Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2019

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
PACIFIC BIOLABS 401(K) PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/2001

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)
PACIFIC BIOLABS

551 LINUS PAULING DR
HERCULES, CA 94547

2b Employer Identification Number (EIN)
94-2790483

2c Plan Sponsor's telephone number
510-964-9000

2d Business code (see instructions)
541990

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.	10/14/2020	JUDITH SPALDING
	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**	130
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)**	86
a(2) Total number of active participants at the end of the plan year	**6a(2)**	89
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	42
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	132
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	132
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	130
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	10
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2019 Form M-1 annual report. If the plan was not required to file the 2019 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2019** **This Form is Open to Public Inspection.**

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

A Name of plan
PACIFIC BIOLABS 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
PACIFIC BIOLABS

D Employer Identification Number (EIN)
94-2790483

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	675	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
J H GROWTH & INC T - JANUS SERVICE 43-1804048	0.35%	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP EQUITY INCOME - T. ROWE PRICE 52-2269240	0.15%	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

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

A Name of plan
PACIFIC BIOLABS 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
PACIFIC BIOLABS

D Employer Identification Number (EIN)
94-2790483

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	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)	788929	717577
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	133436	155721
(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)	8415297	10541906
(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	0
	(2) Employer real property	1d(2)	0	0
e	Buildings and other property used in plan operation	1e	0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f	9337662	11415204
	Liabilities			
g	Benefit claims payable	1g	0	0
h	Operating payables	1h	0	0
i	Acquisition indebtedness	1i	0	0
j	Other liabilities	1j	0	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	9337662	11415204

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)	310206	
	(B) Participants	2a(1)(B)	551975	
	(C) Others (including rollovers)	2a(1)(C)	0	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		862181
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	13550	
	(B) U.S. Government securities	2b(1)(B)	0	
	(C) Corporate debt instruments	2b(1)(C)	0	
	(D) Loans (other than to participants)	2b(1)(D)	0	
	(E) Participant loans	2b(1)(E)	5594	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		19144
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	487609	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		487609
	(3) Rents	2b(3)		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1853593
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		3222527
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1140639	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		1140639
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		2688
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	983	
(4) Other	2i(4)	675	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1658
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1144985
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2077542
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: SCHNEIDERMAN, KOHN, WINSTON LTD.CPA **(2)** EIN: 36-3286781

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		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

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

A Name of plan
PACIFIC BIOLABS 401(K) PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
PACIFIC BIOLABS

D Employer Identification Number (EIN)
94-2790483

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): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation_____

PACIFIC BIOLABS 401(K) PLAN

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2019

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SK&W
Schneiderman, Kohn & Winston, Ltd.
Certified Public Accountants

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Suite 301
Chicago, IL 60631
(773) 631-3055
Fax: (773) 631-5797

October 12, 2020

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
Pacific BioLabs 401(k) Plan
Hercules, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Pacific BioLabs 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements 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 3, which was certified by Fidelity Management and Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of December 31, 2019 and 2018, and for the year ended December 31, 2019, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule, Schedule H, Line 4i – Schedule of Assets (Held at End of Year), as of December 31, 2019, is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is 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 this supplemental schedule.

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.

PACIFIC BIOLABS 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018

	2019	2018
ASSETS		
Investments, at fair value	$ 11,259,483	$ 9,204,226
Notes receivable from participants	155,721	133,436
TOTAL ASSETS	11,415,204	9,337,662
NET ASSETS AVAILABLE FOR BENEFITS	$ 11,415,204	$ 9,337,662

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

PACIFIC BIOLABS 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2019

ADDITIONS:		
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	$	1,853,593
Dividends		501,158
Interest income - notes receivable from participants		5,594
		2,360,345
Contributions:		
Participants		551,975
Employer		310,206
		862,181
TOTAL ADDITIONS		3,222,526
DEDUCTIONS:		
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants		1,143,327
Administrative expenses		1,657
TOTAL DEDUCTIONS		1,144,984
NET INCREASE		2,077,542
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		9,337,662
End of year	$	11,415,204

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

1. DESCRIPTION OF PLAN

The following description of Pacific BioLabs (the Company) 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have attained age of 20 and have fulfilled a three-month work requirement. Eligible employees become participants in the Plan on the first day of each month immediately following the attainment of these requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of l974 (ERISA). The Plan's Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan's Board of Trustees.

Contributions

Participants can contribute a portion of their compensation as defined by the Plan, subject to certain limitations under the Internal Revenue Code (IRC). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Company provides a safe harbor matching contribution based upon the contribution of the individual participants. The matching contribution for 2019 and 2018 was 100% of the first 3% of each participant's contribution plus 50% of the next 2% of each participant's contribution, up to 4% of eligible compensation contributed by the participant. The Plan also provides for an additional discretionary Company contribution, based on a percentage of participant's gross compensation for the year. The Company contributed 2.5% and 2.5% for the year ended December 31, 2019 and 2018, respectively.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) Company matching contributions and (b) Plan earnings (losses), and charged with an allocation of any administrative expenses paid by the plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options

The assets of the Plan, both employee and employer, are allocated to the various funds at the direction of the participant. Participants are able to direct their account into a variety of mutual funds selected by the Plan's trustees.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The notes are secured by the balance in the participant's account and bear interest at rates ranging from 4.0% which are commensurate with local prevailing rates as determined quarterly by the plan administrator. Principal and interest is paid ratably through weekly payroll deductions.

1. DESCRIPTION OF PLAN (continued)

Vesting

Under the provisions of the Plan, participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's matching and discretionary contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is vested as follows:

Participants' Years of Service	Company Contributions Vesting Percentage
1 but less than 2	25%
2 but less than 3	50%
3 but less than 4	75%
4 or more	100%

To earn a year of service, participants must be credited with at least 501 hours of service during a Plan year. The Plan contains specific rules for crediting hours of service for vesting purposes.

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 of their vested account balance. 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.

If a terminating participant's vested account balance does not exceed $5,000, the Plan will distribute the benefit in a lump sum as soon as administratively practicable. Any distribution greater than $1,000 that is made to a participant without the participant's consent before the Participant's normal retirement age, will be rolled over to an individual retirement plan designated by the Plan Administrator.

The Plan permits hardship distributions if certain criteria are met, as well as in-service withdrawals for participants who have attained the age of 59 1/2.

Forfeited Accounts

At December 31, 2019 and 2018, forfeited non-vested accounts totaled $18,129 and $19,025, respectively. These amounts are to be used to reduce future Company contributions and to pay administrative fees.

.

2.. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements are prepared on the accrual basis of accounting in accordance with principles generally accepted in the United States of America (U.S. GAAP), except for benefits paid, which are recorded when paid.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2018, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document

Payment of Benefits

Benefits are recorded when paid.

Expenses

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

Subsequent Events

For the year ended December 31, 2019, the Plan has evaluated subsequent events for potential recognition and disclosure through October 12, 2020, the date the financial statements were available to be published.

3. CERTIFIED INVESTMENTS

Certain information related to investments disclosed in the accompanying financial statements and supplemental schedule, including investments held as of December 31, 2019 and 2018, and net appreciation (depreciation) in fair value of investments and dividends for the year ended December 31, 2019, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Fidelity Management and Trust Company, the trustee of the Plan.

The following is a summary of unaudited information as of December 31, 2019 and 2018, and for the year ended December 31, 2019, included in the Plan's financial statements and supplemental schedule:

	December 31,	
	2019	2018
Investments:		
Values of mutual funds:		
Vanguard Target Retirement 2055 Fund	$ 48,125	$ 10,008
J H Growth & Income T Fund	44,992	$ -
T. Rowe Price Equity Income Fund	103,766	64,603
Vanguard Target Retirement 2020 Fund	28,707	-
Vanguard Target Retirement 2030 Fund	11,708	2,316
Vanguard Target Retirement 2040 Fund	14,982	6,655
Vanguard Target Retirement 2050 Fund	30,018	6,683
Vanguard Value Index Admiral Fund	-	57,450
Vanguard 500 Index Admiral Fund	-	52,350
Vanguard Short-term Investment Grade Admiral Fund	165,731	-
Vanguard Small Cap Index Admiral Fund	-	373,096
Vanguard Target Retirement Income Fund	177,996	149,129
Vanguard Target Retirement 2025 Fund	18,219	3,410
Vanguard Target Retirement 2035 Fund	10,385	-
Vanguard Target Retirement 2045 Fund	24,880	4,549
Vanguard Target Retirement 2060 Fund	97,021	18,323
Fidelity Puritan Fund	130,702	106,070
Fidelity Contrafund	2,402,557	1,988,178
Fidelty Growth Company Fund	649,102	488,727
Fidelity Investment Grade Bond Fund	129,366	100,141
Fidelity Value Fund	35,928	28,810
Fidelity OTC Portfolio	1,005,664	676,637
Fidelity Overseas Fund	173,941	144,382
Fidelity Real Estate Investment Portfolio	115,563	60,775
Fidelity Blue Chip Growth Fund	493,457	383,798
Fidelity Low Priced Stock Fund	99,672	86,426
Fidelity Growth Strategies Fund	345,048	232,915
Fidelity Diversified International Fund	240,368	176,874

3. CERTIFIED INVESTMENTS (CONTINUED)

	2019	2018
Fidelity Dividend Growth Fund	-	63,613
Fidelity Mid Cap Stock Fund	83,174	85,917
Fidelity Large Cap Stock Fund	343,377	248,070
Fideltiy Small Cap Stock Fund	5,263	2,811
Fidelity Freedom Income Fund	15,511	32,152
Fidelity Freedom 2010 Fund	-	43,347
Fidelity Freedom 2020 Fund	336,395	257,787
Fidelity Freedom 2030 Fund	247,548	308,778
Fidelity Small Cap Discovery Fund	143,499	191,751
Fidelity Short Term Bond Fund	-	157,134
Fidelity Government Money Market Fund	717,577	788,929
Fidelity Freedom 2040 Fund	300,496	223,840
Fidelity Freedom 2015 Fund	444,592	358,134
Fidelity Freedom 2025 Fund	3,026	2,533
Fidelity Freedom 2035 Fund	72,678	189,659
Fidelity Freedom 2045 Fund	28,957	21,922
Fidelity Freedom 2050 Fund	175,563	246,111
Fidelity Freedom 2055 Fund	182,372	162,529
Fidelity U.S. Bond Index Fund	301,133	72,690
Fidelity 500 Index Fund	68,268	-
Fideltiy Global ex U.S. Index Fund	178,041	129,324
Fidelity Small Cap Index Fund	507,574	-
Fidelity Total Market Index Fund	334,451	271,158
Fidelity Extended Market Index Fund	84,236	92,776
Fidelity Inflation Protected Bond Index Fund	3,197	9,737
Fidelity Freedom 2060 Fund	26,615	21,219
Fidelity Large Cap Value Index Fund	58,042	-
	$ 11,259,483	$ 9,204,226

During 2019, the Plan's investments (including investments bought, sold, and held during the year) appreciated in value by $1,853,593.

4. FAIR VALUE MEASUREMENTS

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

4. FAIR VALUE MEASUREMENTS (CONTINUED)

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

Level 2 – Inputs to the valuation methodology include:

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

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2019 and 2018.

Mutual funds: Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission (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.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2019 and 2018:

	Level 1	Level 2	Level 3	Total Fair Value
December 31, 2019				
Mutual funds	$ 11,259,483	$ -	$ -	$ 11,259,483
Total	$ 11,259,483	$ -	$ -	$ 11,259,483
December 31, 2018				
Mutual funds	$ 9,204,226	$ -	$ -	$ 9,204,226
Total	$ 9,204,226	$ -	$ -	$ 9,204,226

5. RELATED PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party in interest transactions. Fees paid by the Plan for the investment management services amounted to $1,657 for the year ended December 31, 2019.

Fidelity Management Trust Company provides certain administrative services to the Plan pursuant to a Master Plan Services Agreement (MSA) between the Company and Fidelity Management Trust Company. Fidelity Management Trust Company receives revenue from mutual fund service providers for services provided to the funds. This revenue is used to offset certain amounts owed to Fidelity Management Trust Company for its administrative services to the Plan.

If the revenue received by Fidelity Management Trust Company from such mutual fund service providers exceeds the amount owed under the MSA, Fidelity Management Trust Company remits the excess to the Plan's trust on a quarterly basis. Such amounts may be applied to pay Plan administrative expenses or allocated to the accounts of the participants. During 2019 and 2018, there were no excess amounts. The Plan or Plan sponsor may make a payment to Fidelity Management Trust Company for administrative expenses not covered by revenue sharing.

All of these party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

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 would become 100% vested in their employer contributions.

7. TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated March 31, 2014 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.

U.S. GAAP requires 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 Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

8. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in 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.

SUPPLEMENTARY INFORMATION

PACIFIC BIOLABS 401(K) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

EIN: 94-2790483
PLAN NO: 002

(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
*	Fidelity Management Trust Company	Vanguard Target Retirement 2055 Fund		$ 48,125
*	Fidelity Management Trust Company	J H Growth & Income T Fund		44,992
*	Fidelity Management Trust Company	T. Rowe Price Equity Income Fund		103,766
*	Fidelity Management Trust Company	Vanguard Target Retirement 2020 Fund		28,707
*	Fidelity Management Trust Company	Vanguard Target Retirement 2030 Fund		11,708
*	Fidelity Management Trust Company	Vanguard Target Retirement 2040 Fund		14,982
*	Fidelity Management Trust Company	Vanguard Target Retirement 2050 Fund		30,018
*	Fidelity Management Trust Company	Vanguard Short-term Investment Grade Admiral Fund		165,731
*	Fidelity Management Trust Company	Vanguard Target Retirement Income Fund		177,996
*	Fidelity Management Trust Company	Vanguard Target Retirement 2025 Fund		18,219
*	Fidelity Management Trust Company	Vanguard Target Retirement 2035 Fund		10,385
*	Fidelity Management Trust Company	Vanguard Target Retirement 2045 Fund		24,880
*	Fidelity Management Trust Company	Vanguard Target Retirement 2060 Fund		97,021
*	Fidelity Management Trust Company	Fidelity Puritan Fund		130,702
*	Fidelity Management Trust Company	Fidelity Contrafund		2,402,557
*	Fidelity Management Trust Company	Fidelty Growth Company Fund		649,102
*	Fidelity Management Trust Company	Fidelity Investment Grade Bond Fund		129,366
*	Fidelity Management Trust Company	Fidelity Value Fund		35,928
*	Fidelity Management Trust Company	Fidelity OTC Portfolio		1,005,664
*	Fidelity Management Trust Company	Fidelity Overseas Fund		173,941
*	Fidelity Management Trust Company	Fidelity Real Estate Investment Portfolio		115,563
*	Fidelity Management Trust Company	Fidelity Blue Chip Growth Fund		493,457
*	Fidelity Management Trust Company	Fidelity Low Priced Stock Fund		99,672
*	Fidelity Management Trust Company	Fidelity Growth Strategies Fund		345,048
*	Fidelity Management Trust Company	Fidelity Diversified International Fund		240,368
*	Fidelity Management Trust Company	Fidelity Mid Cap Stock Fund		83,174
*	Fidelity Management Trust Company	Fidelity Large Cap Stock Fund		343,377
*	Fidelity Management Trust Company	Fideltiy Small Cap Stock Fund		5,263
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund		15,511
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund		336,395
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund		247,548

PACIFIC BIOLABS 401(K) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	444,592
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	3,026
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	72,678
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	28,957
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	175,563
*	Fidelity Management Trust Company	Fidelity Freedom 2055 Fund	182,372
*	Fidelity Management Trust Company	Fidelity U.S. Bond Index Fund	301,133
*	Fidelity Management Trust Company	Fidelity 500 Index Fund	68,268
*	Fidelity Management Trust Company	Fideltiy Global ex U.S. Index Fund	178,041
*	Fidelity Management Trust Company	Fidelity Small Cap Index Fund	507,574
*	Fidelity Management Trust Company	Fidelity Total Market Index Fund	334,451
*	Fidelity Management Trust Company	Fidelity Extended Market Index Fund	84,236
*	Fidelity Management Trust Company	Fidelity Inflation Protected Bond Index Fun	3,197
*	Fidelity Management Trust Company	Fidelity Freedom 2060 Fund	26,615
*	Fidelity Management Trust Company	Fidelity Large Cap Value Index Fund	58,042
*	Notes Receivable from Participants	Interest Rate 4.00% to 4.50%	155,721
			$11,415,204

* Permitted parties-in-interest.

** Cost information is not required of participant-directed investments and, therefore, is not included.

PACIFIC BIOLABS 401(K) PLAN

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2019

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October 12, 2020

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
Pacific BioLabs 401(k) Plan
Hercules, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Pacific BioLabs 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, the related statement of changes in net assets available for benefits for the year ended December 31, 2019, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements 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 3, which was certified by Fidelity Management and Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of December 31, 2019 and 2018, and for the year ended December 31, 2019, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule, Schedule H, Line 4i – Schedule of Assets (Held at End of Year), as of December 31, 2019, is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is 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 this supplemental schedule.

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.

PACIFIC BIOLABS 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018

	2019	2018
ASSETS		
Investments, at fair value	$ 11,259,483	$ 9,204,226
Notes receivable from participants	155,721	133,436
TOTAL ASSETS	11,415,204	9,337,662
NET ASSETS AVAILABLE FOR BENEFITS	$ 11,415,204	$ 9,337,662

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

PACIFIC BIOLABS 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2019

ADDITIONS:		
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	$	1,853,593
Dividends		501,158
Interest income - notes receivable from participants		5,594
		2,360,345
Contributions:		
Participants		551,975
Employer		310,206
		862,181
TOTAL ADDITIONS		3,222,526
DEDUCTIONS:		
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants		1,143,327
Administrative expenses		1,657
TOTAL DEDUCTIONS		1,144,984
NET INCREASE		2,077,542
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year		9,337,662
End of year	$	11,415,204

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

1. DESCRIPTION OF PLAN

The following description of Pacific BioLabs (the Company) 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have attained age of 20 and have fulfilled a three-month work requirement. Eligible employees become participants in the Plan on the first day of each month immediately following the attainment of these requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of l974 (ERISA). The Plan's Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan's Board of Trustees.

Contributions

Participants can contribute a portion of their compensation as defined by the Plan, subject to certain limitations under the Internal Revenue Code (IRC). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Company provides a safe harbor matching contribution based upon the contribution of the individual participants. The matching contribution for 2019 and 2018 was 100% of the first 3% of each participant's contribution plus 50% of the next 2% of each participant's contribution, up to 4% of eligible compensation contributed by the participant. The Plan also provides for an additional discretionary Company contribution, based on a percentage of participant's gross compensation for the year. The Company contributed 2.5% and 2.5% for the year ended December 31, 2019 and 2018, respectively.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) Company matching contributions and (b) Plan earnings (losses), and charged with an allocation of any administrative expenses paid by the plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options

The assets of the Plan, both employee and employer, are allocated to the various funds at the direction of the participant. Participants are able to direct their account into a variety of mutual funds selected by the Plan's trustees.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The notes are secured by the balance in the participant's account and bear interest at rates ranging from 4.0% which are commensurate with local prevailing rates as determined quarterly by the plan administrator. Principal and interest is paid ratably through weekly payroll deductions.

1. DESCRIPTION OF PLAN (continued)

Vesting

Under the provisions of the Plan, participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's matching and discretionary contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is vested as follows:

Participants' Years of Service	Company Contributions Vesting Percentage
1 but less than 2	25%
2 but less than 3	50%
3 but less than 4	75%
4 or more	100%

To earn a year of service, participants must be credited with at least 501 hours of service during a Plan year. The Plan contains specific rules for crediting hours of service for vesting purposes.

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 of their vested account balance. 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.

If a terminating participant's vested account balance does not exceed $5,000, the Plan will distribute the benefit in a lump sum as soon as administratively practicable. Any distribution greater than $1,000 that is made to a participant without the participant's consent before the Participant's normal retirement age, will be rolled over to an individual retirement plan designated by the Plan Administrator.

The Plan permits hardship distributions if certain criteria are met, as well as in-service withdrawals for participants who have attained the age of 59 1/2.

Forfeited Accounts

At December 31, 2019 and 2018, forfeited non-vested accounts totaled $18,129 and $19,025, respectively. These amounts are to be used to reduce future Company contributions and to pay administrative fees.

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2.. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements are prepared on the accrual basis of accounting in accordance with principles generally accepted in the United States of America (U.S. GAAP), except for benefits paid, which are recorded when paid.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2018, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document

Payment of Benefits

Benefits are recorded when paid.

Expenses

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

Subsequent Events

For the year ended December 31, 2019, the Plan has evaluated subsequent events for potential recognition and disclosure through October 12, 2020, the date the financial statements were available to be published.

3. CERTIFIED INVESTMENTS

Certain information related to investments disclosed in the accompanying financial statements and supplemental schedule, including investments held as of December 31, 2019 and 2018, and net appreciation (depreciation) in fair value of investments and dividends for the year ended December 31, 2019, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Fidelity Management and Trust Company, the trustee of the Plan.

The following is a summary of unaudited information as of December 31, 2019 and 2018, and for the year ended December 31, 2019, included in the Plan's financial statements and supplemental schedule:

	December 31,	
	2019	2018
Investments:		
Values of mutual funds:		
Vanguard Target Retirement 2055 Fund	$ 48,125	$ 10,008
J H Growth & Income T Fund	44,992	$ -
T. Rowe Price Equity Income Fund	103,766	64,603
Vanguard Target Retirement 2020 Fund	28,707	-
Vanguard Target Retirement 2030 Fund	11,708	2,316
Vanguard Target Retirement 2040 Fund	14,982	6,655
Vanguard Target Retirement 2050 Fund	30,018	6,683
Vanguard Value Index Admiral Fund	-	57,450
Vanguard 500 Index Admiral Fund	-	52,350
Vanguard Short-term Investment Grade Admiral Fund	165,731	-
Vanguard Small Cap Index Admiral Fund	-	373,096
Vanguard Target Retirement Income Fund	177,996	149,129
Vanguard Target Retirement 2025 Fund	18,219	3,410
Vanguard Target Retirement 2035 Fund	10,385	-
Vanguard Target Retirement 2045 Fund	24,880	4,549
Vanguard Target Retirement 2060 Fund	97,021	18,323
Fidelity Puritan Fund	130,702	106,070
Fidelity Contrafund	2,402,557	1,988,178
Fidelty Growth Company Fund	649,102	488,727
Fidelity Investment Grade Bond Fund	129,366	100,141
Fidelity Value Fund	35,928	28,810
Fidelity OTC Portfolio	1,005,664	676,637
Fidelity Overseas Fund	173,941	144,382
Fidelity Real Estate Investment Portfolio	115,563	60,775
Fidelity Blue Chip Growth Fund	493,457	383,798
Fidelity Low Priced Stock Fund	99,672	86,426
Fidelity Growth Strategies Fund	345,048	232,915
Fidelity Diversified International Fund	240,368	176,874

3. CERTIFIED INVESTMENTS (CONTINUED)

	2019	2018
Fidelity Dividend Growth Fund	-	63,613
Fidelity Mid Cap Stock Fund	83,174	85,917
Fidelity Large Cap Stock Fund	343,377	248,070
Fideltiy Small Cap Stock Fund	5,263	2,811
Fidelity Freedom Income Fund	15,511	32,152
Fidelity Freedom 2010 Fund	-	43,347
Fidelity Freedom 2020 Fund	336,395	257,787
Fidelity Freedom 2030 Fund	247,548	308,778
Fidelity Small Cap Discovery Fund	143,499	191,751
Fidelity Short Term Bond Fund	-	157,134
Fidelity Government Money Market Fund	717,577	788,929
Fidelity Freedom 2040 Fund	300,496	223,840
Fidelity Freedom 2015 Fund	444,592	358,134
Fidelity Freedom 2025 Fund	3,026	2,533
Fidelity Freedom 2035 Fund	72,678	189,659
Fidelity Freedom 2045 Fund	28,957	21,922
Fidelity Freedom 2050 Fund	175,563	246,111
Fidelity Freedom 2055 Fund	182,372	162,529
Fidelity U.S. Bond Index Fund	301,133	72,690
Fidelity 500 Index Fund	68,268	-
Fideltiy Global ex U.S. Index Fund	178,041	129,324
Fidelity Small Cap Index Fund	507,574	-
Fidelity Total Market Index Fund	334,451	271,158
Fidelity Extended Market Index Fund	84,236	92,776
Fidelity Inflation Protected Bond Index Fund	3,197	9,737
Fidelity Freedom 2060 Fund	26,615	21,219
Fidelity Large Cap Value Index Fund	58,042	-
	$ 11,259,483	$ 9,204,226

During 2019, the Plan's investments (including investments bought, sold, and held during the year) appreciated in value by $1,853,593.

4. FAIR VALUE MEASUREMENTS

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

4. FAIR VALUE MEASUREMENTS (CONTINUED)

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

Level 2 – Inputs to the valuation methodology include:

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

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2019 and 2018.

Mutual funds: Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission (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.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2019 and 2018:

	Level 1	Level 2	Level 3	Total Fair Value
December 31, 2019				
Mutual funds	$ 11,259,483	$ -	$ -	$ 11,259,483
Total	$ 11,259,483	$ -	$ -	$ 11,259,483
December 31, 2018				
Mutual funds	$ 9,204,226	$ -	$ -	$ 9,204,226
Total	$ 9,204,226	$ -	$ -	$ 9,204,226

5. RELATED PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party in interest transactions. Fees paid by the Plan for the investment management services amounted to $1,657 for the year ended December 31, 2019.

Fidelity Management Trust Company provides certain administrative services to the Plan pursuant to a Master Plan Services Agreement (MSA) between the Company and Fidelity Management Trust Company. Fidelity Management Trust Company receives revenue from mutual fund service providers for services provided to the funds. This revenue is used to offset certain amounts owed to Fidelity Management Trust Company for its administrative services to the Plan.

If the revenue received by Fidelity Management Trust Company from such mutual fund service providers exceeds the amount owed under the MSA, Fidelity Management Trust Company remits the excess to the Plan's trust on a quarterly basis. Such amounts may be applied to pay Plan administrative expenses or allocated to the accounts of the participants. During 2019 and 2018, there were no excess amounts. The Plan or Plan sponsor may make a payment to Fidelity Management Trust Company for administrative expenses not covered by revenue sharing.

All of these party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

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 would become 100% vested in their employer contributions.

7. TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated March 31, 2014 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.

U.S. GAAP requires 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 Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

8. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in 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.

SUPPLEMENTARY INFORMATION

PACIFIC BIOLABS 401(K) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

EIN: 94-2790483
PLAN NO: 002

(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
*	Fidelity Management Trust Company	Vanguard Target Retirement 2055 Fund		$ 48,125
*	Fidelity Management Trust Company	J H Growth & Income T Fund		44,992
*	Fidelity Management Trust Company	T. Rowe Price Equity Income Fund		103,766
*	Fidelity Management Trust Company	Vanguard Target Retirement 2020 Fund		28,707
*	Fidelity Management Trust Company	Vanguard Target Retirement 2030 Fund		11,708
*	Fidelity Management Trust Company	Vanguard Target Retirement 2040 Fund		14,982
*	Fidelity Management Trust Company	Vanguard Target Retirement 2050 Fund		30,018
*	Fidelity Management Trust Company	Vanguard Short-term Investment Grade Admiral Fund		165,731
*	Fidelity Management Trust Company	Vanguard Target Retirement Income Fund		177,996
*	Fidelity Management Trust Company	Vanguard Target Retirement 2025 Fund		18,219
*	Fidelity Management Trust Company	Vanguard Target Retirement 2035 Fund		10,385
*	Fidelity Management Trust Company	Vanguard Target Retirement 2045 Fund		24,880
*	Fidelity Management Trust Company	Vanguard Target Retirement 2060 Fund		97,021
*	Fidelity Management Trust Company	Fidelity Puritan Fund		130,702
*	Fidelity Management Trust Company	Fidelity Contrafund		2,402,557
*	Fidelity Management Trust Company	Fidelty Growth Company Fund		649,102
*	Fidelity Management Trust Company	Fidelity Investment Grade Bond Fund		129,366
*	Fidelity Management Trust Company	Fidelity Value Fund		35,928
*	Fidelity Management Trust Company	Fidelity OTC Portfolio		1,005,664
*	Fidelity Management Trust Company	Fidelity Overseas Fund		173,941
*	Fidelity Management Trust Company	Fidelity Real Estate Investment Portfolio		115,563
*	Fidelity Management Trust Company	Fidelity Blue Chip Growth Fund		493,457
*	Fidelity Management Trust Company	Fidelity Low Priced Stock Fund		99,672
*	Fidelity Management Trust Company	Fidelity Growth Strategies Fund		345,048
*	Fidelity Management Trust Company	Fidelity Diversified International Fund		240,368
*	Fidelity Management Trust Company	Fidelity Mid Cap Stock Fund		83,174
*	Fidelity Management Trust Company	Fidelity Large Cap Stock Fund		343,377
*	Fidelity Management Trust Company	Fideltiy Small Cap Stock Fund		5,263
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund		15,511
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund		336,395
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund		247,548

PACIFIC BIOLABS 401(K) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	444,592
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	3,026
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	72,678
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	28,957
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	175,563
*	Fidelity Management Trust Company	Fidelity Freedom 2055 Fund	182,372
*	Fidelity Management Trust Company	Fidelity U.S. Bond Index Fund	301,133
*	Fidelity Management Trust Company	Fidelity 500 Index Fund	68,268
*	Fidelity Management Trust Company	Fideltiy Global ex U.S. Index Fund	178,041
*	Fidelity Management Trust Company	Fidelity Small Cap Index Fund	507,574
*	Fidelity Management Trust Company	Fidelity Total Market Index Fund	334,451
*	Fidelity Management Trust Company	Fidelity Extended Market Index Fund	84,236
*	Fidelity Management Trust Company	Fidelity Inflation Protected Bond Index Fun	3,197
*	Fidelity Management Trust Company	Fidelity Freedom 2060 Fund	26,615
*	Fidelity Management Trust Company	Fidelity Large Cap Value Index Fund	58,042
*	Notes Receivable from Participants	Interest Rate 4.00% to 4.50%	155,721
			$11,415,204

* Permitted parties-in-interest.

** Cost information is not required of participant-directed investments and, therefore, is not included.