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
MODERNIZING MEDICINE, INC. 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 08/01/2010

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)
MODERNIZING MEDICINE, INC.

4850 TREX AVENUE, SUITE 200
BOCA RATON, FL 33431

2b Employer Identification Number (EIN)
27-2070905

2c Plan Sponsor's telephone number
561-880-2998

2d Business code (see instructions)
511210

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2020	KATHLEEN BOCEK
	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**	793
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)**	701
a(2) Total number of active participants at the end of the plan year	**6a(2)**	738
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	118
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	857
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	857
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	704
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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
MODERNIZING MEDICINE, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MODERNIZING MEDICINE, INC.

D Employer Identification Number (EIN)
27-2070905

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

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?
64 65	RECORDKEEPER	350	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

(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
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

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

(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 D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
MODERNIZING MEDICINE, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MODERNIZING MEDICINE, INC.

D Employer Identification Number (EIN)
27-2070905

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

a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO STABLE ASSET - ADP59

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
27-3884161-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: STATE ST S&P MD CP IDX NL J

b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-0337987-347	C	0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

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
MODERNIZING MEDICINE, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MODERNIZING MEDICINE, INC.

D Employer Identification Number (EIN)
27-2070905

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)	0	1040928
(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)	328739	460602
(9) Value of interest in common/collective trusts	1c(9)	1364554	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)	18520511	28436076
(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	20213804	29937606
	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	20213804	29937606

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)	2217484	
	(B) Participants	2a(1)(B)	4197925	
	(C) Others (including rollovers)	2a(1)(C)	304133	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		6719542
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	3129	
	(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)	24853	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		27982
	(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)	706900	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		706900
	(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)		162727
(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)		3883243
c Other income	2c		5045
d Total income. Add all **income** amounts in column (b) and enter total	2d		11505439
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1748952	
(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)		1748952
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		29500
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)	0	
(4) Other	2i(4)	3185	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		3185
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1781637
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		9723802
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: MAYER HOFFMAN MCCANN P.C. **(2)** EIN: 43-1947695

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		171093
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		500000
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
MODERNIZING MEDICINE, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MODERNIZING MEDICINE, INC.

D Employer Identification Number (EIN)
27-2070905

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): 57-1198022 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_____

MODERNIZING MEDICINE, INC. 401k PLAN

SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

December 31, 2019

EIN: 27-2070905
Plan number: 001

	Participant Contributions Transferred Late to the Plan	Check Here If Late Participant Loan Repayments are Included:	Total That Constitute Nonexempt Prohibited			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contribution Pending Correction in VFCP	
2019	$ 171,093	X	$ 171,093	$ -	$ -	$ -

MODERNIZING MEDICINE, INC. 401(k) PLAN

FINANCIAL STATEMENTS

Years Ended December 31, 2019 and 2018

Mayer Hoffman McCann P.C.
2255 Glades Road, Suite 321A ▪ Boca Raton, FL 33431
Main: 561.994.5050 ▪ Fax: 561.241.0071 ▪ mhmcpa.com

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee
Modernizing Medicine, Inc. 401(k) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Modernizing Medicine, Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") 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 Trust Company ("Fidelity") and Reliance Trust Company ("Reliance"), the trustees of the Plan (the "Trustees"), except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that Fidelity held the Plan's investment assets and executed investment transactions from November 1, 2019 to December 31, 2019, and that Reliance held the Plan's investment assets and executed investment transactions from January 1, 2018 to October 31, 2019. The Plan administrator has obtained a certification from Fidelity as of December 31, 2019 and for the period November 1, 2019 to December 31, 2019 and a certification from Reliance for the period January 1, 2018 to October 31, 2019 that the information provided to the Plan administrator by the Trustees is complete and accurate.

KRESTON Member of Kreston International — a global network of independent accounting firms

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 schedules of assets (held at end of year) as of December 31, 2019 and delinquent participant contributions for the year then ended are required by the DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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



Boca Raton, Florida
October 14, 2020

MODERNIZING MEDICINE, INC. 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2019 and 2018

ASSETS	**2019**	**2018**
Investments at fair value:		
Registered investment companies	$ 28,436,076	$ 18,520,511
Money market funds	1,040,928	-
Common collective trust funds	-	790,103
Stable value common collective trust fund	-	574,451
	29,477,004	19,885,065
Receivables:		
Participants contributions	163,885	133,350
Employer contributions	91,031	71,315
Notes receivable from participants	460,602	328,739
	715,518	533,404
NET ASSETS AVAILABLE FOR BENEFITS	$ 30,192,522	$ 20,418,469

See Notes to Financial Statements

MODERNIZING MEDICINE, INC. 401(k) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2019 and 2018

	2019	2018
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 4,045,970	$ -
Dividends	715,074	832,436
	4,761,044	832,436
Interest income on notes receivable from participants	24,853	13,032
Contributions:		
Participants	4,228,460	3,558,705
Employer	2,237,200	1,859,608
Rollovers	304,133	802,703
	6,769,793	6,221,016
TOTAL ADDITIONS	11,555,690	7,066,484
DEDUCTIONS		
Net depreciation in fair value of investments	-	2,170,927
Benefits paid to participants	1,778,452	980,572
Administrative expenses	3,185	-
TOTAL DEDUCTIONS	1,781,637	3,151,499
NET INCREASE	9,774,053	3,914,985
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	20,418,469	16,503,484
End of year	$ 30,192,522	$ 20,418,469

See Notes to Financial Statements

(1) Description of plan

The following description of the Modernizing Medicine, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the plan document or summary plan description, both of which are available from the plan administrator, for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan sponsored by Modernizing Medicine, Inc. (the "Company") for the benefit of its employees who are at least twenty-one years of age. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Plan's Administrative Committee and the plan administrator have overall responsibility for the operation and management of the Plan, determine the appropriateness of the Plan's investment offerings, and monitor investment performance.

Plan administration - Effective November 1, 2019, (the "Effective Date") the Plan transitioned trustee services from Reliance Trust Company ("Reliance") and third party administrator services from ADP Retirement Services to Fidelity Management Trust Company ("Fidelity").

Contributions - Participants may contribute up to 80% of their pre-tax annual compensation, as defined in the plan document, and/or make Roth deferrals to the Plan, subject to annual limitations prescribed by the Internal Revenue Code (the "Code"). Prior to the Effective Date, participants were able to make contributions to the Plan on the first payroll cycle of the following month after becoming eligible to participate. After the Effective Date, participants may begin making contributions to the Plan immediately upon meeting eligibility requirements. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Additionally, participants age 50 or older, who are making contributions to the Plan, are allowed to make catch-up contributions, as defined in the plan document. Participants direct the investment of all contributions into various investment options offered by the Plan.

Under the provisions of the plan document, the Company makes safe harbor matching contributions to the Plan in an amount equal to 100% of the first 4% of eligible compensation that each participant defers to the Plan. The Company's safe harbor matching contributions applicable to the years ended December 31, 2019 and 2018 aggregated $2,237,200 and $1,859,608, respectively.

Additionally, at its discretion, the Company may make non-elective contributions to the Plan. No such non-elective contributions were made for the years ended December 31, 2019 and 2018.

All Company contributions are subject to limitations as prescribed by the Code.

Participant investment account options - The Plan currently offers various registered investment companies, and prior to the change to Fidelity, offered registered investment companies, common collective trust funds, and a stable value common collective trust, as investment options for participants.

(1) Description of plan (continued)

Participant accounts - Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contributions and (b) plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - Participants are immediately vested in their own contributions, and the Company's safe harbor matching contributions, plus actual earnings thereon. Participants are also immediately vested upon death, disability, or upon reaching normal retirement age, all as defined in the plan document. Vesting in the Company's non-elective contributions, plus actual earnings thereon, is subject to the following vesting schedule:

Years of Service	Vested %
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Prior service time for participants with an entity acquired in a previous year by the Company has been recognized for vesting purposes in the Plan.

Forfeited accounts - Forfeitures of terminated nonvested account balances are retained in the Plan and may be used to offset Company contributions and/or pay the Plan's administrative expenses. During the years ended December 31, 2019 and 2018, $10 and $1,647, respectively, of forfeitures were used to reduce employer contributions. Unapplied forfeitures at December 31, 2019 and 2018 amounted to $0 and $10, respectively.

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. All notes have a definite repayment period not to exceed five years, unless used for the purchase of a primary residence in which case the Plan permits a longer repayment period. The notes are secured by the balance in the participant's account and bear interest. From January 1, 2018 through October 31, 2019, interest was determined at the prime rate as published in the Wall Street Journal on the 14th day of the month in which the note originated, plus two percentage points. Effective November 1, 2019, notes shall bear interest at the prime rate as reported by Thomson Reuters plus one percentage point. Principal and interest are paid ratably through payroll deductions. Participants may not have more than one note outstanding at any time.

(1) Description of plan (continued)

Payment of benefits - On termination of service due to death, disability, retirement, other reasons as outlined in the plan document, or qualifying under certain "hardship" rules as prescribed by the Internal Revenue Service ("IRS"), a participant may elect to receive distributions from the Plan in an amount up to the value of the participant's vested interest in his or her account. Participants may also receive in-service distributions upon reaching 59½ years of age. Distributions of at least $5,000 may be made in the form of a lump sum payment, installments, or as a rollover into another qualified plan. Distributions of less than $5,000 and hardship distributions are made in the form of one lump sum payment.

(2) Summary of significant accounting policies

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

Use of estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

New accounting pronouncements - In 2019, the Plan adopted FASB ASU 2018-09, *"Codification Improvements"* which makes changes to a variety of topics, to clarify, correct errors in, or make minor improvements to the Accounting Standards Codification ("ASC"). The portion of ASU 2018-09 that is most applicable to the Plan relates to whether certain investments have a readily determinable fair value or qualify for the net asset value per share practical expedient in accordance with ASC 820, Fair Value Measurement. The standard is effective for fiscal years beginning after December 15, 2018, with early adoption permitted. The adoption of ASU 2018-09 did not have a material impact on the Plan's financial statements.

In August 2018, the FASB issued ASU 2018-13, *"Fair Value Measurement - Disclosure Framework (Topic 820)"*. The updated guidance improves the disclosure requirements on fair value measurements. The updated guidance is effective for fiscal years beginning after December 15, 2019. Early adoption is permitted for any removed or modified disclosures. Management does not expect the adoption of ASU 2018-13 to have a material impact on the Plan's financial statements.

Investment valuation and income recognition - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrative Committee and the plan administrator determine the Plan's valuation policies utilizing information provided by the investment trustee. See Note 4 for discussions of fair value measurements.

(2) Summary of significant accounting policies (continued)

Investment valuation and income recognition (continued) - 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. Capital gains distributions from registered investment companies are recorded as dividend income. 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 accrued but unpaid interest. Interest income on notes receivable from participants is recorded on the accrual basis. Fees related to the administration of a note are charged directly to the participant's account. If a participant ceases to make note repayments and the plan administrator deems the note to be in default, the remaining note balance is reduced and a benefit payment is recorded. No allowance for credit losses has been recorded as of December 31, 2019 or 2018.

Payments of benefits - Benefits are recorded when paid.

Administrative expenses - Certain expenses of the Plan are paid by the Company and are not included on the statements of changes in net assets available for benefits. Other expenses related to the Plan, such as recordkeeping fees, are paid for by the Plan and are recorded as administrative expenses on the statements of changes in net assets available for benefits. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

(3) Information prepared and certified by the trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Fidelity began serving as trustee of the Plan effective November 1, 2019 and has since managed the Plan's investment assets and executed investment transactions. Reliance was the Plan's prior trustee and managed the Plan's investment assets and executed investment transactions from January 1, 2018 through October 31, 2019. Accordingly, Fidelity (for the period November 1, 2019 to December 31, 2019) and Reliance (for the period January 1, 2018 to October 31, 2019), the trustees of the Plan, have certified that the following data included in the accompanying financial statements and supplemental schedules is complete and accurate:

- Investments at fair value
- Notes receivable from participants
- Net appreciation (depreciation) in fair value of investments
- Dividends
- Interest income on notes receivable from participants
- Schedule of assets (held at end of year)

(3) Information prepared and certified by the trustee (continued)

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

(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 below:

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 and liabilities in active markets; quoted prices for identical or similar assets and liabilities in inactive markets; inputs other than quoted market prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

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

Registered investment companies: Valued at the daily closing price as reported by the fund. These assets held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission and are deemed to be actively traded. These funds are required to publish their daily NAV and to transact at that price.

Money market funds: Valued at the quoted NAV of shares held by the Plan at year-end.

(4) Fair value measurements (continued)

Common collective trust funds: Valued at the NAV of units of a collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimating fair value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Stable value common collective trust: A stable value fund that is composed primarily of fully benefit-responsive investment contracts is valued at the NAV of units of the bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require 12 months' notification in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2019 and 2018:

	Investments at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 28,436,076	$ -	$ -	$ 28,436,076
Money market funds	1,040,928			1,040,928
Total assets in the fair value hierarchy	$ 29,477,004	$ -	$ -	$ 29,477,004

	Investments at Fair Value as of December 31, 2018			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 18,520,511	$ -	$ -	$ 18,520,511
Total assets in the fair value hierarchy	$ 18,520,511	$ -	$ -	18,520,511
Investments measured at NAV [(a)]				1,364,554
				$ 19,885,065

(a) In accordance with Subtopic 820-10, the stable value common collective trust and the common collective trust funds, which are valued at NAV, have not been classified in the fair value hierarchy. The fair value amounts presented in the tables above are intended to permit reconciliation of the fair value hierarchy to the line item presented on the statements of net assets available for benefits.

(4) Fair value measurements (continued)

Investments Measured Using the NAV per Share Practical Expedient - The following tables summarize investments for which fair value is based on NAV per share practical expedient as of December 31, 2019 and 2018, respectively. There are no participant redemption restrictions for these investments; the redemption notice period is applicable to the Plan.

Investments	Fair Value* 12/31/2019	Fair Value* 12/31/2018	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Stable Value Common Collective Trust:					
Invesco Stable Asset ADP59	$ -	$ 574,451	$ -	daily	none
Common Collective Trusts:					
SSGA S&P MD CP IDX NL J	-	790,103	-	daily	none
Total	$ -	$ 1,364,554	$ -		

The stable value common collective trust and the common collective trust funds are direct filing entities (“DFE”) as such disclosing the investment objective is not required.

(5) Plan termination

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

(6) Tax status

The IRS has determined that the volume submitter profit sharing plan provided by Fidelity is designed in accordance with applicable sections of the IRC and informed Fidelity of such in a letter dated March 31, 2014. The plan administrator has adopted the volume submitter plan effective November 1, 2019, and believes that the Plan is currently being operated in compliance with the applicable requirements of the IRC.

For the period from January 1, 2018 through October 31, 2019, the IRS has determined that the prototype standardized profit sharing plan adopted by the Company and provided by Automatic Data Processing, LLC (“ADP”) was designed in accordance with applicable sections of the Code and informed ADP of such in a letter dated July 8, 2014. Although the Plan was amended since the date of this letter, the plan administrator believes that the Plan was designed and operated in compliance with applicable sections of the Code.

(6) Tax status (continued)

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

(7) Risks, uncertainties, and concentrations

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported on the statements of net assets available for benefits.

At December 31, 2019, approximately 22% of the Plan's investments was invested in two funds. At December 31, 2018, approximately 13% of the Plan's investments was invested in one fund.

(8) Related party transactions and party-in-interest transactions

Prior to the Effective Date, the Plan's investments were shares of registered investment companies, common collective trust funds, and a stable value common collective trust in the custody of Reliance. Reliance was the trustee, as defined by the Plan, and therefore, transactions with Reliance qualified as party-in-interest transactions. ADP was the Plan's third party administrator prior to the Effective Date and provided certain recordkeeping and other services to the Plan, and therefore, ADP was also a party-in-interest to the Plan. Fees paid by the Plan to ADP amounted to $2,835 and $0 for the period January 1, 2019 to October 31, 2019 and the year ended December 31, 2018, respectively.

As of the Effective Date, the Plan's investments are shares of registered investment companies and money market funds managed by Fidelity. Fidelity is the trustee and recordkeeper for the Plan and therefore, these transactions qualify as party-in-interest transactions. Fees paid to Fidelity for the period November 1, 2019 to December 31, 2019 amounted to $350.

Additionally, certain investment related fees incurred by the Plan have been included in net appreciation (depreciation) in fair value of investments as they are paid through revenue sharing rather than as a direct payment. The Company pays directly any other fees related to the Plan's operations.

(9) Reconciliations of financial statements to Schedule H of Form 5500

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

	December 31, 2019	December 31, 2018
Net assets available for benefits per the financial statements	$ 30,192,522	$ 20,418,469
Less: participants contributions receivable	(163,885)	(133,350)
Less: employer contributions receivable	(91,031)	(71,315)
Net assets available for benefits per Schedule H of Form 5500	$ 29,937,606	$ 20,213,804

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements for the years ended December 31, 2019 and 2018 to Schedule H of Form 5500:

	Years Ended December 31, 2019	Years Ended December 31, 2018
Net increase per the financial statements	$ 9,774,053	$ 3,914,985
Less: current year participants contributions receivable	(163,885)	(133,350)
Less: current year employer contributions receivable	(91,031)	(71,315)
Add: prior year participants contributions receivable	133,350	99,633
Add: prior year employer contributions receivable	71,315	55,889
Net increase per Schedule H of Form 5500	$ 9,723,802	$ 3,865,842

Additionally, certain balances as reported on Schedule H of Form 5500 as of December 31, 2019 and 2018 have been reclassified on the accompanying statements of net assets available for benefits. These reclassifications have no impact on net assets available for benefits at December 31, 2019 and 2018 or changes in net assets available for benefits for the years then ended.

(10) Delinquent participant contributions and subsequent event

Defined contribution plans are required to remit employee contributions to the Plan as soon as they can be reasonably segregated from the employer's general assets. While the Company remitted all employee contributions, including participant loan repayments, to the Plan, contributions of $171,093 were not remitted within the required time period for the year ended December 31, 2019. The Company remitted the delinquent employee contributions during 2019 and is in the process of remitting any lost earnings as a result.

(11) Subsequent events

The Plan has evaluated subsequent events through October 14, 2020, which is the date the financial statements were available to be issued. Other than as noted below and in Note 10, no matters were identified for disclosure during this evaluation

(11) Subsequent events (continued)

On January 30, 2020, the World Health Organization declared the coronavirus originating in Wuhan, China (the "COVID-19 outbreak") creating risks to the international community as the virus spread globally beyond its point of origin. On March 11, 2020, the WHO classified the COVID-19 outbreak as a pandemic, based on the rapid increase in exposure globally.

The full impact of the COVID-19 outbreak continues to evolve as of the date of this report. This pandemic has adversely affected global economic activity and greatly contributed to significant deterioration and instability in financial markets. As a result, there has been heightened market risk and the Plan's investment portfolio has incurred significant volatility in fair value since December 31, 2019. Because the values of the Plan's individual investments have and will fluctuate in response to changing market conditions, the amount of losses that will be recognized in subsequent periods, if any, and the related impact on the Plan's liquidity cannot be determined at this time.

In December 2019, the Setting Every Community Up for Retirement Enhancement "(SECURE Act)" was signed into law, related to required minimum distributions and the limitation of life-time or stretch distributions to remain compliant under the applicable laws and regulations. These provisions are effective beginning January 1, 2020.

Additionally, on March 27, 2020, President Trump signed into law the "Coronavirus Aid, Relief, and Economic Security (CARES) Act." The CARES Act, among other things, includes several relief provisions available to tax-qualified retirement plans and their participants. Plan management has evaluated the relief provisions available to plan participants under the CARES Act and has implemented the following provisions:

- Special coronavirus distributions up to $100,000.
- Increased the available loan amount as described in Note 1 to the lesser of $100,000 or 100% of the participant's vested account balance.
- Extended the period for loan repayments, if applicable, up to one year.

The Plan is in the process of operationally being amended to implement certain changes permitted by the above law changes.

Effective April 30, 2020, the Plan was amended to remove safe harbor matching employer contributions from the Plan and will make discretionary matching employer contributions to eligible participants as defined in the Plan Document.

SUPPLEMENTAL SCHEDULES

MODERNIZING MEDICINE, INC. 401k PLAN

SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2019

EIN: 27-2070905
Plan number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	T. Rowe Price Blue Chip Grth I	Registered investment company	(1)	$ 3,689,376
	Vanguard Target Ret 2040	Registered investment company		2,836,367
	Fidelity 500 Index	Registered investment company		2,734,094
	Vanguard Target Ret 2045	Registered investment company		1,861,003
	Vanguard Target Ret 2050	Registered investment company		1,619,536
	Vanguard Target Ret 2035	Registered investment company		1,428,662
	Vanguard Target Ret 2055	Registered investment company		1,424,961
	Vanguard Target Ret 2030	Registered investment company		1,177,409
	Hartford Healthcare R6	Registered investment company		1,175,886
	Fidelity Sm Cap Idx	Registered investment company		1,107,465
	Pioneer Investments Bond K	Registered investment company		1,087,622
	Fidelity Mid Cap Idx	Registered investment company		1,080,621
	Prudential High Yield R6	Registered investment company		965,608
	American Funds Europac Growth R6	Registered investment company		901,710
	Goldman Sachs Em Mkt Eq Ins R6	Registered investment company		866,377
	Mfs Value R6	Registered investment company		783,068
	Wells Fargo Spl Mid Cp Val R6	Registered investment company		696,296
	Dws R Real Estate R6	Registered investment company		645,732
	Vanguard Target Ret 2025	Registered investment company		549,986
	Vanguard Target Ret 2020	Registered investment company		426,668
	Janus Henderson H Triton N	Registered investment company		414,722
	Hartford Mid Cap R6	Registered investment company		328,620
	Vanguard Target Ret 2015	Registered investment company		185,284
	Wells Fargo Spl Sm Cap Val R6	Registered investment company		177,307
	Vanguard Target Ret 2060	Registered investment company		137,199
	Vanguard Tot Intl Stk Ad	Registered investment company		92,467
	Vanguard Target Ret Inc	Registered investment company		42,030
				$ 28,436,076
	Vanguard Vmmr-Fed Mmkt	Money market fund		$ 1,040,928
*	Notes receivable from participants with interest rates ranging from 4.25% to 7.50% per annum, and maturities through June 2038.		-	$ 460,602

* Party-in-interest as defined by ERISA.
(1) Cost information may be omitted for plan assets which are participant-directed.

MODERNIZING MEDICINE, INC. 401k PLAN

SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

December 31, 2019

EIN: 27-2070905
Plan number: 001

	Participant Contributions Transferred Late to the Plan	Check Here If Late Participant Loan Repayments are Included:	Total That Constitute Nonexempt Prohibited			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contribution Pending Correction in VFCP	
2019	$ 171,093	X	$ 171,093	$ -	$ -	$ -

MODERNIZING MEDICINE, INC. 401(k) PLAN

FINANCIAL STATEMENTS

Years Ended December 31, 2019 and 2018

Mayer Hoffman McCann P.C.
2255 Glades Road, Suite 321A ▪ Boca Raton, FL 33431
Main: 561.994.5050 ▪ Fax: 561.241.0071 ▪ mhmcpa.com

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee
Modernizing Medicine, Inc. 401(k) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Modernizing Medicine, Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") 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 Trust Company ("Fidelity") and Reliance Trust Company ("Reliance"), the trustees of the Plan (the "Trustees"), except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that Fidelity held the Plan's investment assets and executed investment transactions from November 1, 2019 to December 31, 2019, and that Reliance held the Plan's investment assets and executed investment transactions from January 1, 2018 to October 31, 2019. The Plan administrator has obtained a certification from Fidelity as of December 31, 2019 and for the period November 1, 2019 to December 31, 2019 and a certification from Reliance for the period January 1, 2018 to October 31, 2019 that the information provided to the Plan administrator by the Trustees is complete and accurate.

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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 schedules of assets (held at end of year) as of December 31, 2019 and delinquent participant contributions for the year then ended are required by the DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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



Boca Raton, Florida
October 14, 2020

MODERNIZING MEDICINE, INC. 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2019 and 2018

ASSETS	**2019**	**2018**
Investments at fair value:		
Registered investment companies	$ 28,436,076	$ 18,520,511
Money market funds	1,040,928	-
Common collective trust funds	-	790,103
Stable value common collective trust fund	-	574,451
	29,477,004	19,885,065
Receivables:		
Participants contributions	163,885	133,350
Employer contributions	91,031	71,315
Notes receivable from participants	460,602	328,739
	715,518	533,404
NET ASSETS AVAILABLE FOR BENEFITS	$ 30,192,522	$ 20,418,469

See Notes to Financial Statements

MODERNIZING MEDICINE, INC. 401(k) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2019 and 2018

	2019	2018
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	$ 4,045,970	$ -
Dividends	715,074	832,436
	4,761,044	832,436
Interest income on notes receivable from participants	24,853	13,032
Contributions:		
Participants	4,228,460	3,558,705
Employer	2,237,200	1,859,608
Rollovers	304,133	802,703
	6,769,793	6,221,016
TOTAL ADDITIONS	11,555,690	7,066,484
DEDUCTIONS		
Net depreciation in fair value of investments	-	2,170,927
Benefits paid to participants	1,778,452	980,572
Administrative expenses	3,185	-
TOTAL DEDUCTIONS	1,781,637	3,151,499
NET INCREASE	9,774,053	3,914,985
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	20,418,469	16,503,484
End of year	$ 30,192,522	$ 20,418,469

See Notes to Financial Statements

(1) Description of plan

The following description of the Modernizing Medicine, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the plan document or summary plan description, both of which are available from the plan administrator, for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan sponsored by Modernizing Medicine, Inc. (the "Company") for the benefit of its employees who are at least twenty-one years of age. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Plan's Administrative Committee and the plan administrator have overall responsibility for the operation and management of the Plan, determine the appropriateness of the Plan's investment offerings, and monitor investment performance.

Plan administration - Effective November 1, 2019, (the "Effective Date") the Plan transitioned trustee services from Reliance Trust Company ("Reliance") and third party administrator services from ADP Retirement Services to Fidelity Management Trust Company ("Fidelity").

Contributions - Participants may contribute up to 80% of their pre-tax annual compensation, as defined in the plan document, and/or make Roth deferrals to the Plan, subject to annual limitations prescribed by the Internal Revenue Code (the "Code"). Prior to the Effective Date, participants were able to make contributions to the Plan on the first payroll cycle of the following month after becoming eligible to participate. After the Effective Date, participants may begin making contributions to the Plan immediately upon meeting eligibility requirements. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Additionally, participants age 50 or older, who are making contributions to the Plan, are allowed to make catch-up contributions, as defined in the plan document. Participants direct the investment of all contributions into various investment options offered by the Plan.

Under the provisions of the plan document, the Company makes safe harbor matching contributions to the Plan in an amount equal to 100% of the first 4% of eligible compensation that each participant defers to the Plan. The Company's safe harbor matching contributions applicable to the years ended December 31, 2019 and 2018 aggregated $2,237,200 and $1,859,608, respectively.

Additionally, at its discretion, the Company may make non-elective contributions to the Plan. No such non-elective contributions were made for the years ended December 31, 2019 and 2018.

All Company contributions are subject to limitations as prescribed by the Code.

Participant investment account options - The Plan currently offers various registered investment companies, and prior to the change to Fidelity, offered registered investment companies, common collective trust funds, and a stable value common collective trust, as investment options for participants.

(1) Description of plan (continued)

Participant accounts - Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contributions and (b) plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - Participants are immediately vested in their own contributions, and the Company's safe harbor matching contributions, plus actual earnings thereon. Participants are also immediately vested upon death, disability, or upon reaching normal retirement age, all as defined in the plan document. Vesting in the Company's non-elective contributions, plus actual earnings thereon, is subject to the following vesting schedule:

Years of Service	Vested %
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Prior service time for participants with an entity acquired in a previous year by the Company has been recognized for vesting purposes in the Plan.

Forfeited accounts - Forfeitures of terminated nonvested account balances are retained in the Plan and may be used to offset Company contributions and/or pay the Plan's administrative expenses. During the years ended December 31, 2019 and 2018, $10 and $1,647, respectively, of forfeitures were used to reduce employer contributions. Unapplied forfeitures at December 31, 2019 and 2018 amounted to $0 and $10, respectively.

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. All notes have a definite repayment period not to exceed five years, unless used for the purchase of a primary residence in which case the Plan permits a longer repayment period. The notes are secured by the balance in the participant's account and bear interest. From January 1, 2018 through October 31, 2019, interest was determined at the prime rate as published in the Wall Street Journal on the 14th day of the month in which the note originated, plus two percentage points. Effective November 1, 2019, notes shall bear interest at the prime rate as reported by Thomson Reuters plus one percentage point. Principal and interest are paid ratably through payroll deductions. Participants may not have more than one note outstanding at any time.

(1) Description of plan (continued)

Payment of benefits - On termination of service due to death, disability, retirement, other reasons as outlined in the plan document, or qualifying under certain "hardship" rules as prescribed by the Internal Revenue Service ("IRS"), a participant may elect to receive distributions from the Plan in an amount up to the value of the participant's vested interest in his or her account. Participants may also receive in-service distributions upon reaching 59½ years of age. Distributions of at least $5,000 may be made in the form of a lump sum payment, installments, or as a rollover into another qualified plan. Distributions of less than $5,000 and hardship distributions are made in the form of one lump sum payment.

(2) Summary of significant accounting policies

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

Use of estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

New accounting pronouncements - In 2019, the Plan adopted FASB ASU 2018-09, *"Codification Improvements"* which makes changes to a variety of topics, to clarify, correct errors in, or make minor improvements to the Accounting Standards Codification ("ASC"). The portion of ASU 2018-09 that is most applicable to the Plan relates to whether certain investments have a readily determinable fair value or qualify for the net asset value per share practical expedient in accordance with ASC 820, Fair Value Measurement. The standard is effective for fiscal years beginning after December 15, 2018, with early adoption permitted. The adoption of ASU 2018-09 did not have a material impact on the Plan's financial statements.

In August 2018, the FASB issued ASU 2018-13, *"Fair Value Measurement - Disclosure Framework (Topic 820)"*. The updated guidance improves the disclosure requirements on fair value measurements. The updated guidance is effective for fiscal years beginning after December 15, 2019. Early adoption is permitted for any removed or modified disclosures. Management does not expect the adoption of ASU 2018-13 to have a material impact on the Plan's financial statements.

Investment valuation and income recognition - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrative Committee and the plan administrator determine the Plan's valuation policies utilizing information provided by the investment trustee. See Note 4 for discussions of fair value measurements.

(2) Summary of significant accounting policies (continued)

Investment valuation and income recognition (continued) - 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. Capital gains distributions from registered investment companies are recorded as dividend income. 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 accrued but unpaid interest. Interest income on notes receivable from participants is recorded on the accrual basis. Fees related to the administration of a note are charged directly to the participant's account. If a participant ceases to make note repayments and the plan administrator deems the note to be in default, the remaining note balance is reduced and a benefit payment is recorded. No allowance for credit losses has been recorded as of December 31, 2019 or 2018.

Payments of benefits - Benefits are recorded when paid.

Administrative expenses - Certain expenses of the Plan are paid by the Company and are not included on the statements of changes in net assets available for benefits. Other expenses related to the Plan, such as recordkeeping fees, are paid for by the Plan and are recorded as administrative expenses on the statements of changes in net assets available for benefits. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

(3) Information prepared and certified by the trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Fidelity began serving as trustee of the Plan effective November 1, 2019 and has since managed the Plan's investment assets and executed investment transactions. Reliance was the Plan's prior trustee and managed the Plan's investment assets and executed investment transactions from January 1, 2018 through October 31, 2019. Accordingly, Fidelity (for the period November 1, 2019 to December 31, 2019) and Reliance (for the period January 1, 2018 to October 31, 2019), the trustees of the Plan, have certified that the following data included in the accompanying financial statements and supplemental schedules is complete and accurate:

- Investments at fair value
- Notes receivable from participants
- Net appreciation (depreciation) in fair value of investments
- Dividends
- Interest income on notes receivable from participants
- Schedule of assets (held at end of year)

(3) Information prepared and certified by the trustee (continued)

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

(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 below:

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 and liabilities in active markets; quoted prices for identical or similar assets and liabilities in inactive markets; inputs other than quoted market prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

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

Registered investment companies: Valued at the daily closing price as reported by the fund. These assets held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission and are deemed to be actively traded. These funds are required to publish their daily NAV and to transact at that price.

Money market funds: Valued at the quoted NAV of shares held by the Plan at year-end.

(4) Fair value measurements (continued)

Common collective trust funds: Valued at the NAV of units of a collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimating fair value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Stable value common collective trust: A stable value fund that is composed primarily of fully benefit-responsive investment contracts is valued at the NAV of units of the bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require 12 months' notification in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2019 and 2018:

	Investments at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 28,436,076	$ -	$ -	$ 28,436,076
Money market funds	1,040,928			1,040,928
Total assets in the fair value hierarchy	$ 29,477,004	$ -	$ -	$ 29,477,004

	Investments at Fair Value as of December 31, 2018			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 18,520,511	$ -	$ -	$ 18,520,511
Total assets in the fair value hierarchy	$ 18,520,511	$ -	$ -	18,520,511
Investments measured at NAV [(a)]				1,364,554
				$ 19,885,065

(a) In accordance with Subtopic 820-10, the stable value common collective trust and the common collective trust funds, which are valued at NAV, have not been classified in the fair value hierarchy. The fair value amounts presented in the tables above are intended to permit reconciliation of the fair value hierarchy to the line item presented on the statements of net assets available for benefits.

(4) Fair value measurements (continued)

Investments Measured Using the NAV per Share Practical Expedient - The following tables summarize investments for which fair value is based on NAV per share practical expedient as of December 31, 2019 and 2018, respectively. There are no participant redemption restrictions for these investments; the redemption notice period is applicable to the Plan.

Investments	Fair Value* 12/31/2019	Fair Value* 12/31/2018	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Stable Value Common Collective Trust:					
Invesco Stable Asset ADP59	$ -	$ 574,451	$ -	daily	none
Common Collective Trusts:					
SSGA S&P MD CP IDX NL J	-	790,103	-	daily	none
Total	$ -	$ 1,364,554	$ -		

The stable value common collective trust and the common collective trust funds are direct filing entities (“DFE”) as such disclosing the investment objective is not required.

(5) Plan termination

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

(6) Tax status

The IRS has determined that the volume submitter profit sharing plan provided by Fidelity is designed in accordance with applicable sections of the IRC and informed Fidelity of such in a letter dated March 31, 2014. The plan administrator has adopted the volume submitter plan effective November 1, 2019, and believes that the Plan is currently being operated in compliance with the applicable requirements of the IRC.

For the period from January 1, 2018 through October 31, 2019, the IRS has determined that the prototype standardized profit sharing plan adopted by the Company and provided by Automatic Data Processing, LLC (“ADP”) was designed in accordance with applicable sections of the Code and informed ADP of such in a letter dated July 8, 2014. Although the Plan was amended since the date of this letter, the plan administrator believes that the Plan was designed and operated in compliance with applicable sections of the Code.

(6) Tax status (continued)

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

(7) Risks, uncertainties, and concentrations

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported on the statements of net assets available for benefits.

At December 31, 2019, approximately 22% of the Plan's investments was invested in two funds. At December 31, 2018, approximately 13% of the Plan's investments was invested in one fund.

(8) Related party transactions and party-in-interest transactions

Prior to the Effective Date, the Plan's investments were shares of registered investment companies, common collective trust funds, and a stable value common collective trust in the custody of Reliance. Reliance was the trustee, as defined by the Plan, and therefore, transactions with Reliance qualified as party-in-interest transactions. ADP was the Plan's third party administrator prior to the Effective Date and provided certain recordkeeping and other services to the Plan, and therefore, ADP was also a party-in-interest to the Plan. Fees paid by the Plan to ADP amounted to $2,835 and $0 for the period January 1, 2019 to October 31, 2019 and the year ended December 31, 2018, respectively.

As of the Effective Date, the Plan's investments are shares of registered investment companies and money market funds managed by Fidelity. Fidelity is the trustee and recordkeeper for the Plan and therefore, these transactions qualify as party-in-interest transactions. Fees paid to Fidelity for the period November 1, 2019 to December 31, 2019 amounted to $350.

Additionally, certain investment related fees incurred by the Plan have been included in net appreciation (depreciation) in fair value of investments as they are paid through revenue sharing rather than as a direct payment. The Company pays directly any other fees related to the Plan's operations.

(9) Reconciliations of financial statements to Schedule H of Form 5500

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

	December 31, 2019	December 31, 2018
Net assets available for benefits per the financial statements	$ 30,192,522	$ 20,418,469
Less: participants contributions receivable	(163,885)	(133,350)
Less: employer contributions receivable	(91,031)	(71,315)
Net assets available for benefits per Schedule H of Form 5500	$ 29,937,606	$ 20,213,804

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements for the years ended December 31, 2019 and 2018 to Schedule H of Form 5500:

	Years Ended December 31, 2019	Years Ended December 31, 2018
Net increase per the financial statements	$ 9,774,053	$ 3,914,985
Less: current year participants contributions receivable	(163,885)	(133,350)
Less: current year employer contributions receivable	(91,031)	(71,315)
Add: prior year participants contributions receivable	133,350	99,633
Add: prior year employer contributions receivable	71,315	55,889
Net increase per Schedule H of Form 5500	$ 9,723,802	$ 3,865,842

Additionally, certain balances as reported on Schedule H of Form 5500 as of December 31, 2019 and 2018 have been reclassified on the accompanying statements of net assets available for benefits. These reclassifications have no impact on net assets available for benefits at December 31, 2019 and 2018 or changes in net assets available for benefits for the years then ended.

(10) Delinquent participant contributions and subsequent event

Defined contribution plans are required to remit employee contributions to the Plan as soon as they can be reasonably segregated from the employer's general assets. While the Company remitted all employee contributions, including participant loan repayments, to the Plan, contributions of $171,093 were not remitted within the required time period for the year ended December 31, 2019. The Company remitted the delinquent employee contributions during 2019 and is in the process of remitting any lost earnings as a result.

(11) Subsequent events

The Plan has evaluated subsequent events through October 14, 2020, which is the date the financial statements were available to be issued. Other than as noted below and in Note 10, no matters were identified for disclosure during this evaluation

(11) Subsequent events (continued)

On January 30, 2020, the World Health Organization declared the coronavirus originating in Wuhan, China (the "COVID-19 outbreak") creating risks to the international community as the virus spread globally beyond its point of origin. On March 11, 2020, the WHO classified the COVID-19 outbreak as a pandemic, based on the rapid increase in exposure globally.

The full impact of the COVID-19 outbreak continues to evolve as of the date of this report. This pandemic has adversely affected global economic activity and greatly contributed to significant deterioration and instability in financial markets. As a result, there has been heightened market risk and the Plan's investment portfolio has incurred significant volatility in fair value since December 31, 2019. Because the values of the Plan's individual investments have and will fluctuate in response to changing market conditions, the amount of losses that will be recognized in subsequent periods, if any, and the related impact on the Plan's liquidity cannot be determined at this time.

In December 2019, the Setting Every Community Up for Retirement Enhancement "(SECURE Act)" was signed into law, related to required minimum distributions and the limitation of life-time or stretch distributions to remain compliant under the applicable laws and regulations. These provisions are effective beginning January 1, 2020.

Additionally, on March 27, 2020, President Trump signed into law the "Coronavirus Aid, Relief, and Economic Security (CARES) Act." The CARES Act, among other things, includes several relief provisions available to tax-qualified retirement plans and their participants. Plan management has evaluated the relief provisions available to plan participants under the CARES Act and has implemented the following provisions:

- Special coronavirus distributions up to $100,000.
- Increased the available loan amount as described in Note 1 to the lesser of $100,000 or 100% of the participant's vested account balance.
- Extended the period for loan repayments, if applicable, up to one year.

The Plan is in the process of operationally being amended to implement certain changes permitted by the above law changes.

Effective April 30, 2020, the Plan was amended to remove safe harbor matching employer contributions from the Plan and will make discretionary matching employer contributions to eligible participants as defined in the Plan Document.

SUPPLEMENTAL SCHEDULES

MODERNIZING MEDICINE, INC. 401k PLAN

SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2019

EIN: 27-2070905
Plan number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	T. Rowe Price Blue Chip Grth I	Registered investment company	(1)	$ 3,689,376
	Vanguard Target Ret 2040	Registered investment company		2,836,367
	Fidelity 500 Index	Registered investment company		2,734,094
	Vanguard Target Ret 2045	Registered investment company		1,861,003
	Vanguard Target Ret 2050	Registered investment company		1,619,536
	Vanguard Target Ret 2035	Registered investment company		1,428,662
	Vanguard Target Ret 2055	Registered investment company		1,424,961
	Vanguard Target Ret 2030	Registered investment company		1,177,409
	Hartford Healthcare R6	Registered investment company		1,175,886
	Fidelity Sm Cap Idx	Registered investment company		1,107,465
	Pioneer Investments Bond K	Registered investment company		1,087,622
	Fidelity Mid Cap Idx	Registered investment company		1,080,621
	Prudential High Yield R6	Registered investment company		965,608
	American Funds Europac Growth R6	Registered investment company		901,710
	Goldman Sachs Em Mkt Eq Ins R6	Registered investment company		866,377
	Mfs Value R6	Registered investment company		783,068
	Wells Fargo Spl Mid Cp Val R6	Registered investment company		696,296
	Dws R Real Estate R6	Registered investment company		645,732
	Vanguard Target Ret 2025	Registered investment company		549,986
	Vanguard Target Ret 2020	Registered investment company		426,668
	Janus Henderson H Triton N	Registered investment company		414,722
	Hartford Mid Cap R6	Registered investment company		328,620
	Vanguard Target Ret 2015	Registered investment company		185,284
	Wells Fargo Spl Sm Cap Val R6	Registered investment company		177,307
	Vanguard Target Ret 2060	Registered investment company		137,199
	Vanguard Tot Intl Stk Ad	Registered investment company		92,467
	Vanguard Target Ret Inc	Registered investment company		42,030
				$ 28,436,076
	Vanguard Vmmr-Fed Mmkt	Money market fund		$ 1,040,928
*	Notes receivable from participants with interest rates ranging from 4.25% to 7.50% per annum, and maturities through June 2038.		-	$ 460,602

* Party-in-interest as defined by ERISA.
(1) Cost information may be omitted for plan assets which are participant-directed.

MODERNIZING MEDICINE, INC. 401k PLAN

SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

December 31, 2019

EIN: 27-2070905
Plan number: 001

	Participant Contributions Transferred Late to the Plan	Check Here If Late Participant Loan Repayments are Included:	Total That Constitute Nonexempt Prohibited			Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51
			Contributions Not Corrected	Contributions Corrected Outside VFCP	Contribution Pending Correction in VFCP	
2019	$ 171,093	X	$ 171,093	$ -	$ -	$ -