

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2019</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>	
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.)
	☒ 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: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program
	☐ special extension (enter description) _____

Part II	Basic Plan Information —enter all requested information						
1a	Name of plan <u>CARDIFF SEASIDE MARKET, INC. 401(K) PLAN</u>						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">1b</td> <td>Three-digit plan number (PN) ▶ <u>001</u></td> </tr> <tr> <td>1c</td> <td>Effective date of plan <u>01/01/1996</u></td> </tr> </table>	1b	Three-digit plan number (PN) ▶ <u>001</u>	1c	Effective date of plan <u>01/01/1996</u>		
1b	Three-digit plan number (PN) ▶ <u>001</u>						
1c	Effective date of plan <u>01/01/1996</u>						
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) <u>CARDIFF SEASIDE MARKET, INC.</u> <u>2087 SAN ELIJO AVE</u> <u>CARDIFF BY THE SEA, CA 92007-1741</u>						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">2b</td> <td>Employer Identification Number (EIN) <u>33-0108175</u></td> </tr> <tr> <td>2c</td> <td>Plan Sponsor's telephone number <u>760-753-5445</u></td> </tr> <tr> <td>2d</td> <td>Business code (see instructions) <u>445110</u></td> </tr> </table>	2b	Employer Identification Number (EIN) <u>33-0108175</u>	2c	Plan Sponsor's telephone number <u>760-753-5445</u>	2d	Business code (see instructions) <u>445110</u>
2b	Employer Identification Number (EIN) <u>33-0108175</u>						
2c	Plan Sponsor's telephone number <u>760-753-5445</u>						
2d	Business code (see instructions) <u>445110</u>						

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.	01/19/2021	JOHN NAJJAR
	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

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3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 139
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 96 6a(2) 108 6b 15 6c 15 6d 138 6e 0 6f 138 6g 138 6h 11
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2K 2T 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) ☒ 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) ☒ Trust (4) ☐ General assets of the sponsor
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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)** ☒ **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)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☐ 0 **A** (Insurance Information)
- (4)** ☐ **C** (Service Provider Information)
- (5)** ☒ **D** (DFE/Participating Plan Information)
- (6)** ☐ **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 _____

<div>SCHEDULE D (Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div>		<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019					
A Name of plan CARDIFF SEASIDE MARKET, INC. 401(K) PLAN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 CARDIFF SEASIDE MARKET, INC.				D Employer Identification Number (EIN) 33-0108175	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: METLIFE SV SERIES 25053 CL 0					
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE, INC.					
c EIN-PN 01-0233346-000		d Entity code P		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 187087	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 CARDIFF SEASIDE MARKET, INC. 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 CARDIFF SEASIDE MARKET, INC.	D Employer Identification Number (EIN) 33-0108175	

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)	336034	351149
(2) Participant contributions.....	1b(2)	0	2151
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	0	0
(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)	61906	127544
(9) Value of interest in common/collective trusts	1c(9)	184793	187087
(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)	4134198	7635004
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(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	4716931	8302935

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	4716931	8302935
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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)	351149	
(B) Participants	2a(1)(B)	157766	
(C) Others (including rollovers)	2a(1)(C)	1792855	
(2) Noncash contributions	2a(2)	0	2301770
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(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)	5017	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		5017
(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)	360530	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		360530
(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)		5323
(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)		1028900
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		3701540

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	113932	
(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)		113932
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)	1604	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1604
j Total expenses. Add all expense amounts in column (b) and enter total	2j		115536

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3586004
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: LAVINE, LOFGREN, MORRIS & ENGELBERG

(2) EIN: 33-0690020

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:

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.)

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.)

	Yes	No	Amount
4a	X		39726
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?	X		471693
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

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

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan CARDIFF SEASIDE MARKET, INC. 401(K) PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 CARDIFF SEASIDE MARKET, INC.		D Employer Identification Number (EIN) 33-0108175
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 0
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2019 v. 190130		

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

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**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 _____

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

**INDEPENDENT AUDITORS' REPORT,
FINANCIAL STATEMENTS, AND
SUPPLEMENTAL SCHEDULES**

December 31, 2019

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

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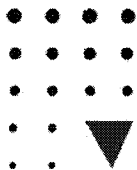
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**LAVINE, LOFGREN, MORRIS
& ENGELBERG, LLP**

**CERTIFIED
PUBLIC
ACCOUNTANTS**

4180	PHONE
LA JOLLA VILLAGE DRIVE	(858) 455-1200
SUITE 300	FAX
LA JOLLA	(858) 455-0898
CALIFORNIA	WEB SITE
92037	www.llme.com

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INDEPENDENT AUDITORS' REPORT

To the Administrative Committee
Cardiff Seaside Market, Inc. 401(k) Plan
Cardiff by the Sea, California

Report on the Financial Statements

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

Management's Responsibility for the Financial Statements

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3 to the financial statements, which was certified by John Hancock Trust Company LLC, the 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 custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the custodian as of December 31, 2019 and 2018 and for the year ended December 31, 2019, that the information provided to the Plan administrator by the 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 not express an opinion on these financial statements.

Other Matter – Supplemental Schedules

The supplemental schedules (Schedule H, Part IV, Line 4a and Schedule H, Part IV, Line 4i) as of and for the year ended December 31, 2019 are required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Lavine, Uffner, Maris & Engelberg LLP

La Jolla, California
January 15, 2021

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN**Statements of Net Assets Available for Benefits
As of December 31, 2019 and 2018**

	<u>2019</u>	<u>2018</u>
ASSETS		
Investments, at fair value:		
Registered investment companies	\$ 7,635,004	\$ 4,134,198
Common/collective trust	<u>187,087</u>	<u>184,793</u>
Total investments	<u>7,822,091</u>	<u>4,318,991</u>
Receivables:		
Employer profit sharing contributions	222,900	230,250
Employer safe harbor nonelective contributions	128,249	105,784
Employee contribution - other	2,151	-
Notes receivable from participants	<u>127,544</u>	<u>61,906</u>
Total receivables	<u>480,844</u>	<u>397,940</u>
Total assets	<u>8,302,935</u>	<u>4,716,931</u>
LIABILITIES	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 8,302,935</u>	<u>\$ 4,716,931</u>

See accompanying notes to financial statements.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits For the Year Ended December 31, 2019

Additions to net assets attributed to:

Investment income:

Net realized and unrealized appreciation in fair value of registered investment companies	\$ 1,028,900
Dividends from registered investment companies	360,530
Net realized and unrealized appreciation in fair value of common/collective trust	<u>5,323</u>

Net investment income	<u>1,394,753</u>
-----------------------	------------------

Contributions:

Participants - current	157,766
Participants - rollover	1,792,855
Employer - profit sharing	222,900
Employer - safe harbor nonelective	<u>128,249</u>

Total contributions	<u>2,301,770</u>
---------------------	------------------

Interest income from notes receivable from participants	<u>5,017</u>
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Total additions	<u>3,701,540</u>
-----------------	------------------

Deductions from net assets attributed to:

Benefits paid to participants	113,932
Administrative expenses	<u>1,604</u>

Total deductions	<u>115,536</u>
------------------	----------------

Net increase	3,586,004
--------------	-----------

Net assets available for benefits:

Beginning of year	<u>4,716,931</u>
End of year	<u>\$ 8,302,935</u>

See accompanying notes to financial statements.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 1. DESCRIPTION OF PLAN

General

The Cardiff Seaside Market, Inc. 401(k) Plan (the "Plan") is a defined contribution plan established in 1996. The Plan is sponsored by Cardiff Seaside Market, Inc (the "Company"). The Plan provides participants with a salary deferral option for the purpose of saving for retirement pursuant to applicable provisions of the Internal Revenue Code (the "IRC").

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). Significant elements of the Plan are summarized below. Participants should refer to the Plan document, as amended, for a more complete description of the Plan's provisions.

Eligibility

Employees who are at least 21 years of age and have completed one year of service, as defined in the Plan, are eligible to participate in the Plan and may enroll on the first day of any month coincident with or next following their having met the eligibility requirements. Excluded employees generally include those whose employment is governed by a collective bargaining agreement and non-resident aliens with no U.S. earned income from the Company.

Participant Contributions

Each pay period, participants may elect to contribute to the Plan any dollar amount or whole percentage between 1% to 100% of pre-tax compensation, as defined by the Plan. In addition, employees who are age 50 or older may elect to defer additional amounts (called "catch-up contributions") to the Plan. All participant contributions are subject to limitations imposed by the IRC. Participants may also contribute amounts representing rollover distributions from other qualified sources.

Employer Contributions

The Company shall make employer safe harbor nonelective contributions on an annual basis equal to 3% of each eligible employee's eligible compensation. For 2019, the Company made employer safe harbor nonelective contributions in the amount of \$128,249. This amount was remitted to the Plan by the Company in September 2020 and is presented as employer safe harbor nonelective contributions receivable as of December 31, 2019.

The Company may also make discretionary profit sharing contributions. To qualify for a discretionary profit sharing contribution at year end, an employee must satisfy the general eligibility requirements, have worked 1,000 hours during the Plan year, and also be employed on the last day of the Plan year.

For 2019, the Company authorized a profit-sharing contribution of \$268,120. In September 2020, the Company remitted \$222,900 to the Plan, which is presented as employer profit sharing contributions receivable as of December 31, 2019. The remaining \$45,220 was reallocated to participants from the Plan's forfeiture account.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 1. DESCRIPTION OF PLAN (Continued)

Participant Accounts and Investment Options

Each participant's account is credited with the participant's contributions, the Company's contributions (if any), and allocations of Plan earnings, losses, and expenses. Allocations are based on participant earnings or account balances, as defined. The benefits to which a participant is entitled are those that can be provided from the participant's vested account.

Administrative charges related to participant loans and distributions are deducted directly from the transacting participant's account. Investment expenses charged by the registered investment companies and common/collective trust in which the Plan invests are paid directly from the underlying assets of the respective investment and are included in net realized and unrealized appreciation (depreciation) in fair value of investments in the statement of changes in net assets available for benefits. Certain other expenses related to the administration of the Plan are paid by the Company.

Upon enrollment in the Plan, participants may direct the allocation of their accounts to any or all of the Plan's investment options. Subsequently, participants may change their allocations and transfer account balances between the investment options in accordance with the Plan.

Vesting

Participants are immediately vested in their contributions and in employer safe harbor nonelective contributions plus actual earnings thereon. Participants are also always 100% vested in any employer qualified nonelective contributions. Vesting in discretionary profit sharing contributions is based on years of credited service, as defined in the Plan, according to the following schedule:

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

Forfeitures

Forfeitures of employer contributions may be used to reduce employer contributions or to pay Plan expenses. During 2019, forfeitures of \$19,415 were added to the account and investment and other income totaled \$4,985. As of December 31, 2019 and 2018, the balance in the forfeitures account was \$42,089 and \$17,689, respectively.

Notes Receivable from Participants (Participant Loans)

Participants may borrow from the salary deferral portion of their account generally up to a maximum of 50% of their vested balance up to \$50,000. The minimum loan amount is \$500. Loans are required to be repaid within 5 years, unless used toward the purchase of a primary residence, in which case the loan term may be longer. Participants may have up to three loans outstanding at any given time. Loans are secured by a participant's vested account balance. Loans bear interest at a fixed rate equal to the prime rate plus 1% and are repaid in regular installments through payroll deductions. As of December 31, 2019, interest rates on outstanding loans ranged from 4.25% to 6.50%.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 1. DESCRIPTION OF PLAN (Continued)

Payment of Benefits

Upon termination of service due to death, disability, or normal retirement (age 65), participants are entitled to receive a distribution of their account in a lump sum or defer distribution if their vested account balance exceeds \$1,000. For termination of service for other reasons, a participant may also receive the value of the vested interest in his or her account as a lump-sum distribution. Generally, initial distributions must begin the later of when the participant retires or the year following the year in which the participant attains the age of 70½. Also at its discretion, the Plan may elect to distribute vested account balances of less than \$1,000.

The Plan also allows for in-service distributions for participants who have attained age 59½. The Plan does not permit hardship withdrawals.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Use of Estimates

The preparation of financial statements in accordance with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Notes Receivable from Participants (Participant Loans)

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 expensed as incurred. No allowance for credit losses has been recorded as of December 31, 2019 or 2018. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Investment Valuation and Income Recognition

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

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

Payment of Benefits

Benefits are recorded when paid.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Subsequent Events

Plan management has evaluated subsequent events through the date of the independent auditors' report, which is the date these financial statements were available to be issued (Note 10).

NOTE 3. INFORMATION CERTIFIED BY THE CUSTODIAN

The Plan's investments were held by the custodian of the Plan, John Hancock Trust Company LLC ("John Hancock"), as of December 31, 2019 and 2018, and for the year ended December 31, 2019. All investments are participant-directed. All investment information disclosed in the accompanying financial statements and supplemental schedule (Schedule H, Part IV, Line 4i), including investments held at December 31, 2019 and 2018, and net realized and unrealized appreciation or depreciation in fair value of investments and interest and dividend income for the year ended December 31, 2019, was obtained or derived from information provided to the Plan administrator and certified as complete and accurate by John Hancock.

NOTE 4. FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement for the asset or liability at the measurement date. These inputs reflect Plan management's best estimate of what market participants would use in pricing the asset or liability at the measurement date. Consideration is given to the risk inherent in the valuation technique and in the inputs to the model.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 4. FAIR VALUE MEASUREMENTS (Continued)

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of observable inputs and minimize the use of unobservable inputs. There have been no changes in the methodologies used at December 31, 2019 and 2018. The following is a description of the valuation methodologies used for investments measured at fair value at December 31, 2019 and 2018:

Registered investment companies (mutual funds): Valued based on the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end funds that are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The funds held by the Plan are deemed to be actively traded.

Common/collective trust: Valued at the net asset value of units of the collective trust. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer may reserve the right to require a notification period in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

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

	December 31, 2019			
	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ 7,635,004	\$ -	\$ -	\$ 7,635,004
Total assets in the fair value hierarchy	7,635,004	-	-	7,635,004
Common/collective trust measured at net asset value ^(a)				187,087
Total investments at fair value				\$ 7,822,091

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN**Notes to Financial Statements
December 31, 2019****NOTE 4. FAIR VALUE MEASUREMENTS (Continued)**

	December 31, 2018			Total
	Level 1	Level 2	Level 3	
Registered investment companies	\$ 4,134,198	\$ -	\$ -	\$ 4,134,198
Total assets in the fair value hierarchy	<u>4,134,198</u>	<u>-</u>	<u>-</u>	4,134,198
Common/collective trust measured at net asset value ^(a)				<u>184,793</u>
Total investments at fair value				<u>\$ 4,318,991</u>

(a) The Plan's investment in a common/collective trust was measured at net asset value per share practical expedient (or its equivalent) and has not been classified in the fair value hierarchy. The fair value of the common/collective trust presented in these tables is intended to permit reconciliation of the fair value hierarchy to investments at fair value presented in the statements of net assets available for benefits.

There were no transfers between Levels 1 and 2, and no transfers in or out of Level 3 between December 31, 2018 and 2019.

The following tables summarize the investment (common/collective trust) for which fair value is measured using the net asset value per share practical expedient as of December 31, 2019 and 2018. There are no participant redemption restrictions for this investment.

	December 31, 2019			
	Fair Value	Unfunded Commitments	Redemption Frequency (Participant)	Redemption Notice Period (Plan)
Metlife Stable Value Fund	\$ 187,087	N/A	N/A	N/A

	December 31, 2018			
	Fair Value	Unfunded Commitments	Redemption Frequency (Participant)	Redemption Notice Period (Plan)
Metlife Stable Value Fund	\$ 184,793	N/A	N/A	N/A

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

The Company pays certain administrative costs of the Plan, and also provides administrative services for the Plan at no cost to the Plan. These transactions qualify as exempt party-in-interest transactions.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Notes to Financial Statements December 31, 2019

NOTE 6. PLAN TERMINATION

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

NOTE 7. TAX STATUS

The Company has adopted a volume submitter plan and relies upon the volume submitter plan's opinion letter from the Internal Revenue Service ("IRS"), which stated that the plan and related trust are designed in accordance with the applicable sections of the IRC. The Company has not applied for a determination letter from the IRS specific to the Plan. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the accompanying financial statements.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the applicable taxing authorities. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2019, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2016.

NOTE 8. RISKS AND UNCERTAINTIES

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

NOTE 9. UNTIMELY PARTICIPANT CONTRIBUTIONS

The Company identified instances in which certain loan repayments and employee deferrals withheld during 2017, 2018, and 2019 totaling \$39,726 were not forwarded to the custodian within the reasonableness timeframe established by the Department of Labor. The Company is in the process of determining the amount of lost earnings attributable to these late remittances; however, it does not expect the amount to be material to the Plan's financial statements.

NOTE 10. SUBSEQUENT EVENT

On March 11, 2020, the World Health Organization declared COVID-19 a pandemic. The COVID-19 pandemic and resulting global disruptions have caused significant economic uncertainty and volatility in financial markets which could materially affect participant account balances and the amounts reported in the Plan's financial statements. Because of the uncertainty of the duration of the pandemic and its effects on the financial markets at this time, management is unable to estimate its impact on the Plan and participant accounts.

SUPPLEMENTAL SCHEDULES

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Attachment for Form 5500 – Schedule H, Part IV, Line 4a –
Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2019

EIN: 33-0108175
Plan Number: 001

Participant Contributions Transferred Late to the Plan			Total That Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program and Prohibited Transaction Exemption 2002-51
Check Here if Late Participant Loan Repayments Are Included ☒	Date Withheld	Date Remitted	Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	
\$ 152	12/21/2017		\$ 152	\$ -	\$ -	\$ -
152	12/28/2017		152	-	-	-
152	1/4/2018		152	-	-	-
152	1/11/2018		152	-	-	-
152	1/18/2018		152	-	-	-
152	1/25/2018		152	-	-	-
152	2/1/2018		152	-	-	-
152	2/8/2018		152	-	-	-
152	2/15/2018		152	-	-	-
152	2/22/2018		152	-	-	-
152	3/1/2018		152	-	-	-
152	3/8/2018		152	-	-	-
152	3/15/2018		152	-	-	-
152	3/22/2018		152	-	-	-
152	3/29/2018		152	-	-	-
152	4/5/2018		152	-	-	-
152	4/12/2018		152	-	-	-
152	4/19/2018		152	-	-	-
152	4/26/2018		152	-	-	-
152	5/3/2018		152	-	-	-
152	5/10/2018		152	-	-	-
152	5/17/2018		152	-	-	-
152	5/24/2018		152	-	-	-

See accompanying independent auditors' report.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Attachment for Form 5500 – Schedule H, Part IV, Line 4a –
 Schedule of Delinquent Participant Contributions (Continued)
 For the Year Ended December 31, 2019

EIN: 33-0108175
 Plan Number: 001

Participant Contributions Transferred Late to the Plan		Total That Constitute Nonexempt Prohibited Transactions				Total Fully Corrected Under Voluntary Fiduciary Correction Program and Prohibited Transaction Exemption 2002-51
Check Here if Late Participant Loan Repayments Are Included ☒	Date Withheld	Date Remitted	Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	
152	5/31/2018		152	-	-	-
152	6/7/2018		152	-	-	-
152	6/14/2018		152	-	-	-
152	6/21/2018		152	-	-	-
152	6/28/2018		152	-	-	-
152	7/5/2018		152	-	-	-
152	7/12/2018		152	-	-	-
152	7/19/2018		152	-	-	-
152	7/26/2018		152	-	-	-
152	8/2/2018		152	-	-	-
152	8/9/2018		152	-	-	-
152	8/16/2018		152	-	-	-
152	8/23/2018		152	-	-	-
152	8/30/2018		152	-	-	-
152	9/6/2018		152	-	-	-
254	9/13/2018		254	-	-	-
254	9/20/2018		254	-	-	-
480	9/27/2018		480	-	-	-
7	1/3/2019		7	-	-	-
7	1/10/2019		7	-	-	-
7	1/24/2019		7	-	-	-
13	1/31/2019		13	-	-	-
13	2/7/2019		13	-	-	-

See accompanying independent auditors' report.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Attachment for Form 5500 – Schedule H, Part IV, Line 4a –
 Schedule of Delinquent Participant Contributions (Continued)
 For the Year Ended December 31, 2019

EIN: 33-0108175
 Plan Number: 001

Participant Contributions Transferred Late to the Plan		Total That Constitute Nonexempt Prohibited Transactions				Total Fully Corrected Under Voluntary Fiduciary Correction Program and Prohibited Transaction Exemption 2002-51
Check Here if Late Participant Loan Repayments Are Included ☒	Date Withheld	Date Remitted	Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	
13	2/14/2019		13	-	-	-
13	2/21/2019		13	-	-	-
13	2/28/2019		13	-	-	-
7	3/7/2019		7	-	-	-
5	3/21/2019		5	-	-	-
5	3/28/2019		5	-	-	-
5	4/4/2019		5	-	-	-
5	4/11/2019		5	-	-	-
102	4/18/2019		102	-	-	-
2,412	8/22/2019	9/10/2019 *	2,412	-	-	-
3,414	8/29/2019	9/11/2019 *	3,414	-	-	-
2,944	9/5/2019	9/16/2019 *	2,944	-	-	-
2,863	10/3/2019	10/18/2019 *	2,863	-	-	-
2,814	10/10/2019	10/21/2019 *	2,814	-	-	-
2,942	10/24/2019	11/20/2019 *	2,942	-	-	-
11	11/14/2019	11/22/2019 *	11	-	-	-
12,500	12/19/2019	12/30/2019 *	12,500	-	-	-
2,847	12/19/2019		2,847	-	-	-
<u>\$ 39,726</u>			<u>\$ 39,726</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

* Delinquent contributions were made on the "Date Remitted" as indicated above; related lost earnings are in the process of being calculated and remitted.

See accompanying independent auditors' report.

CARDIFF SEASIDE MARKET, INC. 401(K) PLAN

Attachment for Form 5500 – Schedule H, Part IV, Line 4i –
 Schedule of Assets Held for Investment Purposes at End of Year
 As of December 31, 2019

EIN: 33-0108175
 Plan Number: 001

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost ⁽¹⁾	Current value
Registered Investment Companies:				
	T. Rowe Price	T. Rowe Price Retirement 2040	-	\$ 1,776,952
	T. Rowe Price	T. Rowe Price Retirement 2020	-	1,762,304
	Putnam	Putnam Equity Income	-	1,134,365
	JP Morgan	JP Morgan Large Growth	-	850,511
	T. Rowe Price	T. Rowe Price Retirement 2030	-	571,086
	JP Morgan	JP Morgan Core Plus Bond	-	431,648
	T. Rowe Price	T. Rowe Price Retirement 2050	-	314,249
	T. Rowe Price	T. Rowe Price Retirement 2045	-	239,886
	T. Rowe Price	T. Rowe Price Retirement 2035	-	125,759
	Eagle	Carillon Eagle Mid Cap Growth	-	93,309
	T. Rowe Price	T. Rowe Price Retirement 2010	-	64,978
	T. Rowe Price	T. Rowe Price Retirement 2055	-	56,719
	JP Morgan	JP Morgan US Government Money Market	-	49,432
	Vanguard	Vanguard 500 Index	-	41,796
	T. Rowe Price	T. Rowe Price Retirement 2060	-	35,130
	T. Rowe Price	T. Rowe Price Retirement 2015	-	26,706
	T. Rowe Price	T. Rowe Price Retirement 2025	-	16,763
	American Beacon	American Beacon Small Cap Value	-	11,103
	Vanguard	Vanguard Mid Cap Index	-	9,459
	Nuveen	Nuveen Real Estate Securities	-	8,147
	American Funds	American EuroPacific Growth	-	7,592
	Vanguard	Vanguard Total International Stock Index	-	2,894
	Vanguard	Vanguard Small Cap Index	-	2,194
	Victory	Victory Sycamore Established Value	-	2,022
Common/Collective Trust:				
	Metlife	Metlife Stable Value Fund	-	187,087
*	Participant Loans	Interest rates range from 4.25% to 6.50%; maturity dates vary	- 0 -	127,544
Total				<u>\$ 7,949,635</u>

* Designates a party-in-interest to the Plan.

⁽¹⁾ Cost information is omitted for participant-directed investments.

See accompanying independent auditors' report.