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

2018

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

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
- [X] 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
SANHYD INC 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2004

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)
SANHYD, INCORPORATED

551 ESTUDILLO AVE
SAN LEANDRO, CA 94577-3213

2b Employer Identification Number (EIN)
94-3178914

2c Plan Sponsor's telephone number
510-352-3402

2d Business code (see instructions)
623000

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.	09/25/2019	VAN HA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

3b Administrator's EIN

3c Administrator's telephone number

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

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	811
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)**	621
a(2) Total number of active participants at the end of the plan year	**6a(2)**	922
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	5
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	927
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	927
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	21
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:

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

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)	[ ]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
SANHYD INC 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
SANHYD, INCORPORATED

D Employer Identification Number (EIN)
94-3178914

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)	212	440
(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)	7128	2231
(9) Value of interest in common/collective trusts	1c(9)	0	0
(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)	1093675	1048192
(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	1101015	1050863
	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	1101015	1050863

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)	95965	
	(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)		95965
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	4	
	(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)	76	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		80
	(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)	143206	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		143206
	(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)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-203699
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		35552
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	46334	
(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)		46334
f Corrective distributions (see instructions)	2f		39277
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	93	
(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)		93
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		85704
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-50152
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) [X] Unqualified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: NEEKA ACCOUNTANCY CORPORATION **(2)** EIN: 94-3382202

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		110102
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
SANHYD INC 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
SANHYD, INCORPORATED

D Employer Identification Number (EIN)
94-3178914

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

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

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

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

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

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

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

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

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

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

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

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

FINANCIAL STATEMENTS
OF

Sanhyd Inc 401(K) Profit Sharing Plan & Trust

551 Estudillo Ave.

San Leandro, CA 94577-3213

For the year ended December 31, 2018

NEEKA ACCOUNTANCY CORPORATION

CERTIFIED PUBLIC ACCOUNTANTS & MANAGEMENT CONSULTANTS

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Sanhyd Inc 401(k) Profit Sharing Plan & Trust

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INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
the Sanhyd Inc 401(k) Profit Sharing Plan & Trust

We have audited the accompanying financial statements of Sanhyd Inc 401(k) Profit Sharing Plan & Trust, which comprise the statement of net assets available for benefits as of December 31, 2018, and the related statement 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 our audits. The 2017 information presented for comparative purposes has been audited by a processor Auditor. As such, our responsibility does not extent to 2017 information. We conducted our audit of 2018 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 auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the 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.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Sanhyd Inc 401(k) Profit Sharing Plan & Trust as of December 31, 2018, and the changes in net assets available for benefits for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of assets, together referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the 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.

Neeka Corp. CPA's

Neeka Accountancy Corporations, CPAs
Milpitas, California
August 16, 2019

Sanhyd Inc 401(k) Profit Sharing Plan Trust
Statement of Net Assets Available for Benefits
December 31, 2018

Assets

	December 31, 2018	December 31, 2017
Investments	$ 1,048,632	$ 1,093,887
Participant notes receivable	2,231	7,128
Total assets	$ 1,050,863	$ 1,101,015
Net assets available for benefits	$ 1,050,863	$ 1,101,015

See Accompanying Notes to Financial Statements

Sanhyd Inc 401(k) Profit Sharing Plan Trust
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2018

	December 31, 2018	December 31, 2017
ADDITIONS TO NET ASSETS		
Additions to net assets attributed to:		
Investment income (loss):		
Interest and dividends	143,210	105,802
Net appreciation (depreciation)	(203,699)	67,030
Total investment income	(60,489)	172,832
Interest from participants notes receivable	76	409
Contributions:		
Participants	56,688	31,562
Total additions (deductions)	(3,725)	204,803
DEDUCTIONS FROM NET ASSETS		
Decutions from net assets attributed to:		
Benefits paid to participants	46,334	4,813
Administrative expense	93	-
Total deductions	46,427	4,813
Net increase (decrease)	(50,152)	199,990
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	1,101,015	901,025
End of year	1,050,863	1,101,015

See Accompanying Notes to Financial Statements

NOTE 1 – DESCRIPTION OF PLAN

The following description of the Sanhyd Inc. ("the Company") 401 (K) Profit Sharing Plan and Trust ("the Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General: The plan is a defined contribution retirement plan of profit-sharing type containing a cash or deferred arrangement described in Internal Revenue Code Section 401(k). All employees of the Company who are 21 or over, excluding employees under collective bargaining agreements, employees who are employed by an affiliated employer which does not adopt this Plan, non-resident aliens, and leased employees, are eligible to participate in the Plan after providing three months of service and whose hours of service a year are 1,000 or more. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA) and certain provisions of the Internal Revenue Code.

The Plan assets are in an account held by Merrill Lynch, Pierce, Fenner & Smith Inc. The Plan offers a variety of core funds and allows participants to rollover amounts from other qualified plans or IRA's.

The following employers participate in the Plan:

Federal Tax Identification Number	Participating Employer Name	Designation
94-3178914	Sanhyd, Inc	Related
05-0632366	Red Bluff Health Care Inc	Related
56-2674928	PVR Rehab Services Inc	Related
20-2276015	Shattuck Health Care Inc	Related
51-0599132	Hycare Inc	Related
55-0830452	San Leandro Health Care	Related
55-0830450	Willow Pass Health Care	Related

Plan administration: The plan is administered under a written plan and trust agreement, and the trustee of that agreement is responsible for trusteeing the Plan's assets. Pratap Poddatoorz is the appointed trustee for the Plan and act at the direction of the Plan administrator. The Administrator is Sanhyd Inc. All matters other than investments that concern the operation of the Plan are the responsibility of the Administrator. The Administrator has the power and authority to interpret the terms of the Plan based on the Plan document and existing laws and regulations, as well as the power to determine all questions that arise under the Plan. Such power and authority include, for example, the administrative discretion necessary to resolve issues with respect to an employee's eligibility for benefits, credited service, disability and retirement, or to interpret any other term contained in the Plan and related documents. The Plan Administrator's interpretations and determinations are binding on all Participants, employees, former employees and their beneficiaries.

NOTE 1 – DESCRIPTION OF PLAN (Continued)

Participant contributions: Participation in the Plan is voluntary. Participant's deferral percentage is subject to the maximum annual limit determined by the Internal Revenue Service. The maximum annual amount that can be contributed to a 401(k) arrangement as an elective deferral, that is, as a pre-tax contribution, is $18,500 for 2018, or 100% of employee's compensation, whichever is less. For fiscal years beginning after December 31, 2001, individuals age 50 or over by the end of the plan year are allowed to make additional contributions to a 401(k) plan, in excess of the standard limits. Such additional contributions will be limited to the lesser of a specified dollar amount ($6,000 in 2018) or the participant's compensation for the year reduced by the participant's other elective deferrals. Participants may also contribute amounts representing distributions from other qualified defined contribution plans.

Participants direct the investment of their contributions into various investment options offered by the Plan.

Employer contributions: The Company currently makes no matching contributions. The plan provides the option for the company to make discretionary profit-sharing contributions. No such discretionary contributions were made in 2018.

Participant Account: Each participant's account is credited with the participant's contributions and Company matching contributions, if applicable, as well as allocations of the Company's profit-sharing contribution and Plan earnings. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Participant notes receivable: Under the terms of the Plan, participants may borrow from their account up to 50 percent of their vested account balance. Participants are allowed to have one loan outstanding at a time. Loans must be repaid to the Plan through salary deductions over a period not to exceed five years or up to fifteen years for the purchase of primary residence. All loans become immediately payable in the event of default or termination of employment. In the event loan payments are not received when they are due, the Plan administrator may declare the loan in default.

Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts, if any, plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after 5 years of participation in the Plan.

NOTE 1 – DESCRIPTION OF PLAN (Continued)

Payment of Benefits: On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Investment options: Upon enrollment in the Plan, a participant may direct his or her contributions in percentage increments into a series of mutual funds or a money fund, offered by the Plan. Participants may change their investments at any time.

Forfeited accounts: At December 31, 2018, there have been no forfeited nonvested accounts.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Use of estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets and liabilities, changes therein, disclosure of contingent assets and liabilities and changes in net assets available for benefits. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition
Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers and custodians.

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

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition (Continued)
The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

Level 1	Quoted prices for identical assets in active markets to which the plan has access at the measurement date.
Level 2	Inputs other than quoted prices included in level 1 that are observable for the asset, either directly or indirectly. Level 2 inputs include: - Quoted prices for similar assets; - Quoted prices for identical or similar assets in markets that are not active; - Observable Inputs other than quoted prices for the asset (for example, interest rates and yield curves); and - Inputs derived principally from or corroborated by, observable market data by correlation or by other means.
Level 3	Unobservable inputs for the asset. Unobservable inputs should be used to measure the fair value to the extent that observable inputs are not available.

The asset's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. See note 3 for table of assets by hierarchy.

Following is a description of the valuation methodologies used for assets measured at fair value.

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 SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Participant loans are classified as notes receivable and recorded at their unpaid principal balance plus any accrued but unpaid interest receivable. Notes receivable due from participants totaled $2,231 at December 31, 2018.

NOTE 3 - INVESTMENTS

The following tables set forth the fair value hierarchy, by level, and the Plan's investments at fair value as of December 31, 2018:

Investments at Fair Value as of December 31, 2018

	Level 1	Level 2	Level 3	Total
Mutual funds	$ 1,048,192			$ 1,048,192
Money market	440			440
Investments at fair value	$ 1,048,632	$ -	$ -	$ 1,048,632

NOTE 4 – SIGNIFICANT CONCENTRATION OF CREDIT RISK

The Plan provides for various investment options in any one of a combination of mutual funds that invest in stocks, bonds, fixed income securities and other investment securities. These investments are exposed to various risks, such as credit, interest rate, and market risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participant's account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 5—INCOME TAX STATUS

The IRS has determined and informed the Company as of 2004 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6—PLAN TERMINATION

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

NOTE 7—RELATED PARTY AND PARTY-IN INTEREST TRANSACTIONS

Certain Plan investments in mutual funds are managed by Merrill Lynch, Pierce, Fenner & Smith Inc, the custodian of the Plan. Any purchases or sales of these funds are performed on the open market. Such transactions, while considered party-in interest transactions under ERISA regulations, are permitted under provisions of the Plan, and are specifically exempt from prohibited party-in interest regulations under ERISA.

Expenses of maintaining the Plan are paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefits paid are charged directly to the related participant's account and are included in administrative expenses.

NOTE 8—SUBSEQUENT EVENTS

Management has evaluated subsequent events through August 16, 2019 the date which financial statements were available for issue, and determined there were no material subsequent events that require adjustment or disclosure in the Plan's financial statements.

SUPPLEMENTAL SCHEDULES

Sanhyd Inc. 401 (k) Plan
Schedule of Assets (Held at End of Year)
December 31, 2018

Identify of Issue, Borrower, Lessor, or Similar Party	Description of Investment including Maturity Date, Rate of Interest, Par or Maturity Value	Current or Market Value
Held by Merrill Lynch, Pierce, Fenner & Smith Inc.*		
Cash	Money Market Fund	$ 440
Blackrock Advantage Large Cap	Mutual Fund	37,357
Blackrock Advantage Large Cap Value	Mutual Fund	20,004
Blackrock U.S. Government Bond Portfolio	Mutual Fund	175
Blackrock Capital Appreciation Fund	Mutual Fund	347,844
Blackrock Advantage U.S. Total Market Fund	Mutual Fund	92,273
Blackrock Global Allocation Fund	Mutual Fund	433,771
Blackrock International Fund	Mutual Fund	401
Davis NY Venture	Mutual Fund	26,984
JPMorgan Small Cap	Mutual Fund	52,990
MFS Total Return	Mutual Fund	34,880
Wells Fargo Core Bond Fund	Mutual Fund	1,451
Rounding		62
Total		$ 1,048,632

*Party-in-interest under ERISA

Sanhyd Inc. 401 (k) Plan
Schedule of Assets (Held at End of Year)
December 31, 2017

Identify of Issue, Borrower, Lessor, or Similar Party	Description of Investment including Maturity Date, Rate of Interest, Par or Maturity Value	Current or Market Value
Held by Merrill Lynch, Pierce, Fenner & Smith Inc.*		
Cash	Money Market Fund	$ 212
Blackrock Advantage Large Cap	Mutual Fund	40,159
Blackrock Advantage Large Cap Value	Mutual Fund	33,444
Blackrock Capital Appreciation Fund	Mutual Fund	325,173
Blackrock Value	Mutual Fund	103,680
Blackrock Global Allocation Fund	Mutual Fund	439,739
Blackrock International Government	Mutual Fund	44
Davis NY Venture	Mutual Fund	42,458
JPMorgan Small Cap	Mutual Fund	53,621
MFS Total Return	Mutual Fund	46,081
Wells Fargo Core Bond Fund	Mutual Fund	399
Blackrock International Fund	Mutual Fund	8,877
Total		$ 1,093,887

*Party-in-interest under ERISA

FINANCIAL STATEMENTS
OF

Sanhyd Inc 401(K) Profit Sharing Plan & Trust

551 Estudillo Ave.

San Leandro, CA 94577-3213

For the year ended December 31, 2018

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INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
the Sanhyd Inc 401(k) Profit Sharing Plan & Trust

We have audited the accompanying financial statements of Sanhyd Inc 401(k) Profit Sharing Plan & Trust, which comprise the statement of net assets available for benefits as of December 31, 2018, and the related statement 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

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Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. The 2017 information presented for comparative purposes has been audited by a processor Auditor. As such, our responsibility does not extent to 2017 information. We conducted our audit of 2018 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 auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the 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.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Sanhyd Inc 401(k) Profit Sharing Plan & Trust as of December 31, 2018, and the changes in net assets available for benefits for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of assets, together referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the 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.

Neeka Corp. CPA's

Neeka Accountancy Corporations, CPAs
Milpitas, California
August 16, 2019

Sanhyd Inc 401(k) Profit Sharing Plan Trust
Statement of Net Assets Available for Benefits
December 31, 2018

Assets

	December 31, 2018	December 31, 2017
Investments	$ 1,048,632	$ 1,093,887
Participant notes receivable	2,231	7,128
Total assets	$ 1,050,863	$ 1,101,015
Net assets available for benefits	$ 1,050,863	$ 1,101,015

See Accompanying Notes to Financial Statements

Sanhyd Inc 401(k) Profit Sharing Plan Trust
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2018

	December 31, 2018	December 31, 2017
ADDITIONS TO NET ASSETS		
Additions to net assets attributed to:		
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Total deductions	46,427	4,813
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NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	1,101,015	901,025
End of year	1,050,863	1,101,015

See Accompanying Notes to Financial Statements

NOTE 1 – DESCRIPTION OF PLAN

The following description of the Sanhyd Inc. ("the Company") 401 (K) Profit Sharing Plan and Trust ("the Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General: The plan is a defined contribution retirement plan of profit-sharing type containing a cash or deferred arrangement described in Internal Revenue Code Section 401(k). All employees of the Company who are 21 or over, excluding employees under collective bargaining agreements, employees who are employed by an affiliated employer which does not adopt this Plan, non-resident aliens, and leased employees, are eligible to participate in the Plan after providing three months of service and whose hours of service a year are 1,000 or more. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA) and certain provisions of the Internal Revenue Code.

The Plan assets are in an account held by Merrill Lynch, Pierce, Fenner & Smith Inc. The Plan offers a variety of core funds and allows participants to rollover amounts from other qualified plans or IRA's.

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55-0830450	Willow Pass Health Care	Related

Plan administration: The plan is administered under a written plan and trust agreement, and the trustee of that agreement is responsible for trusteeing the Plan's assets. Pratap Poddatoorz is the appointed trustee for the Plan and act at the direction of the Plan administrator. The Administrator is Sanhyd Inc. All matters other than investments that concern the operation of the Plan are the responsibility of the Administrator. The Administrator has the power and authority to interpret the terms of the Plan based on the Plan document and existing laws and regulations, as well as the power to determine all questions that arise under the Plan. Such power and authority include, for example, the administrative discretion necessary to resolve issues with respect to an employee's eligibility for benefits, credited service, disability and retirement, or to interpret any other term contained in the Plan and related documents. The Plan Administrator's interpretations and determinations are binding on all Participants, employees, former employees and their beneficiaries.

NOTE 1 – DESCRIPTION OF PLAN (Continued)

Participant contributions: Participation in the Plan is voluntary. Participant's deferral percentage is subject to the maximum annual limit determined by the Internal Revenue Service. The maximum annual amount that can be contributed to a 401(k) arrangement as an elective deferral, that is, as a pre-tax contribution, is $18,500 for 2018, or 100% of employee's compensation, whichever is less. For fiscal years beginning after December 31, 2001, individuals age 50 or over by the end of the plan year are allowed to make additional contributions to a 401(k) plan, in excess of the standard limits. Such additional contributions will be limited to the lesser of a specified dollar amount ($6,000 in 2018) or the participant's compensation for the year reduced by the participant's other elective deferrals. Participants may also contribute amounts representing distributions from other qualified defined contribution plans.

Participants direct the investment of their contributions into various investment options offered by the Plan.

Employer contributions: The Company currently makes no matching contributions. The plan provides the option for the company to make discretionary profit-sharing contributions. No such discretionary contributions were made in 2018.

Participant Account: Each participant's account is credited with the participant's contributions and Company matching contributions, if applicable, as well as allocations of the Company's profit-sharing contribution and Plan earnings. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Participant notes receivable: Under the terms of the Plan, participants may borrow from their account up to 50 percent of their vested account balance. Participants are allowed to have one loan outstanding at a time. Loans must be repaid to the Plan through salary deductions over a period not to exceed five years or up to fifteen years for the purchase of primary residence. All loans become immediately payable in the event of default or termination of employment. In the event loan payments are not received when they are due, the Plan administrator may declare the loan in default.

Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts, if any, plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after 5 years of participation in the Plan.

NOTE 1 – DESCRIPTION OF PLAN (Continued)

Payment of Benefits: On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Investment options: Upon enrollment in the Plan, a participant may direct his or her contributions in percentage increments into a series of mutual funds or a money fund, offered by the Plan. Participants may change their investments at any time.

Forfeited accounts: At December 31, 2018, there have been no forfeited nonvested accounts.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Use of estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets and liabilities, changes therein, disclosure of contingent assets and liabilities and changes in net assets available for benefits. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition
Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers and custodians.

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

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition (Continued)
The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

Level 1	Quoted prices for identical assets in active markets to which the plan has access at the measurement date.
Level 2	Inputs other than quoted prices included in level 1 that are observable for the asset, either directly or indirectly. Level 2 inputs include: - Quoted prices for similar assets; - Quoted prices for identical or similar assets in markets that are not active; - Observable Inputs other than quoted prices for the asset (for example, interest rates and yield curves); and - Inputs derived principally from or corroborated by, observable market data by correlation or by other means.
Level 3	Unobservable inputs for the asset. Unobservable inputs should be used to measure the fair value to the extent that observable inputs are not available.

The asset's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. See note 3 for table of assets by hierarchy.

Following is a description of the valuation methodologies used for assets measured at fair value.

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 SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Participant loans are classified as notes receivable and recorded at their unpaid principal balance plus any accrued but unpaid interest receivable. Notes receivable due from participants totaled $2,231 at December 31, 2018.

NOTE 3 - INVESTMENTS

The following tables set forth the fair value hierarchy, by level, and the Plan's investments at fair value as of December 31, 2018:

Investments at Fair Value as of December 31, 2018

	Level 1	Level 2	Level 3	Total
Mutual funds	$ 1,048,192			$ 1,048,192
Money market	440			440
Investments at fair value	$ 1,048,632	$ -	$ -	$ 1,048,632

NOTE 4 – SIGNIFICANT CONCENTRATION OF CREDIT RISK

The Plan provides for various investment options in any one of a combination of mutual funds that invest in stocks, bonds, fixed income securities and other investment securities. These investments are exposed to various risks, such as credit, interest rate, and market risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participant's account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 5—INCOME TAX STATUS

The IRS has determined and informed the Company as of 2004 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6—PLAN TERMINATION

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

NOTE 7—RELATED PARTY AND PARTY-IN INTEREST TRANSACTIONS

Certain Plan investments in mutual funds are managed by Merrill Lynch, Pierce, Fenner & Smith Inc, the custodian of the Plan. Any purchases or sales of these funds are performed on the open market. Such transactions, while considered party-in interest transactions under ERISA regulations, are permitted under provisions of the Plan, and are specifically exempt from prohibited party-in interest regulations under ERISA.

Expenses of maintaining the Plan are paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefits paid are charged directly to the related participant's account and are included in administrative expenses.

NOTE 8—SUBSEQUENT EVENTS

Management has evaluated subsequent events through August 16, 2019 the date which financial statements were available for issue, and determined there were no material subsequent events that require adjustment or disclosure in the Plan's financial statements.

SUPPLEMENTAL SCHEDULES

Sanhyd Inc. 401 (k) Plan
Schedule of Assets (Held at End of Year)
December 31, 2018

Identify of Issue, Borrower, Lessor, or Similar Party	Description of Investment including Maturity Date, Rate of Interest, Par or Maturity Value	Current or Market Value
Held by Merrill Lynch, Pierce, Fenner & Smith Inc.*		
Cash	Money Market Fund	$ 440
Blackrock Advantage Large Cap	Mutual Fund	37,357
Blackrock Advantage Large Cap Value	Mutual Fund	20,004
Blackrock U.S. Government Bond Portfolio	Mutual Fund	175
Blackrock Capital Appreciation Fund	Mutual Fund	347,844
Blackrock Advantage U.S. Total Market Fund	Mutual Fund	92,273
Blackrock Global Allocation Fund	Mutual Fund	433,771
Blackrock International Fund	Mutual Fund	401
Davis NY Venture	Mutual Fund	26,984
JPMorgan Small Cap	Mutual Fund	52,990
MFS Total Return	Mutual Fund	34,880
Wells Fargo Core Bond Fund	Mutual Fund	1,451
Rounding		62
Total		$ 1,048,632

*Party-in-interest under ERISA

Sanhyd Inc. 401 (k) Plan
Schedule of Assets (Held at End of Year)
December 31, 2017

Identify of Issue, Borrower, Lessor, or Similar Party	Description of Investment including Maturity Date, Rate of Interest, Par or Maturity Value	Current or Market Value
Held by Merrill Lynch, Pierce, Fenner & Smith Inc.*		
Cash	Money Market Fund	$ 212
Blackrock Advantage Large Cap	Mutual Fund	40,159
Blackrock Advantage Large Cap Value	Mutual Fund	33,444
Blackrock Capital Appreciation Fund	Mutual Fund	325,173
Blackrock Value	Mutual Fund	103,680
Blackrock Global Allocation Fund	Mutual Fund	439,739
Blackrock International Government	Mutual Fund	44
Davis NY Venture	Mutual Fund	42,458
JPMorgan Small Cap	Mutual Fund	53,621
MFS Total Return	Mutual Fund	46,081
Wells Fargo Core Bond Fund	Mutual Fund	399
Blackrock International Fund	Mutual Fund	8,877
Total		$ 1,093,887

*Party-in-interest under ERISA