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
ACCURATE BACKGROUND 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 12/15/1998

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)
ACCURATE BACKGROUND, LLC

7515 IRVINE CENTER DR
IRVINE, CA 92618

2b Employer Identification Number (EIN)
33-0796904

2c Plan Sponsor's telephone number
949-609-2220

2d Business code (see instructions)
561600

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	SHERRI DAVIS
	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 ACCURATE BACKGROUND, INC.

c Plan Name ACCURATE BACKGROUND 401(K) PLAN

4b EIN 33-0796904

4d PN 001

5	Total number of participants at the beginning of the plan year	593
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	499
a(2)	Total number of active participants at the end of the plan year	522
b	Retired or separated participants receiving benefits	0
c	Other retired or separated participants entitled to future benefits	122
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	644
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	0
f	Total. Add lines **6d** and **6e**.	644
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	441
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	53
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	

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

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

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

9a Plan funding arrangement (check all that apply)

- (1) [ ] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) [ ] Insurance
- (2) [ ] Code section 412(e)(3) insurance contracts
- (3) [X] Trust
- (4) [ ] General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
ACCURATE BACKGROUND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ACCURATE BACKGROUND, LLC

D Employer Identification Number (EIN)
33-0796904

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

MML INVESTOR SERVICES LLC

04-1590850

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	10397	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	3728	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BNYM S&P 500 INDEX - BNY MELLON TR DREYFUS TRANSFER INC 200 PARK AVENUE NEW YORK, NY 10166	0.15%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FKLN DYNATECH R - FRANKLIN TEMPLET 94-3167260	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FKLN SM CAP GRTH R - FRANKLIN TEMP 94-3167260	0.25%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
I O DEVELOP MKT R - INVESCO INVEST 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
I O DISC MD CP GR R - INVESCO INVE 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
I O INTL GROWTH R - INVESCO INVEST 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS COMSTOCK R - INVESCO INVESTME 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JH STR INCOME OPP R2 - JOHN HANCOC 01-0233346	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPM CORE BOND R2 - DST ASSET MANAG 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.25%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LD ABT HIGH YIELD R3 - DST SYSTEMS 43-1581814	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS INTL NEW DISC R2 - MFS SERVICE 04-2865649	0.15%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS RESEARCH R2 - MFS SERVICE CENT 04-2865649	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TEMPLETON FOREIGN R - FRANKLIN TEM 94-3167260	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VICTORY S ESTB VAL R - FIS INVESTO 4249 EASTON WAY SUITE 400 COLUMBUS, OH 43219	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VICTORY S SM CO OP R - FIS INVESTO 4249 EASTON WAY SUITE 400 COLUMBUS, OH 43219	0.25%

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

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

A Name of plan
ACCURATE BACKGROUND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ACCURATE BACKGROUND, LLC

D Employer Identification Number (EIN)
33-0796904

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)	22743	24762
(2) Participant contributions	1b(2)	56643	72775
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	124548	265810
(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)	94247	175190
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8089764	11659970
(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	8387945	12198507
	Liabilities			
g	Benefit claims payable	1g	0	0
h	Operating payables	1h	0	0
i	Acquisition indebtedness	1i	0	0
j	Other liabilities	1j	25822	41532
k	Total liabilities (add all amounts in lines 1g through1j)	1k	25822	41532
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	8362123	12156975

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)	579312	
	(B) Participants	2a(1)(B)	1537334	
	(C) Others (including rollovers)	2a(1)(C)	237783	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2354429
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	3088	
	(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)	6386	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		9474
	(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)	1479625	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1479625
	(3) Rents	2b(3)		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		775096
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		4618624
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	809647	
(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)		809647
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
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)	14125	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		14125
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		823772
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		3794852
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: WONG JOHNSON & ASSOCIATES,APC **(2)** EIN: 46-0507972

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection.

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

A Name of plan
ACCURATE BACKGROUND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ACCURATE BACKGROUND, LLC

D Employer Identification Number (EIN)
33-0796904

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation_____

ACCURATE BACKGROUND 401(K) PLAN
SUPPLEMENTAL SCHEDULE
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2019

EIN Number: 33-0796904 **Plan Number: 001**

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Registered Investment Companies			
*	Fidelity Freedom Index 2040	82288.703 shares		$1,503,415
*	Fidelity Freedom Index 2035	72854.084 shares		1,340,515
*	Fidelity Freedom Index 2030	71806.983 shares		1,227,899
*	Fidelity Freedom Index 2050	61403.637 shares		1,165,441
*	Fidelity Total Market Index	11777.455 shares		1,066,920
*	Fidelity Freedom Index 2045	50498.820 shares		956,448
*	Fidelity Freedom Index 2055	59850.401 shares		931,871
*	Fidelity Large Cap Growth Index	38377.666 shares		671,993
*	Fidelity Freedom Index 2025	35846.660 shares		590,753
*	Janus Henderson Triton	13118.311 shares		414,801
*	Fidelity Freedom Index 2060	20503.349 shares		270,234
*	Fidelity Freedom Index 2020	15011.471 shares		223,821
*	JP Morgan High Yield	27721.079 shares		201,532
*	Pioneer Select Mid Cap Growth	4335.290 shares		199,423
*	AllianzGI NFJ Mid Cap Value	5292.081 shares		174,533
*	Fidelity Large Cap Value Index	12292.447shares		162,383
*	Fidelity Real Estate Index	5621.363 shares		95,226
*	Fidelity Emerging Markets Index	7095.673 shares		77,910
*	MFS International New Discovery	1829.094 shares		65,610
*	American EuroPacific Growth	1133.349 shares		62,958
*	Franklin Small Cap Value	1054.409 shares		54,397
*	Fidelity Freedom Index 2015	3822.013 shares		52,973
*	Fidelity Mid Cap Index	1756.030 shares		41,495
*	Fidelity Freedom Index 2005	2354.788 shares		30,730
*	Fidelity Freedom Index	2178.021 shares		25,853
*	Templeton Foreign	2637.065 shares		18,802
*	Fidelity U.S. Bond Index	1155.458 shares		13,762
*	Loomis Bond	723.522 shares		9,999
*	Western Asset Core Bond	368.961 shares		4,808
*	Fidelity Small Cap Index	53.459 shares		1,124
*	Fidelity Freedom Index 2065	19.146 shares		206
*	Fidelity Freedom Index 2010	163.219 shares		2,138
				11,659,970
	Money market / cash equivalents	265810.350		265,810
	Notes receivable from participants	4.25 -6.25 percent	-0-	175,190
	Total assets (held at end of year)			$12,103,316

See independent auditors' report.

ACCURATE BACKGROUND 401(K) PLAN

INDEPENDENT AUDITORS' REPORT, FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

DECEMBER 31, 2019 AND 2018

WONG JOHNSON ASSOCIATES

WONG JOHNSON & ASSOCIATES, A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS
SUITE 203
41856 IVY STREET, MURRIETA, CALIFORNIA 92562-8805
TELEPHONE 951-693-1120

ACCURATE BACKGROUND 401(K) PLAN

INDEX TO REPORT, FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

Independent auditors' report 1-2

Financial statements:

Statements of net assets available for benefits as of December 31, 2019 and 2018 3

Statements of changes in net assets available for benefits for the years ended December 31, 2019 and 2018 4

Notes to financial statements ..... 5 – 17

Supplemental schedule*

Schedule H, line 4i – Schedule of assets (held at end of year) as of December 31, 2019 18

* Other schedules required by Section 2520.103-10 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because the information required by the relevant schedules is not applicable.

WONG JOHNSON & ASSOCIATES, A PROFESSIONAL CORPORATION
CERTIFIED PUBLIC ACCOUNTANTS
SUITE 203
41856 IVY STREET, MURRIETA, CALIFORNIA 92562–8805
TELEPHONE 951–693–1120

INDEPENDENT AUDITORS' REPORT

October 12, 2020

To the Plan Administrative Committee
of the Accurate Background 401(k) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Accurate Background 401(K) 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

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Investments, the investment custodian of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the investment custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the investment custodian as of and for the years ended December 31, 2019 and 2018 that the information provided to the plan administrator by the investment custodian is complete and accurate.

Disclaimer of Opinion

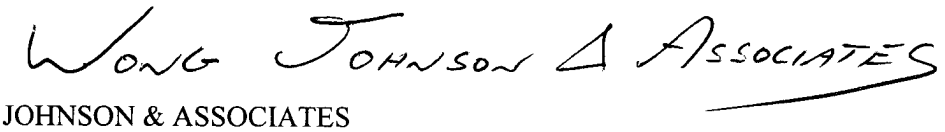
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do no express an opinion on these financial statements.

Other Matter – Supplemental Schedule

The supplemental schedule of Assets (Held at end of year), as of and for the year ended December 31, 2019, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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



WONG JOHNSON & ASSOCIATES
A Professional Corporation
Murrieta, California

ACCURATE BACKGROUND 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31, 2019	December 31, 2018
ASSETS		
Money market / cash equivalents	$ 265,810	$ 124,548
INVESTMENTS, AT FAIR VALUE, PARTICIPANT DIRECTED:		
Registered investment companies:		
Hybrid funds	8,296,442	5,806,237
Large/mid blend equity funds	2,316,747	1,509,596
Small company equity funds	496,175	420,545
Global equity funds	225,280	161,879
Speciality funds	95,226	87,113
Bond funds	230,100	104,394
Total investments, at fair value	11,659,970	8,089,764
RECEIVABLES:		
Notes receivables from participants	175,190	94,247
Employer contributions	24,762	22,743
Employee contributions	72,775	56,643
Total receivables	272,727	173,633
Net assets	12,198,507	8,387,945
LIABILITIES:		
Corrective distributions payable	41,532	25,822
Net assets available for benefits	$ 12,156,975	$ 8,362,123

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

ACCURATE BACKGROUND 401(K) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Year Ended December 31, 2019	2018
Additions to net assets:		
Contributions		
Participant deferral contributions	$ 1,537,334	$1,399,555
Participant rollover contributions	237,783	140,645
Employer contributions	579,312	575,964
Total contributions	2,354,429	2,116,164
Investment income:		
Net appreciation (depreciation) in fair value of investments	775,096	(1,502,601)
Dividends & other investment income	1,482,713	820,514
Total investment income (loss)	2,257,809	(682,087)
Interest income on notes receivable from participants	6,386	4,753
Total additions to net assets	4,618,624	1,438,830
Deductions from net assets:		
Distributions to participants	809,647	1,246,044
Plan administrative expenses	14,125	3,764
Total deductions from net assets	823,772	1,249,808
Increase in net assets available for benefits	3,794,852	189,022
Net assets available for benefits:		
At beginning of period	8,362,123	8,173,101
At end of period	$12,156,975	$8,362,123

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

ACCURATE BACKGROUND 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2019

NOTE 1 — DESCRIPTION OF THE PLAN:

The following description of the Accurate Background 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan Document for more complete information.

General

The Plan is a cash deferred arrangement under Section 401(k) of the Internal Revenue Code of 1986, as amended (the "Code"), covering substantially all employees of Accurate Background Inc. The Plan was established for the purpose of providing retirement benefits for employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). The Plan is administered by the Company. The Plan was adopted December 15, 1998 and has been amended at various times through December 31, 2019.

Eligibility

Employees who have attained at least 18 years of age are eligible to enroll in the Plan on the first day of the month coinciding with or following the satisfaction of the age requirement. Employees can opt out of Plan enrollment at any time.

Contributions

Employees may elect to defer a percentage of their eligible compensation into the Plan. Compensation deferral cannot exceed the maximum deferral, as determined by the Internal Revenue Service (IRS) each year. Such deferral limitation was $19,000 and $18,500 in 2019 and 2018 and employees who attained the age of 50 on or before December 31, 2019 and 2018 were eligible to make catch-up contributions of up to $6,000 during each respective Plan year.

Effective January 1, 2015, the Company elected to match 100 percent of a participant's salary deferral, up to a maximum deferral of 3 percent for the pay period. The Company has the right under the Plan to discontinue or modify its matching contributions at any time. In order to be eligible for matching contributions, a participant need not complete any service requirement.

For the years ended December 31, 2019 and 2018, the Company's contributions to the Plan were approximately $579,000 and $576,000, respectively.

The custodian maintains an account in the name of each participant. Each eligible participant's account is credited with (a) the participant's contributions; (b) the Company's matching contribution and (c) an allocation of interest, dividends and any change in the market value of the various investment funds. Plan earnings, by investment fund, are allocated daily by the custodian on the basis of the ratio that each eligible participant's account balance in the fund as of the beginning of the day bears to the total account

NOTE 1 — DESCRIPTION OF THE PLAN: (Continued)

balances of all participants in the respective fund.

The Company may also make discretionary contributions to the Plan in such amounts as determined by resolution of the Board of Directors. There were no discretionary contributions for the years ended December 31, 2019 and 2018, respectively.

Employees are permitted to obtain loans from the Plan in certain instances.

Investments

Participants direct the investment of their individual contributions and Company's matching contributions in any one or more of the investment funds offered by the Plan. Participants may elect to change the investments of their contributions and any Company contributions, or to transfer all or part of their account balances, among the various investment funds in increments of one percent.

The following investment options were available at December 31, 2019:

AllianzGI NFJ Mid Cap Value Fund – The investment seeks long-term growth of capital and income. The fund seekd to achieve its investment objective by normally investing at least 80% of its net assets in common stocks and other equity securities of companies with medium market capitalizations.

American EuroPacific Growth Fund – Fund seeks long-term growth of capital. The fund invests primarily in common stock of issuers in Europe and the Pacific Basin that the investment advisor believes have the potential for above-average capital appreciation.

Fidelity Emerging Markets Index – The fund seeks to provide investment results that correspond to the total return of emerging stock markets.

Fidelity Freedom Index 2005 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2010 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2015 Fund –. Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2020 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2025 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

NOTE 1 — DESCRIPTION OF THE PLAN: (Continued)

Fidelity Freedom Index 2030 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2035 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2040 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2045 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2050 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2055 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2060 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index 2065 Fund – Fund generally seeks high total return until its target retirement date. Thereafter, the fund's objective will be to seek high current income and, as a secondary objective, capital appreciation.

Fidelity Freedom Index Fund – Fund generally seeks high current income and, as a secondary objective, capital appreciation. The fund invests in a combination of Fidelity domestic equity funds, international funds, bond funds and short-term funds, each of which seeks to provide investment results that correspond to the total return of a specific index or market segment.

Fidelity Government Money Market Fund – Seeks as a high level of current income as is consistent with preservation of capital and liquidity. The fund normally invests at least 99.5% of the total assets in cash, U.S. Government securities and/or repurchase agreements that are collateralized fully.

Fidelity Large Cap Growth Index – Seeks to provide investment results that correspond to the total return of stocks or large U.S. companies. Fund normally invests at least 80% of assets in securities included in the Russell 1000 Growth Index.

Fidelity Large Cap Value Index – Seeks to provide investment results that correspond to the total return of stocks of large capitalization U.S. companies. Fund normally invests at least 80% of assets in securities included in the Russell 1000 Value Index.

NOTE 1 — DESCRIPTION OF THE PLAN: (Continued)

Fidelity Mid Cap Index – The fund seeks to provide investment results that correspond to the total return of stock of mid-capitalization U.S. companies. Fund normally invests at least 80% of assets in securities included in the Russell Midcap Index.

Fidelity Real Estate Index Fund – The fund seeks to provide investment results that correspond to the total return of equity REITs and other real-estate investments. Fund normally invests at least 80% of assets in securities included in the Dow Jones U.S. Select Real Estate Securities Index.

Fidelity Small Cap Index – The fund seeks to provide investment results that correspond to the total return of stocks of small-capitalization U.S. companies. Fund normally invests at least 80% of assets in securities included in the Russell 2000 Index.

Franklin Small Cap Value Fund – The fund seeks long-term total return. Fund normally invests at least 80% of its net assets in investments of small-capitalization (small-cap) companies. Small companies are those companies whose market capitalization falls within the range of companies in the Russell 2000 Index at the time of initial purchase It may invest up to 25% of its total assets in foreign securities.

Fidelity Total Market Index – The fund seeks to provide investment results that correspond to the total return of a broad range of U.S. stocks. Fund normally invests at least 80% of assets in common stocks included in the Dow Jones U.S. Total Stock Market Index, which represents the performance of a broad range of U.S. stocks.

Fidelity U.S. Bond Index – The fund seeks to provide investment results that correspond to the aggregate price and interest performance of the debt securities in the Bloomberg Barclays U.S. Aggregate Bond Index. Fund normally invests at least 80% of the fund's assets in bonds included in the Bloomberg Barclays U.S Aggregate Bond Index.

Janus Henderson Triton Fund – The fund seeks long-term growth of capital. Fund normally purses its investment objective by investing at least 50% of its equity assets in small- and medium-sized companies. Small- and medium-sized companies are those companies whose market capitalization falls within the range of companies in the Russell 2500 Growth Index at the time of initial purchase. The fund may also invest in foreign securities, which may include investments in emerging markets.

JP Morgan High Yield Fund – The fund seeks a high level of current income by investing primarily in a diversified portfolio of debt securities which are rated below investment grade or unrated; capital appreciation is a secondary objective. Fund normally invests at least 80% of its assets in bonds, other debt securities, loan assignments and participations (Loans), commitments to purchase loan assignments (Unfunded Commitments) and preferred stocks that are rated below investment grade or unrated. It may invest no more than 30% of its net assets in Loans and Unfunded Commitments. The funds average weighted maturity ordinarily ranges from three to ten years.

Loomis Bond Fund – The fund seeks high total investment return through a combination of current income and capital appreciation. Under normal circumstances, the fund will invest at least 80% of its net assets in fixed-income securities. The fund may also invest up to 35% of its assets in below investment-grade fixed-income securities (commonly known as "junk bonds") and up to 20% of its assets in equity securities, such as common stocks and preferred stocks (with up to 10% of its assets in common stocks).

NOTE 1 — DESCRIPTION OF THE PLAN: (Continued)

MFS International New Discovery Fund – Fund generally seeks capital appreciation. The fund normally invests its assets primarily in foreign equity securities, including emerging market equity securities. The fund may invest a significant percentage of the fund's assets in issuers in a single industry, sector, county, or region.

Pioneer Select Mid Cap Growth Fund – The fund seeks long-term capital growth. The fund normally invests at least 80% of its net assets in equity securities of mid-size companies. It may invest up to 20% of its total assets in debt securities. The fund may invest up to 20% of its net assets in REITs. It may invest u to 20% of its total assets in securities of non-U.S. issuers. The fund may invest in initial public offerings of equity securities.

Templeton Foreign Fund – Fund generally seeks long-term capital growth by investing at least 80 percent of its net assets in foreign securities, which may include emerging markets.

Western Asset Core Cond Fund – The fund seeks to maximize total return, consistent with prudent investment management and liquidity needs. The fund invests in a portfolio of fixed income securities of various maturities and, under normal market conditions, will invest at least 80% of its net assets in debt and fixed income securities.

Participants may change their investment options daily through use of an internet-based system maintained by the custodian.

Vesting

Participant contributions are fully vested when made. Participants in the Plan receive vesting credit for the Company's matching contributions based upon years of service, beginning with the date of employment with the Company according to the following schedule:

Years of Service	Vesting Percentage
Less than 1	0%
1	30%
2	*70%*
3 or more	*100%*

Distributions and payment of benefits

The normal retirement age is 65. Upon the death, disability or retirement at or after normal retirement age of a participant who had not incurred a separation from service, their account is fully vested. A participant who incurs a termination of employment prior to normal retirement age is entitled to that portion of Plan benefits earned to date, with vesting based upon the years of service credited as of the date of termination. Participants may also elect to rollover their account to another tax deferred account or remain in the Plan until they are legally required to begin taking distributions. All vested account balances not exceeding $1,000 may be immediately distributed in a lump-sum payment. All vested account balances exceeding $1,000, but not exceeding $5,000, may be rolled into an individual retirement account. With the Plan administrator's approval, participants may withdraw all or part of their aggregate contributions in the event of financial hardship.

NOTE 1 — DESCRIPTION OF THE PLAN: (Continued)

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/or to terminate the Plan, subject to the provisions of ERISA. In the event of termination of the Plan, participants will become fully vested in their accounts.

Forfeitures

Forfeitures of terminated participants' non-vested account balances may be used to pay administrative expenses or reduce Company contributions. During the years ended December 31, 2019 and 2018, $-0- and $-0-, respectively, from forfeitures were used to reduce administrative expenses or employer contributions. At December 31, 2019 and 2018, the unallocated forfeiture balance was $169,922 and $124,548, respectively.

Plan expenses

Administrative expenses and fees of the Plan and the trust are to be paid out of trust assets. The Company may, however, at its discretion reimburse the trust for such administrative expenses. During the years ended December 31, 2019 and 2018, the Company paid approximately $27,100 and $15,400, respectively, for such expenses.

Notes receivable from participants

Notes receivable from participants are secured by the participant's account balance and may not exceed the lesser of 50 percent of the participant's account balance or $50,000 in the aggregate for any individual participant. Loan maturity is not to exceed five years, except in the case where the loan is used to acquire or construct the participant's principle residence, in which case loans may be extended up to 10 years.

The loans are secured by the balance in the participant's account and generally bear interest at annual rates varying with the prime interest rate plus one percent on the date the loan is processed. At December 31, 2019, the annual rate of all notes outstanding ranged between 4.25 percent through 6.50 percent. Principal and interest are paid ratably through payroll deductions. Delinquent loans are reclassified as distributions based upon the terms of the Plan document.

NOTE 2 — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of accounting

The Plan's financial statements are prepared on the accrual basis, in conformity with accounting principles generally accepted in the United States of America ("GAAP"). Contributions made by participants and the employer are recorded on the accrual basis. Contributions are recognized during the period in which the related compensation was earned and paid to participant. Benefit payments to participants are recorded when paid.

NOTE 2 — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (Continued)

Investment valuation and Income Recognition

The Plan's investments are stated 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 Administrator determines the Plan's valuation policies utilizing information Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) in the fair value of investments includes the Plan's net gains and losses on investments bought and sold, as well as held, during the year.

Investments in registered investment companies are valued at the quoted net asset value of the shares held by the Plan at year end. See Note 3 for discussion of fair value measurements.

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 the reported amounts of assets and changes therein and disclosure of contingent assets and changes therein at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Significant estimates are made in determining fair value of investments in registered investment companies. Actual results could differ from those estimates.

Concentration, market risks and uncertainties

Plan assets consist of various investments, which are exposed to a number of risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expenses when they are incurred. No allowance for credit losses has been recorded as of December 31, 2019 and 2018, respectively. Delinquent loans are reclassified as distributions based upon the terms of the Plan document.

Recently Issued Accounting Pronouncements

During 2019, the plan adopted ASU No. 2016-1, Recognition and Measurement of Financial Assets and Financial Liabilities (ASU 2016-01). This update amended various aspects of Accounting Standards Codification Topic 825-10, Financial Instruments-Overall. Among other changes, this update eliminates the fair value of financial instruments not recorded at fair value previously required under ASC 825. The adoption of ASU 2016-1, did not impact the classes of net assets available for benefits previously disclosed.

NOTE 2 — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (Continued)

Recently Adopted Accounting Pronouncements in August 2018, the Financial Accounting Standards Board issued Accounting Standards Update No. 2018-13, Fair Value Measurement (Topic 820) Disclosure Framework - Changes to the Disclosure Requirements for Fair Value Measurement (ASU 2018-13). This amendment removes the disclosure requirements for the amount of and reasons of transfers between Level 1 and Level 2 of the fair value hierarchy and modifies the valuation process for Level 3 fair value measurements. This update is effective for fiscal years beginning after December 15, 2019. Plan management is currently evaluating the impact of this update, but does not expect the adoption to have a significant impact on the Plan's financial statements.

NOTE 3 - FAIR VALUE MEASUREMENTS:

The authoritative guidance describes a fair value hierarchy based on three levels of inputs, of which the first two are considered observable and the last unobservable, that may be used to measure fair value:

- Level 1 – Quoted prices in active markets for identical assets or liabilities.

- Level 2 – Inputs other than Level 1 that are observable, either directly or indirectly; such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active; or other inputs than can be corroborated by observable market data for substantially the full term of the assets or liabilities.

- Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

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

Registered investment companies may be redeemed on a daily basis, many with no redemption restrictions, and investments can be transferred once every thirty-days at the current net asset value per share based on the fair value of the underlying assets. Participants are not allowed to transfer back into that originating investment until the thirty-day period has expired. New contributions are allowed during this time period.

Notes receivable from participants, all of which mature by 2024 and are secured by vested account balances of borrowing participants, are stated at the outstanding principal balance plus accrued interest, which approximates fair value.

There were no transfer of investments between Level 1 and 2 inputs during the years ended December 31, 2019 and 2018, respectively.

NOTE 3 - FAIR VALUE MEASUREMENTS: (Continued)

As of December 31, 2019, the Plan held investments as follows:

	Fair Value	Level 1	Level 2	Level 3
Registered investment companies				
Fidelity Freedom Index 2040	$ 1,503,415	$1,503,415		
Fidelity Freedom Index 2035	1,340,515	1,340,515		
Fidelity Freedom Index 2030	1,227,899	1,227,899		
Fidelity Freedom Index 2050	1,165,441	1,165,441		
Fidelity Total Market Index	1,066,920	1,066,920		
Fidelity Freedom Index 2045	956,448	956,448		
Fidelity Freedom Index 2055	931,871	931,871		
Fidelity Large Cap Growth Index	671,993	671,993		
Fidelity Freedom Index 2025	590,753	590,753		
Janus Henderson Triton	414,801	414,801		
Fidelity Freedom Index 2060	270,234	270,234		
Fidelity Freedom Index 2020	223,821	223,821		
JP Morgan High Yield	201,532	201,532		
Pioneer Select Mid Cap Growth	199,423	199,423		
AllianzGI NFJ Mid Cap Value	174,533	174,533		
Fidelity Large Cap Value Index	162,383	162,383		
Fidelity Real Estate Index	95,226	95,226		
Fidelity Emerging Markets Index	77,910	77,910		
MFS International New Discovery	65,610	65,610		
American EuroPacific Growth	62,958	62,958		
Franklin Small Cap Value	54,397	54,397		
Franklin Freedom Index 2015	52,973	52,973		
Fidelity Mid Cap Index	41,495	41,495		
Fidelity Freedom Index 2005	30,730	30,730		
Fidelity Freedom Index	25,853	25,853		
Templeton Foreign	18,802	18,802		
Fidelity U.S. Bond Index	13,762	13,762		
Loomis Bond	9,999	9,999		
Western Asset Core Bond	4,808	4,808		
Fidelity Freedom Index 2010	2,238	2,238		
Fidelity Small Cap Index	1,124	1,124		
Fidelity Freedom Index 2010	206	206		
Total	$11,659,970	$11,659,970	$ -0-	$ -0-

NOTE 3 - FAIR VALUE MEASUREMENTS: (Continued)

As of December 31, 2018, the Plan held investments as follows:

	Fair Value	Level 1	Level 2	Level 3
Registered investment companies				
Fidelity Freedom 2040	$1,074,987	$1,074,987		
Fidelity Freedom 2035	963,075	963,075		
Fidelity Freedom 2030	934,564	934,564		
Fidelity Freedom 2050	807,928	807,928		
Fidelity Freedom 2045	684,398	684,398		
Dreyfus S&P 500 Index	669,716	669,716		
Fidelity Freedom 2055	575,752	575,752		
Fidelity Freedom 2025	433,605	433,605		
Franklin Dyna Tech	380,726	380,726		
Franklin Small Cap Growth	322,429	322,429		
Fidelity Freedom 2020	153,772	153,772		
Oppenheimer Discovery Mid Cap Growth	135,506	135,506		
Victory Established Value	130,532	130,532		
Invesco Comstock	130,170	130,170		
Fidelity Freedom Index 2060	113,113	113,113		
Lord Abbett High Yield	91,618	91,618		
Fidelity Advisor Real Estate	87,113	87,113		
MFS Research	62,946	62,946		
Victory Small Company Opportunity	56,790	56,790		
MFS International New Discovery	52,556	52,556		
Oppenheimer International Growth	51,672	51,672		
Oppenheimer Developing Markets	41,364	41,364		
Fidelity Freedom 2015	40,199	40,199		
Fidelity Freedom	31,140	31,140		
Fidelity Freedom 2005	22,974	22,974		
Templeton Foreign	16,288	16,288		
JPM Core Bond	12,776	12,776		
JH Strategic Income Opportunity	10,186	10,186		
Fidelity Freedom 2010	1,871	1,871		
Total	$8,089,764	$8,089,764	$ -0-	$ -0-

There were no investments in Level 3 during the years ended December 31, 2019 and 2018, respectively.

NOTE 4 — INFORMATION CERTIFIED BY THE CUSTODIAN:

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been certified to as complete and accurate by the custodian.

2019

Statement of net assets available for benefits:		
Money market / cash equivalents	$	265,810
Investments in registered investment companies		11,659,970
Notes receivable from participants		175,190
Statement of changes in net assets available for benefits:		
Dividends & other investment income		1,482,713
Interest		6,386
Net appreciation in fair value of investments		775,096

2018

Statement of net assets available for benefits:		
Money market / cash equivalents	$	124,548
Investments in registered investment companies		8,089,764
Notes receivable from participants		94,247
Statement of changes in net assets available for benefits:		
Dividends & other investment income		820,514
Interest		4,753
Net depreciation in fair value of investments		(1,502,601)

NOTE 5 – PARTY-IN-INTEREST TRANSACTIONS:

Certain Plan investments are shares of registered investment companies managed by Fidelity Investments Institutional Operations Company, Inc. which along with Fidelity Management Trust Company, are both members of Fidelity Investments. Fidelity Management Trust Company is also the trustee, custodian and record keeper as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Purchases and sales and the underlying investments comprising are open market transactions at fair market value. Such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in-interest transactions under ERISA. Additionally, management fees and operating expenses charged to the Plan for investments in registered investment companies are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of investment return for such investments. Fees paid by the Plan to Fidelity Management Trust Company for record keeping services were approximately $3,700 and $3,000 during the years ended December 31, 2019 and 2018, respectively.

NOTE 6 — TAX STATUS OF THE PLAN:

Effective April 2013, the Plan operates under the provisions of a volume submitter profit sharing employee benefit plan developed by Fidelity Management Trust Company. The Plan administrator has not obtained a specific determination letter from the Internal Revenue Service regarding the Plan's tax status as a qualified employee benefit plan. The Plan has been amended since the Internal Revenue Service issued its determination letter for the volume submitter profit sharing plan. However, the plan administrator, Fidelity Management Trust Company, and the Plan's tax counsel believe that the Plan, as amended, is currently designed and being operated in compliance with applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan has evaluated its tax positions for all open tax years and tax years that subject to examination by the Internal Revenue Service are 2016, 2017 and 2018 tax years. However, the Plan is not currently under audit nor has the Plan been contacted by any jurisdiction. Based on the evaluation of the Plan's tax positions, management believes all tax positions taken would be upheld under an examination. Therefore, no provision for the effect of uncertain tax positions have been recorded for the years ended December 31, 2019 and 2018.

NOTE 7 – SUBSEQUENT EVENTS:

The Company evaluated all events and transactions that occurred from the balance sheet date of December 31, 2019 through October 12, 2020, the date the financial statements were available to be issued. During this period, except as noted in the following paragraphs, there were no events or transactions occurring which require recognition or disclosure in the financial statements.

In March 2020, COVID-19 was declared a pandemic by the World Health Organization and the Centers for Disease Control and Prevention. Its rapid spread around the world and throughout the United States prompted many countries, including the United States, to institute restrictions on travel, public gatherings and certain business operations. The ultimate impact of COVID-19 on the Plan depends on factors beyond the Plan Sponsor's knowledge or control, including the duration and severity of this outbreak as well as third-party actions taken to contain its spread and mitigate its public health effects. Therefore, the Plan Sponsor cannot estimate the potential future impact to participants' account balances and the amounts reported in the Statement of Net Assets Available for Benefits.

During March 2020, the Coronavirus Aid, Relief and Economic Security Act ("CARES Act") was signed into law. The CARES Act also provides relief to participants with outstanding plan loans (on or after March 27, 2020) by allowing for a suspension of the loan payments (due from March 27, 2020 through December 31, 2020). During the suspension period, interest will continue to accrue. The term of the loan may extend for a period of up to one year without violating the original term period.

Pursuant to the CARES Act, the Company has changed the Plan to allow certain qualified participants impacted by COVID-19 to take withdrawals up to $100,000 between January 1, 2020 and December 30, 2020. These COVID-19 related distributions are not subject to the early withdrawal penalty, or to 20% federal tax withholding; but they are subject to a 10% federal tax withholding requirement, and participants have the option to spread the applicable income tax resulting from the COVID-19 related distribution over a 3 year period. Participant who obtain a COVID-19 related distribution may repay the distribution to an eligible retirement plan within the three-year period following the distribution to defer otherwise applicable taxation. The Company decided to opt-in to the Cares Act distributions but did not opt-in the loan deferment service.

NOTE 7 – SUBSEQUENT EVENTS: (Continued)

As of September 30, 2020, the date of the most recent available asset valuation, market value of the Plan's investment assets was approximately $14,516,000.

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

EIN Number: 33-0796904 **Plan Number: 001**

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Registered Investment Companies			
*	Fidelity Freedom Index 2040	82288.703 shares		$1,503,415
*	Fidelity Freedom Index 2035	72854.084 shares		1,340,515
*	Fidelity Freedom Index 2030	71806.983 shares		1,227,899
*	Fidelity Freedom Index 2050	61403.637 shares		1,165,441
*	Fidelity Total Market Index	11777.455 shares		1,066,920
*	Fidelity Freedom Index 2045	50498.820 shares		956,448
*	Fidelity Freedom Index 2055	59850.401 shares		931,871
*	Fidelity Large Cap Growth Index	38377.666 shares		671,993
*	Fidelity Freedom Index 2025	35846.660 shares		590,753
*	Janus Henderson Triton	13118.311 shares		414,801
*	Fidelity Freedom Index 2060	20503.349 shares		270,234
*	Fidelity Freedom Index 2020	15011.471 shares		223,821
*	JP Morgan High Yield	27721.079 shares		201,532
*	Pioneer Select Mid Cap Growth	4335.290 shares		199,423
*	AllianzGI NFJ Mid Cap Value	5292.081 shares		174,533
*	Fidelity Large Cap Value Index	12292.447shares		162,383
*	Fidelity Real Estate Index	5621.363 shares		95,226
*	Fidelity Emerging Markets Index	7095.673 shares		77,910
*	MFS International New Discovery	1829.094 shares		65,610
*	American EuroPacific Growth	1133.349 shares		62,958
*	Franklin Small Cap Value	1054.409 shares		54,397
*	Fidelity Freedom Index 2015	3822.013 shares		52,973
*	Fidelity Mid Cap Index	1756.030 shares		41,495
*	Fidelity Freedom Index 2005	2354.788 shares		30,730
*	Fidelity Freedom Index	2178.021 shares		25,853
*	Templeton Foreign	2637.065 shares		18,802
*	Fidelity U.S. Bond Index	1155.458 shares		13,762
*	Loomis Bond	723.522 shares		9,999
*	Western Asset Core Bond	368.961 shares		4,808
*	Fidelity Small Cap Index	53.459 shares		1,124
*	Fidelity Freedom Index 2065	19.146 shares		206
*	Fidelity Freedom Index 2010	163.219 shares		2,138
				11,659,970
	Money market / cash equivalents	265810.350		265,810
	Notes receivable from participants	4.25 -6.25 percent	-0-	175,190
	Total assets (held at end of year)			$12,103,316

See independent auditors' report.