H of the Form 5500:

	2020	2019
Net assets available for benefits per financial statements	$ 161,886	$ 76,062
Employee contributions receivable	(1,618)	-
Other employer contributions receivable	(989)	(102)
Net assets per Form 5500	$ 159,279	$ 75,960
Increase in net assets available for benefits per financial statements	$ 85,824	$ 74,892
Deemed distributions on defaulted loans	(428)	-
Employee contributions receivable	(1,618)	-
Other employer contributions receivable	(989)	(102)
Prior year other employer contributions receivable	102	-
Total increase per Form 5500	$ 82,891	$ 74,790

13. EXTRAORDINARY EVENT

During the year ended December 31, 2020, there was a worldwide public health emergency declared related to COVID-19. The response to this public health emergency mandated by United States government officials included forced closures of various businesses and organizations for a length of time. These closures and the health emergency have affected normal day to day operations of the Plan Sponsor, its customers, and its vendors, the impact of which still continues through the date these financial statements were issued. The related future financial impact on the Plan Sponsor of these closures, changes in the supply chain, and changes in customer behavior cannot be estimated at this time.

14. DATE OF MANAGEMENT'S REVIEW

Management has evaluated subsequent events as of October 8, 2021, the date the financial statements were available for issue. Plan management is not aware of any other significant events that occurred subsequent to the statement of net assets available for benefits date but prior to the issuance of this report that require adjustment to the financial statements or disclosure in the notes to the financial statements.

SUPPLEMENTARY INFORMATION

FMK RESTAURANT GROUP - 401(K)
PLAN #001
EIN: 47-2612431
For the year ended December 31, 2020

SCHEDULE H LINE 4-I - SCHEDULE OF ASSETS HELD AT YEAR END

(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
	VANGUARD FEDERAL MM INVESTOR SHS	Money Market Fund	**	$ 62
*	AMERICAN DIAMOND HILL LARGE CAP PORT R2	Common Collective Trust	**	121
	AMERICAN FUNDS AMCAP CL R6	Mutual Fund	**	320
	FIDELITY MID CAP INDEX	Mutual Fund	**	62
	THE HARTFORD MIDCAP CL R6	Mutual Fund	**	63
	JPMORGAN SMALL CAP GROWTH R6	Mutual Fund	**	12,225
	VICTORY INTEGRITY SMALL CAP VALUE R6	Mutual Fund	**	249
	WELLS FARGO SPECIAL MID CAP VALUE R6	Mutual Fund	**	3,359
*	BLACKROCK EAFE EQUITY INDEX R	Common Collective Trust	**	1,987
*	BLACKROCK RUSSELL 2000 INDEX R	Common Collective Trust	**	11,161
*	CORE BOND FUND R1	Common Collective Trust	**	863
*	BLACKROCK EQUITY INDEX FUND 1	Common Collective Trust	**	9,655
*	MYWAYRETIREMENT INDEX 2030 CL R	Mutual Fund	**	8,919
*	MYWAYRETIREMENT INDEX 2040 CL R	Mutual Fund	**	5,462
*	MYWAYRETIREMENT INDEX 2060 CL R	Mutual Fund	**	5,046
*	MYWAYRETIREMENT INDEX 2025 CL R	Mutual Fund	**	19,807
*	MYWAYRETIREMENT INDEX 2035 CL R	Mutual Fund	**	14,291
*	MYWAYRETIREMENT INDEX 2050 CL R	Mutual Fund	**	12,128
*	MYWAYRETIREMENT INDEX 2055 CL R	Mutual Fund	**	18,546
*	MYWAYRETIREMENT INDEX 2045 CL R	Mutual Fund	**	25,438
	AMERICAN FUNDS EUROPACIFIC GROWTH R6	Mutual Fund	**	913
	AMERICAN FUNDS NEW WORLD R6	Mutual Fund	**	2,096
	PRINCIPAL GLOBAL REAL EXTATE SEC R6	Mutual Fund	**	61
	DFA INFLATION-PROTECTED SEC PORT INST CL	Mutual Fund	**	252
	MFS TOTAL RETURN CL R6	Mutual Fund	**	125
*	Participant Loans	Interest rates - 4.25% - 6.75%	**	6,068
	Total			$ 159,279

Notes:
Column (a) - "*" indicates a party-in-interest
Column (d) - "**" costs omitted for participant-directed investments

FMK RESTAURANT GROUP - 401(K)

Wildwood, Florida

Financial Statements and Supplementary Information

December 31, 2020 and 2019

FMK RESTAURANT GROUP - 401(K)
WILDWOOD, FLORIDA

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION

DECEMBER 31, 2020 AND 2019

CONTENTS

	PAGE
INDEPENDENT AUDITOR'S REPORT	1
FINANCIAL STATEMENTS	
Statements of net assets available for benefits	3
Statements of changes in net assets available for benefits	4
Notes to the financial statements	5 - 11
SUPPLEMENTARY INFORMATION	
Schedule H Line 4(i) - Schedule of Assets Held at End of Year	13

WILSON LEWIS
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee and Management of
FMK Restaurant Group - 401(k)
Wildwood, Florida

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of FMK Restaurant Group - 401(k), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 10, which was certified by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustees hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of and for the year ended December 31, 2020, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

1720 Peachtree Street, Suite 629
Atlanta, Georgia 30309
tel: 404-881-1229 | fax: 404-881-8658

6650 Sugarloaf Parkway, Suite 900
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tel: 770-476-1004 | fax: 770-476-0201

Other Matter

The supplemental schedules as of and for the year ended December 31, 2020, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Wilson Lewis

October 8, 2021

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FMK RESTAURANT GROUP - 401(K)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
As of December 31, 2020 and 2019

	2020	2019
ASSETS		
Investments, at fair value	$ 153,211	$ 75,582
Notes receivable from participants	6,068	378
Contributions receivable - employee	1,618	-
Other employer contributions receivable	989	102
Total assets	161,886	$ 76,062
NET ASSETS AVAILABLE FOR BENEFITS	$ 161,886	$ 76,062

See accompanying notes and independent auditor's report.

FMK RESTAURANT GROUP - 401(K)

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the years ended December 31, 2020 and 2019

	2020	2019
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Net (depreciation) appreciation in fair value of investments	$ 18,128	$ 201
Dividend income	801	4,434
Total investment (loss) income	18,929	4,635
Less: investment expenses	(1,936)	(327)
Investment income, net	16,993	4,308
Employee contributions	88,640	71,950
Other employer contributions	839	96
Total contributions	89,479	72,046
Interest income on notes receivable from participants	21	19
Total additions	106,493	76,373
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	(20,669)	(1,481)
Net increase	85,824	74,892
Net assets available for benefits, beginning of year	76,062	1,170
Net assets available for benefits, end of year	$ 161,886	$ 76,062

See accompanying notes and independent auditor's report.

1. DESCRIPTION OF THE PLAN

The following description of the FMK Restaurant Group - 401(k) (the Plan) provides only general information. Readers should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of FMK Management, LLC ("the Company"). The Plan, which is participant-directed, was adopted and effective on January 1, 2018, and has since been amended to remain in compliance with laws and regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. Employees over age 21 are eligible to participate upon completion of service as defined in the Plan documents.

Contributions

Contributions to the Plan include employee deferrals, discretionary matching contributions, and non-elective employer contributions. Employees who elect to enroll in the Plan may elect to have up to 90% of their gross pay contributed as pre-tax or Roth contributions to their account each pay period. This deduction may not exceed the maximum amount allowed under the Internal Revenue Code. The Plan also allows for catch-up contributions subject to Internal Revenue Service (IRS) limitations. Participants direct the investment of these contributions into various investment options offered by the Plan. There were no discretionary match or non-elective employer contributions made for the years ended December 31, 2020 and 2019.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of the Company's contributions, Plan earnings or losses, and plan expenses. Allocations are based on participant earnings or account balances, as defined in the Plan documents.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant or beneficiary may elect to receive the vested interest of his or her account in the form of a single lump-sum distribution or annual installments. For termination of service due to other reasons, a participant may receive the value of the vested interest in their account as a lump-sum distribution.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants are subject to a vesting schedule for discretionary or non-elective employer contributions received plus actual earnings thereon. Discretionary and non-elective employer contributions vest 20% each year beginning after the second year of service.

Notes Receivable from Participants

Participants may borrow from their fund accounts an amount as defined in the Plan documents. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as defined by the Plan documents.

1. DESCRIPTION OF THE PLAN *(continued)*

Forfeited Accounts

Forfeitures of unvested Company contributions from terminated participant accounts can be used to offset future Company contributions or pay Plan administration expenses. There were no forfeitures for the years ended December 31, 2020 and 2019.

Hardship Withdrawals

Withdrawal of a portion of a participant's account will be permitted due to an immediate and heavy financial need, if it meets IRS requirements.

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that could affect certain reported amounts and disclosures of contingent assets and liabilities at the date of the financial statements and the reported income and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Notes Receivable from Participants

Notes receivable from participants are reported at their outstanding principal balances plus any accrued but unpaid interest. Loan origination and other fees are recognized as incurred. Interest income is recognized as it is collected.

Administrative Fees

Substantially all of the administrative expenses of the Plan are paid by the Company. Certain administrative costs and investment fees are paid by the Plan.

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between willing market participants as of the measurement date. This value includes an estimate of surrender charges and market value adjustments as of the measurement date. Actual surrender charges and market value adjustments are determined at the date of payment. See Note 5 for further discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Gains and losses (realized and unrealized) included in changes in net assets available for benefits are reported in net appreciation in fair value investments. Dividends are recorded on the ex-dividend date.

2. SIGNIFICANT ACCOUNTING POLICIES *(continued)*

Benefit Payments

Benefits are recorded when paid.

3. TRANSFER OF PLAN ASSETS

During the year ended December 31, 2020, all of the plans assets were transferred from ADP to Paychex.

4. ACCOUNTING POLICY CHANGE

The Financial Accounting Standards Board (FASB) released ASU 2016-01 Financial Instruments in January 2016 and several related ASU's that provide additional guidance. This amendment eliminates the requirement to classify investments as trading, held to maturity, or available for sale, and requires that investments in equity securities to be measured at fair value with changes in the fair value recognized in net income (not comprehensive income as was previously required). The amendment allows equity investments that do not have readily determinable fair values to be remeasured at fair value either upon the occurrence of an observable price change or upon identification of an impairment and requires enhanced disclosures about those investments. The amendment is effective for fiscal years beginning after December 15, 2018, should be applied by means of a cumulative-effect adjustment to the balance sheet as of the beginning of the fiscal year of adoption. The Plan has adopted this amendment for the year ended December 31, 2019.

5. FAIR VALUE MEASUREMENTS

The Plan applies the provisions of *Fair Value Measurements and Disclosures* (FASB ASC 820) to its recurring and nonrecurring, non-financial measurements. Non-recurring assets are not measured at fair value on an ongoing basis but are subject to fair value adjustments in certain circumstances and on a period basis. In accordance with FASB ASC 820, the fair value of financial instruments is based on market trading information, where available. Absent published market values for an instrument or other assets, management uses observable market data to arrive at its estimates of fair value.

Fair value is defined as an exit price, representing the amount 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. As such, fair value is a market-based measurement that should be determined based on assumptions that market participants would use in pricing an asset or liability. As a basis for considering such assumptions, FASB ASC 820 establishes a three level fair value hierarchy that prioritizes the inputs 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). These tiers include:

Level 1 - quoted prices (unadjusted) in active markets for identical assets or liabilities that the Company can access at the measurement date.

Level 2 - inputs other than quoted prices in active markets that are directly or indirectly observable such as quoted prices for similar instruments in active markets or quoted prices for identical or similar instruments in markets that are not active.

5. FAIR VALUE MEASUREMENTS *(continued)*

Level 3 - unobservable inputs in which little or no market data exists, therefore requiring the Company to develop its own assumptions, such as valuations derived from valuation techniques in which one or more significant value drivers are unobservable.

The following is a description of the valuation methodologies for assets measured at fair value. There have been no changes in the methodologies used for the years ended December 31, 2020 and 2019.

Common Collective Trusts - valued based on net asset values as a practical expedient, as reported by the managers of the collective trust funds and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. These are Level 2 investments. Total Collective Trust funds for the years ended December 31, 2020 and 2019 were $23,785 and $0, respectively.

Mutual Funds - valued at the net asset value if such value is published at or near the reporting date, or for those funds for which such value is unavailable, at the fund manager's estimate of net asset value as of the reporting date. These are Level 1 investments. Total Mutual Funds for the years ended December 31, 2020 and 2019 were $129,364 and $75,582, respectively.

Money Market Fund - valued at original cost plus accrued interest. These are Level 1 investments. Total value held in the Money Market Fund for the years ended December 31, 2020 and 2019 were $62 and $0, respectively.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair values of certain financial instruments could result in a different fair value measurement at the reporting date. There were no transfers between the fair value hierarchy levels during the years ended December 31, 2020 and 2019.

6. INVESTMENTS THAT CALCULATE NET ASSET VALUE PER SHARE

The fair value of the investments using the net asset value as a practical expedient as of December 31, 2020 and 2019 are $23,785 and $0, respectively.

7. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The record-keepers for the Plan for the year ended December 31, 2020 were ADP and Paychex, and for the year ended December 31, 2019, was ADP. Administrative fees for the Plan charged by ADP and Paychex that were paid by the Plan were included as fees charged to participant accounts. Fees paid by the Plan for service fees provided were $1,936 and $327 for the years ended December 31, 2020 and 2019, respectively.

The trustee for the plan is Mid Atlantic Trust Company. Fees charged by Mid Atlanta Trust Company are included as fees to participant accounts. The third party investment manager is Raymond James. Fees charged by Raymond James are paid by the plan sponsor.

8. PLAN TERMINATION

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their profit sharing contributions.

9. TAX STATUS

The Company adopted a prototype plan and trust agreement that received a favorable Internal Revenue Service (IRS) opinion letter dated April 10, 2014. Although the Plan has been amended since receiving the letter, the Plan administrator and management believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRS and, therefore, believe that the Plan is qualified and tax-exempt.

Generally accepted accounting principles prescribe requirements for the recognition, measurement, classification, and disclosure in the financial statements of uncertain tax positions taken or expected to be taken by the Plan. Management has evaluated the Plan's design and operation and has concluded that the Plan is designed and has been operated in compliance with the applicable requirements of the IRS. Further, management believes that the Plan has maintained its tax exempt status and has taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. The Plan is subject to routine audits by the IRS and generally, the Plan's tax returns remain open for federal income tax examination for three years from the date of filing.

10. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risk factors 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 statement of net assets available for benefits.

11. INFORMATION CERTIFIED BY RELIANCE TRUST COMPANY AND MID ATLANTIC TRUST COMPANY (UNAUDITED)

The Plan Sponsor has elected, as permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, to have certain financial statement information certified by the Plan's trustees, Reliance Trust Company and Mid Atlantic Trust Company.

The trustee has certified the investment assets, contributions, transactions, income, fees, participant loans, and the schedule of investments.

11. INFORMATION CERTIFIED BY RELIANCE TRUST COMPANY AND MID ATLANTIC TRUST COMPANY (UNAUDITED) *(continued)*

The information in the following line items, included in the Plan's financial statements, was prepared by the trustee and furnished to the Company. The Company has obtained a certification that such information is complete and accurate and was not audited:

	2020	2019
Statement of net assets available for plan benefits:		
Participant-directed investments	$ 153,211	$ 75,582
Statement of changes in net assets available for benefits:		
Dividend income	$ 801	4,434
Net appreciation (depreciation) in fair value of investments	$ 18,128	201

12. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits and the change in net assets available for benefits per the financial statements to Schedule H of the Form 5500:

	2020	2019
Net assets available for benefits per financial statements	$ 161,886	$ 76,062
Employee contributions receivable	(1,618)	-
Other employer contributions receivable	(989)	(102)
Net assets per Form 5500	$ 159,279	$ 75,960
Increase in net assets available for benefits per financial statements	$ 85,824	$ 74,892
Deemed distributions on defaulted loans	(428)	-
Employee contributions receivable	(1,618)	-
Other employer contributions receivable	(989)	(102)
Prior year other employer contributions receivable	102	-
Total increase per Form 5500	$ 82,891	$ 74,790

13. EXTRAORDINARY EVENT

During the year ended December 31, 2020, there was a worldwide public health emergency declared related to COVID-19. The response to this public health emergency mandated by United States government officials included forced closures of various businesses and organizations for a length of time. These closures and the health emergency have affected normal day to day operations of the Plan Sponsor, its customers, and its vendors, the impact of which still continues through the date these financial statements were issued. The related future financial impact on the Plan Sponsor of these closures, changes in the supply chain, and changes in customer behavior cannot be estimated at this time.

14. DATE OF MANAGEMENT'S REVIEW

Management has evaluated subsequent events as of October 8, 2021, the date the financial statements were available for issue. Plan management is not aware of any other significant events that occurred subsequent to the statement of net assets available for benefits date but prior to the issuance of this report that require adjustment to the financial statements or disclosure in the notes to the financial statements.

SUPPLEMENTARY INFORMATION

FMK RESTAURANT GROUP - 401(K)
PLAN #001
EIN: 47-2612431
For the year ended December 31, 2020

SCHEDULE H LINE 4-I - SCHEDULE OF ASSETS HELD AT YEAR END

(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
	VANGUARD FEDERAL MM INVESTOR SHS	Money Market Fund	**	$ 62
*	AMERICAN DIAMOND HILL LARGE CAP PORT R2	Common Collective Trust	**	121
	AMERICAN FUNDS AMCAP CL R6	Mutual Fund	**	320
	FIDELITY MID CAP INDEX	Mutual Fund	**	62
	THE HARTFORD MIDCAP CL R6	Mutual Fund	**	63
	JPMORGAN SMALL CAP GROWTH R6	Mutual Fund	**	12,225
	VICTORY INTEGRITY SMALL CAP VALUE R6	Mutual Fund	**	249
	WELLS FARGO SPECIAL MID CAP VALUE R6	Mutual Fund	**	3,359
*	BLACKROCK EAFE EQUITY INDEX R	Common Collective Trust	**	1,987
*	BLACKROCK RUSSELL 2000 INDEX R	Common Collective Trust	**	11,161
*	CORE BOND FUND R1	Common Collective Trust	**	863
*	BLACKROCK EQUITY INDEX FUND 1	Common Collective Trust	**	9,655
*	MYWAYRETIREMENT INDEX 2030 CL R	Mutual Fund	**	8,919
*	MYWAYRETIREMENT INDEX 2040 CL R	Mutual Fund	**	5,462
*	MYWAYRETIREMENT INDEX 2060 CL R	Mutual Fund	**	5,046
*	MYWAYRETIREMENT INDEX 2025 CL R	Mutual Fund	**	19,807
*	MYWAYRETIREMENT INDEX 2035 CL R	Mutual Fund	**	14,291
*	MYWAYRETIREMENT INDEX 2050 CL R	Mutual Fund	**	12,128
*	MYWAYRETIREMENT INDEX 2055 CL R	Mutual Fund	**	18,546
*	MYWAYRETIREMENT INDEX 2045 CL R	Mutual Fund	**	25,438
	AMERICAN FUNDS EUROPACIFIC GROWTH R6	Mutual Fund	**	913
	AMERICAN FUNDS NEW WORLD R6	Mutual Fund	**	2,096
	PRINCIPAL GLOBAL REAL EXTATE SEC R6	Mutual Fund	**	61
	DFA INFLATION-PROTECTED SEC PORT INST CL	Mutual Fund	**	252
	MFS TOTAL RETURN CL R6	Mutual Fund	**	125
*	Participant Loans	Interest rates - 4.25% - 6.75%	**	6,068
	Total			$ 159,279

Notes:
Column (a) - "*" indicates a party-in-interest
Column (d) - "**" costs omitted for participant-directed investments