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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

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
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/02/1985

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)

COMMUNITY CARE PHYSICIANS, P.C.

CAPITAL REGION HEALTH PARK
711 TROY-SCHENECTADY ROAD
LATHAM, NY 12110

2b Employer Identification Number (EIN) 14-1660131

2c Plan Sponsor's telephone number 518-782-3730

2d Business code (see instructions) 621111

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.	07/14/2022	SHIRISH PARIKH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/14/2022	SHIRISH PARIKH
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: **a** Sponsor's name **c** Plan Name	**4b** EIN **4d** PN	
5 Total number of participants at the beginning of the plan year	**5**	2386
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	1869
a(2) Total number of active participants at the end of the plan year	**6a(2)**	1860
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	392
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	2252
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	3
f Total. Add lines **6d** and **6e**	**6f**	2255
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	2174
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	76
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 2R 2S 2T 3D

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2020 Form M-1 annual report. If the plan was not required to file the 2020 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 A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

A Name of plan
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMMUNITY CARE PHYSICIANS, P.C.

D Employer Identification Number (EIN)
14-1660131

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
42-0127290	61271	425252	2255	10/01/2020	09/30/2021

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	
5	Current value of plan's interest under this contract in separate accounts at year end	5	105014012

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☒ other (specify) ▶ FLEXIBLE INVESTMENT ANNUITY

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ FLEXIBLE INVESTMENT ANNUITY

b	Balance at the end of the previous year			7b	
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6) Total additions			7c(6)	
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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.**	**2020** **This Form is Open to Public Inspection.**

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

A Name of plan	**B** Three-digit plan number (PN) ▶
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN	001

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
COMMUNITY CARE PHYSICIANS, P.C.	14-1660131

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).. . . . . ☐ 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

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

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

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

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

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

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

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

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

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

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

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

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

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 37 50 64	CONTRACT ADMINISTRATOR	376415	Yes [X] No [ ]	Yes [X] No [ ]	1594	Yes [ ] No [X]

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

WILSHIRE ASSOCIATES INC.

(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 72	INVESTMENT ADVISORY	0	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [X] No [ ]

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

BST

14-1442607

(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?
10 17 50	AUDITING AND CONSULTING	42457	Yes [ ] No [X]	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
PRINCIPAL LIFE INSURANCE CO	13 37 50 64	1594

(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.
FIDELITY GLOBAL BROKERAGE GROUP INC 04-3257666	PRINCIPAL SELF DIRECTED BROKERAGE ACCOUNT FEES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
WILSHIRE ASSOCIATES INCORPORATED	27 72	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.
PRINCIPAL LIFE INSURANCE COMPANY 42-0127290	1 BASIS POINT ANNUALLY ON ELIGIBLE PLAN ASSETS IN WILSHIRE 3(21) OR WILSHIRE 3(21) AUTO- EXECUTE FIDUCIARY SERVICE.

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III	**Termination Information on Accountants and Enrolled Actuaries (see instructions)** (complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

A Name of plan
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
COMMUNITY CARE PHYSICIANS, P.C.

D Employer Identification Number (EIN)
14-1660131

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: PRIN FIN GRP, INC. STOCK SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-086	P	141510

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN SMALLCAP SEP ACCT-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-029	P	16604880

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL MIDCAP SEP ACCT-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-020	P	17380851

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL U.S. PROPERTY SA-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-027	P	5874277

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL CORE PLUS BOND SEP ACCT-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-005	P	12721784

a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL DIVERSIFIED INTL SA-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-015	P	10623276

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LGCP S&P 500 INDEX SA-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-016	P	33636749

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP VALUE I SA-Z

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-043	P	8030685

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HYB 2010 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-001	C	1597695

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HYB 2015 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-002	C	5087068

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HYB 2020 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-003	C	9678848

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HYB 2025 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-004	C	7092464

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HYB 2030 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-005	C	10507738

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HB 2035 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-006	C	10811433

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HB 2040 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-007	C	10456756

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HB 2045 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-008	C	6626175

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HY 2050 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
26-6447574-009	C	4528644

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HY 2055 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN 26-6447574-010	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1481037

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HY INC CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN 26-6447574-011	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1976876

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HY 2060 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN 26-6447574-012	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 528471

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME HY 2065 CIT U

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

c EIN-PN 26-6447574-013	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 166471

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II **Information on Participating Plans (to be completed by DFEs)**
(Complete as many entries as needed to report all participating plans)

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

A Name of plan
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMMUNITY CARE PHYSICIANS, P.C.

D Employer Identification Number (EIN)
14-1660131

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2430292	10296862
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	2622892	
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1999948	1777531
(9) Value of interest in common/collective trusts	1c(9)	56616879	70539676
(10) Value of interest in pooled separate accounts	1c(10)	84776870	105014012
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	124370705	139060021
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		11271536

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	272817586	337959638
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	166557	21328
k	Total liabilities (add all amounts in lines 1g through1j)	1k	166557	21328
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	272651029	337938310

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)	10306896	
	(B) Participants	2a(1)(B)	10640903	
	(C) Others (including rollovers)	2a(1)(C)	2036828	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		22984627
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	73711	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		73711
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	104648	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1294276	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1398924
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		10624312
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		22905443
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		24423060
c Other income	2c		1478229
d Total income. Add all **income** amounts in column (b) and enter total	2d		83888306
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	18292327	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		18292327
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	308698	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		308698
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		18601025
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		65287281
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)** [X] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [X] DOL Regulation 2520.103-8 **(2)** [X] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: BST & CO. CPAS, LLP **(2)** EIN: 14-1442607

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	

			Yes	No	Amount
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	
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**			

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 Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 10/01/2020 and ending 09/30/2021

A Name of plan
COMMUNITY CARE PHYSICIANS, P.C. PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMMUNITY CARE PHYSICIANS, P.C.

D Employer Identification Number (EIN)
14-1660131

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): 42-0127290

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 deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**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_____



Profit Sharing Plan

Financial Statements

September 30, 2021 and 2020

Community Care Physicians, P.C.
Profit Sharing Plan

Financial Statements

September 30, 2021 and 2020

C O N T E N T S

Page

Independent Auditor's Report 1-2

Financial Statements

Statements of Net Assets Available for Benefits 3
Statements of Changes in Net Assets Available for Benefits 4
Notes to Financial Statements 5-14

Supplementary Information

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations 15-19

Independent Auditor's Report

Pension Committee of the Board of Directors
Community Care Physicians, P.C.
Latham, New York

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Community Care Physicians, P.C. Profit Sharing Plan (Plan), which comprise the statements of net assets available for benefits as of September 30, 2021 and 2020, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Principal Trust Company, the Trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the plan administrator that the Trustee holds the Plan's assets and executes transactions. The plan administrator has obtained a certification from the Trustee as of and for the years ended September 30, 2021 and 2020, that the information provided to the plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule H, Line 4i, schedule of assets (held at end of year) as of September 30, 2021 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.

Report on Form and Content in Compliance with Department of Labor Rules and Regulations

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

BST + Co. CPAs, LLP

Albany, New York
June 28, 2022

Community Care Physicians, P.C.
Profit Sharing Plan

Statements of Net Assets Available for Benefits

	September 30, 2021	September 30, 2020
ASSETS		
Investments, at fair value	$ 325,885,245	$ 268,387,346
Receivables		
Employer contributions	10,296,862	2,430,292
Participant notes	1,777,531	1,999,948
	12,074,393	4,430,240
Total assets	337,959,638	272,817,586
LIABILITIES		
Accrued expenses	-	95,000
Excess contributions payable	21,328	71,557
	21,328	166,557
NET ASSETS AVAILABLE FOR BENEFITS	**$ 337,938,310**	**$ 272,651,029**

See Independent Auditor's Report and accompanying Notes to Financial Statements.

Community Care Physicians, P.C.
Profit Sharing Plan

Statements of Changes in Net Assets Available for Benefits

	Years Ended September 30,	
	2021	**2020**
ADDITIONS		
Investment income		
Net appreciation in fair value of investments	$ 59,431,044	$ 26,177,294
Interest and dividends	1,398,924	1,555,771
	60,829,968	27,733,065
Interest income from participant notes receivable	73,711	86,737
Contributions		
Employer	10,306,896	2,430,292
Participant	10,640,903	10,021,631
Rollover	2,036,828	1,131,687
	22,984,627	13,583,610
Total additions	83,888,306	41,403,412
DEDUCTIONS		
Benefits paid	18,292,327	14,553,309
Administrative expenses	308,698	224,341
Total deductions	18,601,025	14,777,650
Net increase in net assets available for benefits	**65,287,281**	**26,625,762**
NET ASSETS AVAILABLE FOR BENEFITS, ***beginning of year***	272,651,029	246,025,267
NET ASSETS AVAILABLE FOR BENEFITS, ***end of year***	**$ 337,938,310**	**$ 272,651,029**

See Independent Auditor's Report and accompanying Notes to Financial Statements.

Note 1 - Description of Plan

The Community Care Physicians, P.C. Profit Sharing Plan (Plan) was formed effective January 2, 1985. The Plan is sponsored by Community Care Physicians, P.C. (Company).

In January 2020, the World Health Organization declared the outbreak of a novel coronavirus (COVID-19) as a "Public Health Emergency of International Concern," which caused business disruption through mandated and voluntary closings in both the public and private sectors. In March 2020, the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) was enacted to provide emergency assistance and health care response for individuals, families and businesses affected. The CARES Act provides various forms of optional relief to the Company and participants of retirement plans.

The following description of the Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

a. General

The Plan is a profit sharing plan with a 401(k) feature, covering all eligible full-time and part-time employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan assets are held by the Trustee, Principal Trust Company, a member of Principal Financial Group. Company contributions, participant elective deferrals, and participant accounts are held and administered by the Trustee, who invests cash received and income from investments based on written instructions from the Company and participants, and makes distributions to participants. The Company's Pension Committee and investment advisor are responsible for oversight of the Plan and for determining the appropriateness of the Plan's investment offerings and monitoring investment performance.

b. Plan Eligibility

Prior to October 1, 2019, employees were required to complete certain length of service requirements to participate in the Plan with respect to both employee and employer contributions (dependent on full-time or part-time employment status when hired). Employees expected to work at least 30 hours per week were required to complete one month of service. Employees expected to work less than 30 hours per week were required to complete 12 months of service in which they were credited with 1,000 hours of service during the eligibility computation period. The "initial eligibility computation period" was defined as the twelve-month period that began with the date the employee was hired. If the employee did not meet the service requirements during the first year following the date of hire, the eligibility period became the Plan year. The requirements could then be met during the Plan year.

Effective October 1, 2019, the Plan was amended, such that employees are eligible to participate in the Plan with respect to employee contributions immediately upon hire (or after attaining age 21, if later). Employees must complete the length of service requirements described in the preceding paragraph to be eligible to receive employer contributions (Note 1c).

Note 1 - Description of Plan - Continued

c. Contributions

Each year, participants may contribute a percentage or fixed dollar amount of their pre-tax annual compensation to the Plan, subject to certain limitations as defined by the Internal Revenue Code (IRC). The limits are based upon a calendar year, and were $19,500 for both years ended December 31, 2021 and 2020.

Effective October 1, 2019, unless the employee elects otherwise, 6% of his/her eligible compensation will be automatically deferred into the Plan for the benefit of the employee. Participants may also make Roth contributions into the Plan. Participants who have attained age fifty before the end of the Plan year are eligible to make "catch-up" contributions. Participants may also contribute rollover amounts representing distributions from other qualified retirement plans.

Subsequent to the satisfaction of Plan eligibility (Note 1b), active employees share in employer profit sharing contributions (if any) and employer safe harbor contributions, regardless of hours worked during the year. Terminated employees are eligible for employer profit sharing contributions (if any) and employer safe harbor contributions, during the year of termination when credited with at least 500 hours of service during the year.

For the year ended September 30, 2021, participants received a profit sharing contribution from the Company based on a class allocation formula. Classes for the profit sharing contribution are as follows:

Class 1	Physicians who own 30 or more shares of Company stock
Class 2	Physicians who own at least one, but less than 30 shares of Company stock
Class 3	Non-owner physicians and management
Class 4	Non-physician providers
Class 5	All other employees

Contributions allocated to each class are discretionary and determined annually by the Board of Directors. The contributions were determined to be nondiscriminatory under the Internal Revenue Code for the year ended September 30, 2021. There were no profit sharing contributions from the Company for the year ended September 30, 2020. Contributions allocated by class were as follows for the year ended September 30, 2021:

Class 1	$ 29,950
Class 2	7%
Class 3	4%
Class 4	2%
Class 5	2%

The Company makes a 3%, nonelective "safe harbor" contribution to the Plan based on eligible employee compensation during the period. A nonelective safe harbor contribution is a minimum contribution made by the Company that allows the Plan to be exempt from 401(k) nondiscrimination tests.

Note 1 - Description of Plan - Continued

c. Contributions - Continued

Due to a substantial business hardship as a result of the COVID-19 outbreak, the Plan was amended to terminate the employer's nonelective "safe harbor" contribution with respect to compensation paid to employees on or after the amendment's effective date of May 1, 2020. Participants were notified of the Plan amendment on April 1, 2020. The employer's nonelective "safe harbor" contribution was reinstated effective October 1, 2020.

Participants direct their elective deferral amounts and Company contributions to any of several investment options, which are held and administered by the Trustee of the Plan.

d. Participant Accounts

Each participant's account is credited with the participant's contribution, the Company's profit sharing contribution (if any), an allocation of forfeitures used to reduce the Company's profit sharing contribution (Note 1h), the Company's non-elective "safe harbor" contributions and the Plan's investment earnings net of investment expenses. Allocations are based on participant earnings or account balances, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

e. Vesting

Participants are immediately vested in their elective deferral amounts, rollover contributions, and the Company's nonelective "safe harbor" contribution, plus actual earnings thereon.

Vesting in the Company's profit sharing contribution is based on years of continuous service. A participant is 100% vested upon: (1) attaining six years of credited service; (2) disability; (3) death; (4) normal retirement at age 59½; or (5) termination of the Plan. If a participant's employment with the Company is terminated before age 59½ for any reason other than disability or death, the participant shall be entitled to an amount equal to the vested percentage of his or her account balance.

A participant shall have a vested and nonforfeitable interest in his or her account balance determined by the number of years of service as follows:

Years of Service	Vesting %
Less than 2	0
2 but less than 3	20
3 but less than 4	40
4 but less than 5	60
5 but less than 6	80
6 or more	100

Note 1 - Description of Plan - Continued

f. Participant Notes Receivable

Participants may borrow from their accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000, or 50% of their vested account balance. In addition, the 50% limit is reduced by the highest outstanding loan balance of any previous loans made in the previous twelve months. Participant notes are secured by the balance in the participants' accounts and bear interest at a rate commensurate with rates of commercial lending institutions for loans which would be made under similar circumstances, as determined by the Plan administrator. Principal and interest are paid ratably through regular payroll deductions. In general, loans must be repaid within five years; however, if the loan is used to purchase a principal residence, the term may be longer.

Under the relief provisions of the CARES Act, plan sponsors could allow qualified individuals (as defined in the CARES Act) to take loans up to the lesser of $100,000 or 100% of their vested account balance between March 27, 2020 and September 22, 2020. In addition, for loans outstanding as of March 27, 2020, plan sponsors could allow qualified individuals to delay loan repayments due between March 27, 2020 and December 31, 2020 for up to one year.

g. Payment of Benefits

On termination of service due to death, disability, retirement, or other reasons, a participant (or beneficiary in the case of death) may elect to receive an amount equal to the value of the participant's vested interest in their account as a lump sum distribution, or defer distribution until a later date. However, if the vested portion of a participant's account balance is $5,000 or less (excluding rollover balances), this amount will be paid as a lump sum distribution as soon as possible following termination, retirement, disability, or to the beneficiary following death.

Under the relief provisions of the CARES Act, Plan sponsors could allow participants to take up to a $100,000 distribution from a qualified retirement plan, if the participant met certain requirements as defined in the CARES Act.

h. Forfeitures

Forfeitures may be first used to pay administrative expenses under the Plan. Forfeitures not used to pay administrative expenses are used to reduce the employer's discretionary profit sharing contributions and allocated in the same manner. Forfeitures not used to pay administrative expenses or to reduce the Company's discretionary profit sharing contributions are allocated to participant accounts in the same manner as the employer's discretionary profit sharing contribution. The Plan used $142,483 and $2,084 of forfeitures to pay administrative expenses during the years ended September 30, 2021 and 2020, respectively. As of September 30, 2021, and 2020, available forfeitures totaled $365,849 and $294,198, respectively. The Plan allocated $129,498 of the available forfeitures as of September 30, 2020 to participants accounts. The Plan used $235,340 of the available forfeitures as of September 30, 2021 to reduce the employer's discretionary profit sharing contribution for the year ended September 30, 2021.

Note 2 - Summary of Significant Accounting Policies

a. Basis of Accounting

The accompanying financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) for defined contribution plans.

b. Estimates

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

c. Investment Valuation and Income Recognition

Investments are reported at fair value, which is defined as the price that would be received to sell an asset in an orderly transaction between market participants on the measurement date. The Plan trustees determine the Plan's valuation policies utilizing information provided by the investment advisors and Trustee.

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

d. Participant Notes Receivable

Participant notes receivable are stated 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 they are incurred. If a participant ceases to make loan repayments, the loan is deemed to be in default. Defaulted loan balances are taxable income to the participant in the year of default. Defaulted loans remain Plan assets until the loan is repaid or the participant has a distributable event. Loans treated as distributions totaled $171,492 and $143,825 for the years ended September 30, 2021 and 2020, respectively.

e. Excess Contributions Payable

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service (IRS) are recorded as a liability with a corresponding reduction to contributions. The Plan distributed the excess contributions to the applicable participants subsequent to the Plan's year-end.

f. Payment of Benefits

Benefits are recorded when paid.

Note 2 - Summary of Significant Accounting Policies - Continued

g. Expenses

Certain Plan fees are paid from Plan assets, and other expenses of the Plan are paid directly by the Company. Recordkeeping fees and fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

h. Subsequent Events

The Plan has evaluated subsequent events for potential recognition or disclosure through June 28, 2022, the date the financial statements were available to be issued.

Note 3 - Information Certified and Provided by Trustee (Unaudited)

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by the Trustee as complete and accurate, except for comparing such information certified by the Trustee to the information included in the Plan's financial statements and supplemental schedule:

	September 30,	
	2021	2020
Investments, at fair value	$ 325,885,245	$ 268,387,346
Participant notes receivable	1,777,531	1,999,948
Investment income		
Interest and dividends	1,398,924	1,555,771
Net appreciation in fair value of investments	59,431,044	26,177,294
Interest income from participant notes receivable	73,711	86,737

Note 4 - Investments and Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy are as follows:

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

Note 4 - Investments and Fair Value Measurements - Continued

Level 2 Inputs to the valuation methodology include:

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

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value at September 30, 2021 and 2020. There have been no changes to the methodologies at September 30, 2021.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Collective Investment Trusts: Valued at the NAV of units of a collective trust fund. The NAV, as provided by the Trustee, is based on the fair value of the underlying investments held by the fund less its liabilities. The NAV is calculated in a manner consistent with U.S. GAAP for investment companies and is the basis for current transactions (purchases and sales), which may occur daily.

Pooled Separate Accounts: Valued based upon the units of such pooled separate accounts held by the Plan at year end multiplied by the respective unit value. The unit value is calculated daily based on the net asset value of shares of the underlying fund and includes the underlying investments' daily performance investment income and related administrative and investment fees assessed. The NAV is not a publicly quoted price in an active market and is computed in accordance with investment company measurement principles. The pooled separate accounts can be redeemed at NAV as of the measurement date. The Plan has no unfunded commitments related to the pooled separate accounts and redemptions and subscriptions are permitted daily.

Corporate Stock and Exchange-Traded Funds: Valued at the closing price reported on the active market on which the securities or funds are traded. Corporate stock and exchange-traded funds are held within the self-directed brokerage accounts.

Note 4 - Investments and Fair Value Measurements - Continued

Self-Directed Brokerage Accounts: Accounts consist of mutual funds, exchange-traded funds, and corporate stock that are valued on the basis of readily determinable market prices.

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

The following tables set forth, by level within the fair value hierarchy, the Plan's assets measured at fair value:

	September 30, 2021			
	Level 1	Level 2	Level 3	Total
Mutual Funds	$ 139,060,021	$ -	$ -	$ 139,060,021
Collective Investment Trusts	70,539,676	-	-	70,539,676
Self-Directed Brokerage Accounts	11,271,536	-	-	11,271,536
Total assets in the fair value hierarchy	$ 220,871,233	$ -	$ -	220,871,233
Investments measured at NAV (a):				
Pooled Separate Accounts				105,014,012
Investments at fair value				$ 325,885,245

	September 30, 2020			
	Level 1	Level 2	Level 3	Total
Mutual Funds	$ 117,746,067	$ -	$ -	$ 117,746,067
Collective Investment Trusts	56,616,879	-	-	56,616,879
Self-Directed Brokerage Accounts	9,247,530	-	-	9,247,530
Total assets in the fair value hierarchy	$ 183,610,476	$ -	$ -	183,610,476
Investments measured at NAV (a):				
Pooled Separate Accounts				84,776,870
Investments at fair value				$ 268,387,346

(a) Certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

Note 5 - Related Party and Party-In-Interest Transactions

The Company paid expenses in connection with the administration of the Plan totaling $91,436 and $76,123 for the years ended September 30, 2021 and 2020 respectively. In addition, certain administrative functions are performed by employees of the Company who do not receive compensation from the Plan for such functions.

Pooled separate accounts and collective investment trusts offered as investment options are managed by Principal Trust Company, the Trustee of the Plan.

Note 6 - Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event that the Plan terminates, participants will become 100% vested in their accounts, and the remaining net assets of the Plan will be allocated as prescribed by ERISA and its related regulations. Upon termination of the Plan, the Trustee will continue to hold the Plan assets and will make distributions of the Plan benefits in accordance with the instructions of the Plan Administrator and the Plan provisions.

Note 7 - Tax Status

The IRS has ruled that the Volume Submitter Profit Sharing Plan with Cash or Deferred Arrangement (CODA) offered by the Plan Trustee and adopted by the Plan on October 1, 2019, constitutes a qualified plan under Section 401(a) of the IRC and is, therefore, exempt from federal income taxes under the provisions of Section 501(a). The volume submitter plan has received an opinion letter dated July 1, 2014 from the IRS as to the Plan's qualified status. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more-likely-than-not would not be sustained upon examination by taxing authorities. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8 - Risk and Uncertainties

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

Note 9 - Subsequent Event

During December 2021, the Company shareholders contributed their stock to CCP TASS, Inc. (TASS) in exchange for newly issued shares of TASS. The Company merged into Community Medical Providers, PLLC (Medical Providers) and the Company ceased to exist, with Medical Providers continuing the practice of medicine. Effective December 31, 2021, the shareholders of TASS sold their shares to Capital District Physicians Healthcare Network, Inc., a subsidiary of Capital District Physicians Healthcare Plan, Inc.

Effective October 1, 2021, the Plan was restated to change the Plan name to CCP 401(k) Retirement Savings Plan and to change the plan year to January 1 of each year through December 31. Under the restated Plan, the Company may elect to make a non-elective ADP test safe harbor contribution and may also make a discretionary, non-elective profit-sharing contribution (determined on an annual basis).

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year)

(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 (1)	(e) Current Value
*	Principal Lg Cap S&P 500 Index SA-Z	Pooled Separate Account		33,636,749
*	Principal Mid Cap SA-Z	Pooled Separate Account		17,380,851
*	Principal Mid Cap I SA-Z	Pooled Separate Account		8,030,685
*	Principal Small Cap SA-Z	Pooled Separate Account		16,604,880
*	Principal Diversified International SA-Z	Pooled Separate Account		10,623,276
*	Principal U.S. Property Account	Pooled Separate Account		5,874,277
*	Principal Core Plus Bond Sep Acct-Z	Pooled Separate Account		12,721,784
*	Principal Financial Group Inc. Stock SA	Pooled Separate Account		141,510
	Vanguard Windsor II Fund	Mutual Fund		12,178,242
	Vanguard Balanced Index Admrl Fund	Mutual Fund		22,813,129
	American Century Ultra R6 Fund	Mutual Fund		16,180,177
	American Century Small Cap Value R6 Fund	Mutual Fund		5,979,919
	Fidelity Total International Index Fund	Mutual Fund		2,272,380
	Vanguard Health Care Fund	Mutual Fund		12,157,940
	Vanguard Equity Income- Adm Fund	Mutual Fund		11,477,547
	T. Rowe Price Growth Fund	Mutual Fund		27,428,898
	New Perspective Fund	Mutual Fund		4,629,062
	Vanguard Short-Term Treasury Fund	Mutual Fund		16,421,909
	Vanguard Inflation Protection Fund	Mutual Fund		3,887,689
	Franklin Utilities R6 Fund	Mutual Fund		1,945,264
	Vanguard Total Bond market Index Fund	Mutual Fund		1,687,865
*	Principal Lifetime Hybrid 2010 CIT Z	Collective Investment Trust		1,597,695
*	Principal Lifetime Hybrid 2015 CIT Z	Collective Investment Trust		5,087,068
*	Principal Lifetime Hybrid 2020 CIT Z	Collective Investment Trust		9,678,848
*	Principal Lifetime Hybrid 2025 CIT Z	Collective Investment Trust		7,092,464
*	Principal Lifetime Hybrid 2030 CIT Z	Collective Investment Trust		10,507,738
*	Principal Lifetime Hybrid 2035 CIT Z	Collective Investment Trust		10,811,433
*	Principal Lifetime Hybrid 2040 CIT Z	Collective Investment Trust		10,456,756
*	Principal Lifetime Hybrid 2045 CIT Z	Collective Investment Trust		6,626,175
*	Principal Lifetime Hybrid 2050 CIT Z	Collective Investment Trust		4,528,644
*	Principal Lifetime Hybrid 2055 CIT Z	Collective Investment Trust		1,481,037
*	Principal Lifetime Hybrid 2060 CIT Z	Collective Investment Trust		528,471
*	Principal Lifetime Hybrid 2065 CIT Z	Collective Investment Trust		166,471
*	Principal Lifetime Hybrid Income CIT Z	Collective Investment Trust		1,976,876
	Apple Computer Inc	Self Directed Brokerage - Corporate Stock		1,206,571
	Duke Energy Corp New Com	Self Directed Brokerage - Corporate Stock		32,497
	Cohen & Steers Quality Income Rlty Fd In	Self Directed Brokerage - Corporate Stock		7,450
	Exxon Mobil Corp Com	Self Directed Brokerage - Corporate Stock		176,460
	Intel Corp Com	Self Directed Brokerage - Corporate Stock		21,312
	Lockheed Martin Corp Com	Self Directed Brokerage - Corporate Stock		17,600
	Northrop Grumman Corp Com	Self Directed Brokerage - Corporate Stock		21,609
	Bristol Myers Squibb Co Com	Self Directed Brokerage - Corporate Stock		20,118
	Cisco Systems Inc	Self Directed Brokerage - Corporate Stock		27,215
	Caterpiller Inc Com	Self Directed Brokerage - Corporate Stock		28,796
	Snap Inc CL A	Self Directed Brokerage - Corporate Stock		7,387
	Amazon Com In	Self Directed Brokerage - Corporate Stock		154,397

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Netflix Inc Com	Self Directed Brokerage - Corporate Stock		94,603
	Aurora Cannibis Inc Com NPV ISIN Stock	Self Directed Brokerage - Corporate Stock		512
	Blackstone Mortgage Tru-CL A	Self Directed Brokerage - Corporate Stock		9,096
	Alibaba Group Hldg LTD Sponsored Ads	Self Directed Brokerage - Corporate Stock		134,429
	Fidelity Select Med Technology & Devices	Self Directed Brokerage - Corporate Stock		31,954
	Alphabet Inc Cap Stk CL C	Self Directed Brokerage - Corporate Stock		69,298
	Tesla Inc Com	Self Directed Brokerage - Corporate Stock		179,136
	American Tower Corp Com	Self Directed Brokerage - Corporate Stock		2,654
	Arista Networks Inc Com	Self Directed Brokerage - Corporate Stock		6,873
	Boeing Co Com	Self Directed Brokerage - Corporate Stock		2,199
	Constellation Brands Inc Com	Self Directed Brokerage - Corporate Stock		4,214
	Disney Walt Co	Self Directed Brokerage - Corporate Stock		30,112
	General Mtrs Co Com	Self Directed Brokerage - Corporate Stock		5,271
	Goldman Sachs Group Inc Com	Self Directed Brokerage - Corporate Stock		5,670
	Mastercard Inc CL A	Self Directed Brokerage - Corporate Stock		6,954
	Ollies Baragain Outlt Hldgs Inc Com	Self Directed Brokerage - Corporate Stock		1,206
	Shopify Inc Com NPV CL A ISIN	Self Directed Brokerage - Corporate Stock		13,558
	Target Corp Com	Self Directed Brokerage - Corporate Stock		4,575
	Astrazeneca ADR Each Rep 1 Ord	Self Directed Brokerage - Corporate Stock		30,030
	JD.com Inc.	Self Directed Brokerage - Corporate Stock		4,118
	United Airls Hldgs Inc.	Self Directed Brokerage - Corporate Stock		285
	Abbvie inc	Self Directed Brokerage - Corporate Stock		2,157
	Moderna Inc	Self Directed Brokerage - Corporate Stock		3,849
	Nvidia Corp	Self Directed Brokerage - Corporate Stock		20,716
	Healthcare Trust of America	Self Directed Brokerage - Corporate Stock		7,415
	American Express	Self Directed Brokerage - Corporate Stock		3,351
	ASML Holding NV Euro	Self Directed Brokerage - Corporate Stock		3,726
	Big Commerce Hldgs	Self Directed Brokerage - Corporate Stock		506
	Broadcom Inc	Self Directed Brokerage - Corporate Stock		2,425
	Costco Wholesale Corp	Self Directed Brokerage - Corporate Stock		2,247
	Crowdstrike Hldgs Inc	Self Directed Brokerage - Corporate Stock		18,188
	Microsoft Corp	Self Directed Brokerage - Corporate Stock		57,794
	3M Co	Self Directed Brokerage - Corporate Stock		877
	Starbucks	Self Directed Brokerage - Corporate Stock		24,709
	Airbnb Inc Class A	Self Directed Brokerage - Corporate Stock		3,355
	Algonquin Pwr &Utils F	Self Directed Brokerage - Corporate Stock		147
	Alphabet Inc. Class A	Self Directed Brokerage - Corporate Stock		13,368
	Barrick Gold Corp F	Self Directed Brokerage - Corporate Stock		668
	Block Inc Class A	Self Directed Brokerage - Corporate Stock		42,007
	Charles Schwab Corp	Self Directed Brokerage - Corporate Stock		1,584
	Cytosorbents Corpora	Self Directed Brokerage - Corporate Stock		162
	Docusign Inc	Self Directed Brokerage - Corporate Stock		1,287
	Chimera Invt Corp Cum Pfd C 7.75%	Self Directed Brokerage - Corporate Stock		6,435
	Etsy Inc	Self Directed Brokerage - Corporate Stock		1,040
	Fiverr Interntnl Ltd F	Self Directed Brokerage - Corporate Stock		2,923
	Fulgent Genetics Inc	Self Directed Brokerage - Corporate Stock		1,799
	Global Ship Lease Fclass A	Self Directed Brokerage - Corporate Stock		16,597
	Gold Rty Corp F	Self Directed Brokerage - Corporate Stock		200
	Ibm Corp	Self Directed Brokerage - Corporate Stock		2,779
	Lam Research Corp	Self Directed Brokerage - Corporate Stock		1,138

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Lemonade Inc	Self Directed Brokerage - Corporate Stock		2,033
	Marvell Technology Inc	Self Directed Brokerage - Corporate Stock		3,016
	Meta Platforms Inc Class A	Self Directed Brokerage - Corporate Stock		236,215
	Navios Maritime Partn Lp	Self Directed Brokerage - Corporate Stock		8,088
	Nextera Energy Inc	Self Directed Brokerage - Corporate Stock		785
	Nio Inc	Self Directed Brokerage - Corporate Stock		3,741
	Okta Inc Class A	Self Directed Brokerage - Corporate Stock		3,560
	Pacific Biosciences	Self Directed Brokerage - Corporate Stock		128
	Pinterest Inc Class A	Self Directed Brokerage - Corporate Stock		16,304
	Quantum Cp Dlt & Sto	Self Directed Brokerage - Corporate Stock		829
	Paypal Hldgs Inc	Self Directed Brokerage - Corporate Stock		28,623
	Riot Blockchain I N C	Self Directed Brokerage - Corporate Stock		103
	Salesforce Inc	Self Directed Brokerage - Corporate Stock		1,356
	Sea Ltd Funsponsored	Self Directed Brokerage - Corporate Stock		1,594
	Realty Income Corp	Self Directed Brokerage - Corporate Stock		973
	Silvercorp Metals F	Self Directed Brokerage - Corporate Stock		221
	Stellantis N V F	Self Directed Brokerage - Corporate Stock		191
	Stem Inc	Self Directed Brokerage - Corporate Stock		119
	Taiwan Semiconductor Mfg. Co.	Self Directed Brokerage - Corporate Stock		22,330
	Tenet Healthcare	Self Directed Brokerage - Corporate Stock		332
	Tessco Technologies	Self Directed Brokerage - Corporate Stock		84
	The Trade Desk Inc Class A	Self Directed Brokerage - Corporate Stock		703
	Union Pacific Corp	Self Directed Brokerage - Corporate Stock		3,920
	Virgin Galactic Hldgs Inclass A	Self Directed Brokerage - Corporate Stock		76
	Ishares Tr Msci Emerging Markets Etf	Self Directed Brokerage - Exchange Traded Fund		32,837
	Schwab Strategic Tr Us Small Cap Etf	Self Directed Brokerage - Exchange Traded Fund		92,392
	Advisorshares Pure Us Cannabis Etf	Self Directed Brokerage - Exchange Traded Fund		15,780
	Pimco Etf Tr Total Return Active Etf	Self Directed Brokerage - Exchange Traded Fund		11,055
	First Tr Exchange Traded Fd Vi Dorsey Wright Focus	Self Directed Brokerage - Exchange Traded Fund		99,846
	Invesco Exchange Traded Fd Tr S&P500 Eql	Self Directed Brokerage - Exchange Traded Fund		105,773
	Ark Genomic Revolution Etf	Self Directed Brokerage - Exchange Traded Fund		1,121
	Etfmg Alternative Harvest Etf	Self Directed Brokerage - Exchange Traded Fund		3,885
	First Tr Nasdaq 100 Technology Index Fd	Self Directed Brokerage - Exchange Traded Fund		318,598
	First Tr Exchange Traded Fd Ny Arca	Self Directed Brokerage - Exchange Traded Fund		38,528
	Ark Etf Tr Innovation Etf	Self Directed Brokerage - Exchange Traded Fund		1,105
	Alps Emerging Sector Dividend	Self Directed Brokerage - Exchange Traded Fund		129,870
	Alps International Sector Dividend	Self Directed Brokerage - Exchange Traded Fund		96,722
	Distillate Us Fundm Staband Vlu Etf	Self Directed Brokerage - Exchange Traded Fund		4,096
	Ishares Tr Us Utilities	Self Directed Brokerage - Exchange Traded Fund		10,262
	Etfmg Orime Cyber Security Etf	Self Directed Brokerage - Exchange Traded Fund		912
	First Tr Exchange Traded Fd Ii Health Care	Self Directed Brokerage - Exchange Traded Fund		157,609
	Schwab Strategic Tr Us Large Cap Value	Self Directed Brokerage - Exchange Traded Fund		43,390
	First Tr Cons Dscrtnry Alphad Etf Iv	Self Directed Brokerage - Exchange Traded Fund		124,131
	First Trust Internet Index Cf Etf	Self Directed Brokerage - Exchange Traded Fund		276,251
	First Trust Nasdaq Trnsportation Etf	Self Directed Brokerage - Exchange Traded Fund		117,116
	First Trust Technology Alphad Etf Iv	Self Directed Brokerage - Exchange Traded Fund		282,724
	Global X Autonomous & Electric Vehic	Self Directed Brokerage - Exchange Traded Fund		6,855
	Alps Sector Dividend Dogs Etf	Self Directed Brokerage - Exchange Traded Fund		67,848
	Invesco Emerging Markets Innovators Y	Self Directed Brokerage - Exchange Traded Fund		59,211
	Principal Core Fixed Income Instl	Self Directed Brokerage - Exchange Traded Fund		15,749
	Ishares Tr Expanded Tech	Self Directed Brokerage - Exchange Traded Fund		81,425
	Jp Morgan Exchange Traded Fd Ultra Shrt	Self Directed Brokerage - Exchange Traded Fund		15,368

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Ishares Us Real Estate Etf	Self Directed Brokerage - Exchange Traded Fund		10,546
	Global X Silver Miners Etf	Self Directed Brokerage - Exchange Traded Fund		350
	Invesco S & P Smallcap Value With Momentum Etf	Self Directed Brokerage - Exchange Traded Fund		59,653
	Invesco S&P 500 Low Volatility Etf	Self Directed Brokerage - Exchange Traded Fund		67,472
	Invsc High Yield Dividend Etf	Self Directed Brokerage - Exchange Traded Fund		29,710
	Invsc S P 500 Pure Valueetf	Self Directed Brokerage - Exchange Traded Fund		39,194
	Ishares U S Consumer Discrtry Etf	Self Directed Brokerage - Exchange Traded Fund		39,892
	Ishares Us Industrials Etf	Self Directed Brokerage - Exchange Traded Fund		39,221
	Schwab Us Dividend Equity Etf	Self Directed Brokerage - Exchange Traded Fund		7,424
	Spac And New Issue Etf Iv	Self Directed Brokerage - Exchange Traded Fund		719
	Vaneck Morningstar Wide Moat Etf	Self Directed Brokerage - Exchange Traded Fund		7,325
	Wisdomtree Us Smallcap Dividend Etf	Self Directed Brokerage - Exchange Traded Fund		56,912
	Arbitrage Fund Class R	Self Directed Brokerage - Mutual Fund		29,769
	Merger Fund	Self Directed Brokerage - Mutual Fund		15,295
	The Oakmark Equity And Income Investor Class	Self Directed Brokerage - Mutual Fund		11,454
	Permanant Portfolio Fund	Self Directed Brokerage - Mutual Fund		13,260
	Dodge & Cox Income Fund	Self Directed Brokerage - Mutual Fund		33,289
	Parnassus Core Equity	Self Directed Brokerage - Mutual Fund		14,849
	Amg Yacktman Focussed Fund	Self Directed Brokerage - Mutual Fund		11,395
	Janus Henderson Balanced T	Self Directed Brokerage - Mutual Fund		9,155
	VANGUARD GNMA	Self Directed Brokerage - Mutual Fund		304,535
	FMI Common Stock Fund	Self Directed Brokerage - Mutual Fund		6,673
	Jensen Quality Growth FD CL J	Self Directed Brokerage - Mutual Fund		15,993
	Matthews Asia Dividend Fund	Self Directed Brokerage - Mutual Fund		760
	PIMCO Inrl BC FC (U.S. Dollar-Hedged) A	Self Directed Brokerage - Mutual Fund		29,911
	Eaton Vance Floating Rate Class I	Self Directed Brokerage - Mutual Fund		115,728
	Akre Focus Fund Retail Class	Self Directed Brokerage - Mutual Fund		4,372
	American Century Equity Income Fund	Self Directed Brokerage - Mutual Fund		1,243
	Fidelity Government Cash Reserves Fund	Self Directed Brokerage - Mutual Fund		3,273,697
	AVE MARIE RISING DIVIDEND FUND	Self Directed Brokerage - Mutual Fund		4,466
	CONESTOGA SMALL CAP INVESTOR CLASS	Self Directed Brokerage - Mutual Fund		560
	Artisan High Income Fund Investor	Self Directed Brokerage - Mutual Fund		9,995
	Fidelity Total Bond	Self Directed Brokerage - Mutual Fund		123,299
	Fidelity Corporate Bond Fund	Self Directed Brokerage - Mutual Fund		77,643
	Doubleline Low Duration Bond CL I	Self Directed Brokerage - Mutual Fund		166,269
	Doubleline Low Duration CL N	Self Directed Brokerage - Mutual Fund		198,437
	Champlain Mid Cap Advisor Share	Self Directed Brokerage - Mutual Fund		16,794
	T Rowe Price Global Stock	Self Directed Brokerage - Mutual Fund		26,550
	Value Line Mid Cap Focused Investors FD	Self Directed Brokerage - Mutual Fund		1,117
	Doubleline Total RT Bond FD CL N	Self Directed Brokerage - Mutual Fund		15,282
	Fidelity Blue Chip Growth	Self Directed Brokerage - Mutual Fund		10,349
	Pfg American Fds Cons Inc Strat Cl R	Self Directed Brokerage - Mutual Fund		36,836
	Pfg American Funds Growth Strat Cl R	Self Directed Brokerage - Mutual Fund		98,039
	Pfg Balanced Strategy Fund Cl R	Self Directed Brokerage - Mutual Fund		53,810
	Pfg Bny Mellon Diversifier Start R	Self Directed Brokerage - Mutual Fund		119,713
	Pfg Br Equity Esg Strategy Cl R	Self Directed Brokerage - Mutual Fund		93,315
	Pfg Equity Index Focused Strategy R	Self Directed Brokerage - Mutual Fund		12,995
	Pfg Jp Morgan Tactic Moderate Strategy R	Self Directed Brokerage - Mutual Fund		107,941
	Pfg Jp Morgan Tactic Agressive Strategy R	Self Directed Brokerage - Mutual Fund		22,111
	Pfg Meeder Tactical Strategy Fund R	Self Directed Brokerage - Mutual Fund		89,697
	Pfg Mfs Aggressive Growth Strategy R	Self Directed Brokerage - Mutual Fund		57,103

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Pfg Tactical Income Strategy Cl R	Self Directed Brokerage - Mutual Fund		73,949
	Pfg Active Core Bond Strategy Fund Cl R	Self Directed Brokerage - Mutual Fund		73,527
	Vanguard Index Funds S&P 500 Etf	Self Directed Brokerage - Mutual Fund		1,972
	Buffalo Divident Focused Fund	Self Directed Brokerage - Mutual Fund		3,736
	Hussman Strategic Total Return	Self Directed Brokerage - Mutual Fund		40,223
	T Rowe Price Diversd Mid Cap Growth	Self Directed Brokerage - Mutual Fund		1,572
	Commerce Value	Self Directed Brokerage - Mutual Fund		16,330
	Dodge & Cox Stock I	Self Directed Brokerage - Mutual Fund		193
	First Eagle Gold A	Self Directed Brokerage - Mutual Fund		978
	Franklin Gold And Precious Metals A	Self Directed Brokerage - Mutual Fund		2,472
	Manning & Napier Rainier Intl Discv S	Self Directed Brokerage - Mutual Fund		20,201
	Pfg Fdlt Ins Am&Eq Idx Str R	Self Directed Brokerage - Mutual Fund		120,610
	Pfg Fdlt Ins Am&Eq Sctr Str R	Self Directed Brokerage - Mutual Fund		102,452
	Seven Canyons World Innovators Investor	Self Directed Brokerage - Mutual Fund		2,713
	T. Rowe Price Lrg Cp Va I	Self Directed Brokerage - Mutual Fund		16,159
	T. Rowe Price Mid-Cap Value	Self Directed Brokerage - Mutual Fund		12,208
	Vanguard Star Investor Class	Self Directed Brokerage - Mutual Fund		5,392
	Virtus Allianzgi Convertible A	Self Directed Brokerage - Mutual Fund		4,476
	Virtus Seix Floating Rate High Inc I	Self Directed Brokerage - Mutual Fund		5,128
	Wasatch Small Cap Value	Self Directed Brokerage - Mutual Fund		4,048
	Value Line Asset Allocation Investor	Self Directed Brokerage - Mutual Fund		23,689
				325,885,245
*	Participant notes receivable	3.25% -5.50%		1,777,531
				327,662,776

* Represents a party-in-interest to the Plan, as defined by ERISA.

(1) Cost information may be omitted with respect to participant or beneficiary directed investments under an individual account plan.

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year)

(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 (1)	(e) Current Value
*	Principal Lg Cap S&P 500 Index SA-Z	Pooled Separate Account		33,636,749
*	Principal Mid Cap SA-Z	Pooled Separate Account		17,380,851
*	Principal Mid Cap I SA-Z	Pooled Separate Account		8,030,685
*	Principal Small Cap SA-Z	Pooled Separate Account		16,604,880
*	Principal Diversified International SA-Z	Pooled Separate Account		10,623,276
*	Principal U.S. Property Account	Pooled Separate Account		5,874,277
*	Principal Core Plus Bond Sep Acct-Z	Pooled Separate Account		12,721,784
*	Principal Financial Group Inc. Stock SA	Pooled Separate Account		141,510
	Vanguard Windsor II Fund	Mutual Fund		12,178,242
	Vanguard Balanced Index Admrl Fund	Mutual Fund		22,813,129
	American Century Ultra R6 Fund	Mutual Fund		16,180,177
	American Century Small Cap Value R6 Fund	Mutual Fund		5,979,919
	Fidelity Total International Index Fund	Mutual Fund		2,272,380
	Vanguard Health Care Fund	Mutual Fund		12,157,940
	Vanguard Equity Income- Adm Fund	Mutual Fund		11,477,547
	T. Rowe Price Growth Fund	Mutual Fund		27,428,898
	New Perspective Fund	Mutual Fund		4,629,062
	Vanguard Short-Term Treasury Fund	Mutual Fund		16,421,909
	Vanguard Inflation Protection Fund	Mutual Fund		3,887,689
	Franklin Utilities R6 Fund	Mutual Fund		1,945,264
	Vanguard Total Bond market Index Fund	Mutual Fund		1,687,865
*	Principal Lifetime Hybrid 2010 CIT Z	Collective Investment Trust		1,597,695
*	Principal Lifetime Hybrid 2015 CIT Z	Collective Investment Trust		5,087,068
*	Principal Lifetime Hybrid 2020 CIT Z	Collective Investment Trust		9,678,848
*	Principal Lifetime Hybrid 2025 CIT Z	Collective Investment Trust		7,092,464
*	Principal Lifetime Hybrid 2030 CIT Z	Collective Investment Trust		10,507,738
*	Principal Lifetime Hybrid 2035 CIT Z	Collective Investment Trust		10,811,433
*	Principal Lifetime Hybrid 2040 CIT Z	Collective Investment Trust		10,456,756
*	Principal Lifetime Hybrid 2045 CIT Z	Collective Investment Trust		6,626,175
*	Principal Lifetime Hybrid 2050 CIT Z	Collective Investment Trust		4,528,644
*	Principal Lifetime Hybrid 2055 CIT Z	Collective Investment Trust		1,481,037
*	Principal Lifetime Hybrid 2060 CIT Z	Collective Investment Trust		528,471
*	Principal Lifetime Hybrid 2065 CIT Z	Collective Investment Trust		166,471
*	Principal Lifetime Hybrid Income CIT Z	Collective Investment Trust		1,976,876
	Apple Computer Inc	Self Directed Brokerage - Corporate Stock		1,206,571
	Duke Energy Corp New Com	Self Directed Brokerage - Corporate Stock		32,497
	Cohen & Steers Quality Income Rlty Fd In	Self Directed Brokerage - Corporate Stock		7,450
	Exxon Mobil Corp Com	Self Directed Brokerage - Corporate Stock		176,460
	Intel Corp Com	Self Directed Brokerage - Corporate Stock		21,312
	Lockheed Martin Corp Com	Self Directed Brokerage - Corporate Stock		17,600
	Northrop Grumman Corp Com	Self Directed Brokerage - Corporate Stock		21,609
	Bristol Myers Squibb Co Com	Self Directed Brokerage - Corporate Stock		20,118
	Cisco Systems Inc	Self Directed Brokerage - Corporate Stock		27,215
	Caterpiller Inc Com	Self Directed Brokerage - Corporate Stock		28,796
	Snap Inc CL A	Self Directed Brokerage - Corporate Stock		7,387
	Amazon Com In	Self Directed Brokerage - Corporate Stock		154,397

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Netflix Inc Com	Self Directed Brokerage - Corporate Stock		94,603
	Aurora Cannibis Inc Com NPV ISIN Stock	Self Directed Brokerage - Corporate Stock		512
	Blackstone Mortgage Tru-CL A	Self Directed Brokerage - Corporate Stock		9,096
	Alibaba Group Hldg LTD Sponsored Ads	Self Directed Brokerage - Corporate Stock		134,429
	Fidelity Select Med Technology & Devices	Self Directed Brokerage - Corporate Stock		31,954
	Alphabet Inc Cap Stk CL C	Self Directed Brokerage - Corporate Stock		69,298
	Tesla Inc Com	Self Directed Brokerage - Corporate Stock		179,136
	American Tower Corp Com	Self Directed Brokerage - Corporate Stock		2,654
	Arista Networks Inc Com	Self Directed Brokerage - Corporate Stock		6,873
	Boeing Co Com	Self Directed Brokerage - Corporate Stock		2,199
	Constellation Brands Inc Com	Self Directed Brokerage - Corporate Stock		4,214
	Disney Walt Co	Self Directed Brokerage - Corporate Stock		30,112
	General Mtrs Co Com	Self Directed Brokerage - Corporate Stock		5,271
	Goldman Sachs Group Inc Com	Self Directed Brokerage - Corporate Stock		5,670
	Mastercard Inc CL A	Self Directed Brokerage - Corporate Stock		6,954
	Ollies Baragain Outlt Hldgs Inc Com	Self Directed Brokerage - Corporate Stock		1,206
	Shopify Inc Com NPV CL A ISIN	Self Directed Brokerage - Corporate Stock		13,558
	Target Corp Com	Self Directed Brokerage - Corporate Stock		4,575
	Astrazeneca ADR Each Rep 1 Ord	Self Directed Brokerage - Corporate Stock		30,030
	JD.com Inc.	Self Directed Brokerage - Corporate Stock		4,118
	United Airls Hldgs Inc.	Self Directed Brokerage - Corporate Stock		285
	Abbvie inc	Self Directed Brokerage - Corporate Stock		2,157
	Moderna Inc	Self Directed Brokerage - Corporate Stock		3,849
	Nvidia Corp	Self Directed Brokerage - Corporate Stock		20,716
	Healthcare Trust of America	Self Directed Brokerage - Corporate Stock		7,415
	American Express	Self Directed Brokerage - Corporate Stock		3,351
	ASML Holding NV Euro	Self Directed Brokerage - Corporate Stock		3,726
	Big Commerce Hldgs	Self Directed Brokerage - Corporate Stock		506
	Broadcom Inc	Self Directed Brokerage - Corporate Stock		2,425
	Costco Wholesale Corp	Self Directed Brokerage - Corporate Stock		2,247
	Crowdstrike Hldgs Inc	Self Directed Brokerage - Corporate Stock		18,188
	Microsoft Corp	Self Directed Brokerage - Corporate Stock		57,794
	3M Co	Self Directed Brokerage - Corporate Stock		877
	Starbucks	Self Directed Brokerage - Corporate Stock		24,709
	Airbnb Inc Class A	Self Directed Brokerage - Corporate Stock		3,355
	Algonquin Pwr &Utils F	Self Directed Brokerage - Corporate Stock		147
	Alphabet Inc. Class A	Self Directed Brokerage - Corporate Stock		13,368
	Barrick Gold Corp F	Self Directed Brokerage - Corporate Stock		668
	Block Inc Class A	Self Directed Brokerage - Corporate Stock		42,007
	Charles Schwab Corp	Self Directed Brokerage - Corporate Stock		1,584
	Cytosorbents Corpora	Self Directed Brokerage - Corporate Stock		162
	Docusign Inc	Self Directed Brokerage - Corporate Stock		1,287
	Chimera Invt Corp Cum Pfd C 7.75%	Self Directed Brokerage - Corporate Stock		6,435
	Etsy Inc	Self Directed Brokerage - Corporate Stock		1,040
	Fiverr Interntnl Ltd F	Self Directed Brokerage - Corporate Stock		2,923
	Fulgent Genetics Inc	Self Directed Brokerage - Corporate Stock		1,799
	Global Ship Lease Fclass A	Self Directed Brokerage - Corporate Stock		16,597
	Gold Rty Corp F	Self Directed Brokerage - Corporate Stock		200
	Ibm Corp	Self Directed Brokerage - Corporate Stock		2,779
	Lam Research Corp	Self Directed Brokerage - Corporate Stock		1,138

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Lemonade Inc	Self Directed Brokerage - Corporate Stock		2,033
	Marvell Technology Inc	Self Directed Brokerage - Corporate Stock		3,016
	Meta Platforms Inc Class A	Self Directed Brokerage - Corporate Stock		236,215
	Navios Maritime Partn Lp	Self Directed Brokerage - Corporate Stock		8,088
	Nextera Energy Inc	Self Directed Brokerage - Corporate Stock		785
	Nio Inc	Self Directed Brokerage - Corporate Stock		3,741
	Okta Inc Class A	Self Directed Brokerage - Corporate Stock		3,560
	Pacific Biosciences	Self Directed Brokerage - Corporate Stock		128
	Pinterest Inc Class A	Self Directed Brokerage - Corporate Stock		16,304
	Quantum Cp Dlt & Sto	Self Directed Brokerage - Corporate Stock		829
	Paypal Hldgs Inc	Self Directed Brokerage - Corporate Stock		28,623
	Riot Blockchain I N C	Self Directed Brokerage - Corporate Stock		103
	Salesforce Inc	Self Directed Brokerage - Corporate Stock		1,356
	Sea Ltd Funsponsored	Self Directed Brokerage - Corporate Stock		1,594
	Realty Income Corp	Self Directed Brokerage - Corporate Stock		973
	Silvercorp Metals F	Self Directed Brokerage - Corporate Stock		221
	Stellantis N V F	Self Directed Brokerage - Corporate Stock		191
	Stem Inc	Self Directed Brokerage - Corporate Stock		119
	Taiwan Semiconductor Mfg. Co.	Self Directed Brokerage - Corporate Stock		22,330
	Tenet Healthcare	Self Directed Brokerage - Corporate Stock		332
	Tessco Technologies	Self Directed Brokerage - Corporate Stock		84
	The Trade Desk Inc Class A	Self Directed Brokerage - Corporate Stock		703
	Union Pacific Corp	Self Directed Brokerage - Corporate Stock		3,920
	Virgin Galactic Hldgs Inclass A	Self Directed Brokerage - Corporate Stock		76
	Ishares Tr Msci Emerging Markets Etf	Self Directed Brokerage - Exchange Traded Fund		32,837
	Schwab Strategic Tr Us Small Cap Etf	Self Directed Brokerage - Exchange Traded Fund		92,392
	Advisorshares Pure Us Cannabis Etf	Self Directed Brokerage - Exchange Traded Fund		15,780
	Pimco Etf Tr Total Return Active Etf	Self Directed Brokerage - Exchange Traded Fund		11,055
	First Tr Exchange Traded Fd Vi Dorsey Wright Focus	Self Directed Brokerage - Exchange Traded Fund		99,846
	Invesco Exchange Traded Fd Tr S&P500 Eql	Self Directed Brokerage - Exchange Traded Fund		105,773
	Ark Genomic Revolution Etf	Self Directed Brokerage - Exchange Traded Fund		1,121
	Etfmg Alternative Harvest Etf	Self Directed Brokerage - Exchange Traded Fund		3,885
	First Tr Nasdaq 100 Technology Index Fd	Self Directed Brokerage - Exchange Traded Fund		318,598
	First Tr Exchange Traded Fd Ny Arca	Self Directed Brokerage - Exchange Traded Fund		38,528
	Ark Etf Tr Innovation Etf	Self Directed Brokerage - Exchange Traded Fund		1,105
	Alps Emerging Sector Dividend	Self Directed Brokerage - Exchange Traded Fund		129,870
	Alps International Sector Dividend	Self Directed Brokerage - Exchange Traded Fund		96,722
	Distillate Us Fundm Staband Vlu Etf	Self Directed Brokerage - Exchange Traded Fund		4,096
	Ishares Tr Us Utilities	Self Directed Brokerage - Exchange Traded Fund		10,262
	Etfmg Orime Cyber Security Etf	Self Directed Brokerage - Exchange Traded Fund		912
	First Tr Exchange Traded Fd Ii Health Care	Self Directed Brokerage - Exchange Traded Fund		157,609
	Schwab Strategic Tr Us Large Cap Value	Self Directed Brokerage - Exchange Traded Fund		43,390
	First Tr Cons Dscrtnry Alphad Etf Iv	Self Directed Brokerage - Exchange Traded Fund		124,131
	First Trust Internet Index Cf Etf	Self Directed Brokerage - Exchange Traded Fund		276,251
	First Trust Nasdaq Trnsportation Etf	Self Directed Brokerage - Exchange Traded Fund		117,116
	First Trust Technology Alphad Etf Iv	Self Directed Brokerage - Exchange Traded Fund		282,724
	Global X Autonomous & Electric Vehic	Self Directed Brokerage - Exchange Traded Fund		6,855
	Alps Sector Dividend Dogs Etf	Self Directed Brokerage - Exchange Traded Fund		67,848
	Invesco Emerging Markets Innovators Y	Self Directed Brokerage - Exchange Traded Fund		59,211
	Principal Core Fixed Income Instl	Self Directed Brokerage - Exchange Traded Fund		15,749
	Ishares Tr Expanded Tech	Self Directed Brokerage - Exchange Traded Fund		81,425
	Jp Morgan Exchange Traded Fd Ultra Shrt	Self Directed Brokerage - Exchange Traded Fund		15,368

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Ishares Us Real Estate Etf	Self Directed Brokerage - Exchange Traded Fund		10,546
	Global X Silver Miners Etf	Self Directed Brokerage - Exchange Traded Fund		350
	Invesco S & P Smallcap Value With Momentum Etf	Self Directed Brokerage - Exchange Traded Fund		59,653
	Invesco S&P 500 Low Volatility Etf	Self Directed Brokerage - Exchange Traded Fund		67,472
	Invsc High Yield Dividend Etf	Self Directed Brokerage - Exchange Traded Fund		29,710
	Invsc S P 500 Pure Valueetf	Self Directed Brokerage - Exchange Traded Fund		39,194
	Ishares U S Consumer Discrtry Etf	Self Directed Brokerage - Exchange Traded Fund		39,892
	Ishares Us Industrials Etf	Self Directed Brokerage - Exchange Traded Fund		39,221
	Schwab Us Dividend Equity Etf	Self Directed Brokerage - Exchange Traded Fund		7,424
	Spac And New Issue Etf Iv	Self Directed Brokerage - Exchange Traded Fund		719
	Vaneck Morningstar Wide Moat Etf	Self Directed Brokerage - Exchange Traded Fund		7,325
	Wisdomtree Us Smallcap Dividend Etf	Self Directed Brokerage - Exchange Traded Fund		56,912
	Arbitrage Fund Class R	Self Directed Brokerage - Mutual Fund		29,769
	Merger Fund	Self Directed Brokerage - Mutual Fund		15,295
	The Oakmark Equity And Income Investor Class	Self Directed Brokerage - Mutual Fund		11,454
	Permanant Portfolio Fund	Self Directed Brokerage - Mutual Fund		13,260
	Dodge & Cox Income Fund	Self Directed Brokerage - Mutual Fund		33,289
	Parnassus Core Equity	Self Directed Brokerage - Mutual Fund		14,849
	Amg Yacktman Focussed Fund	Self Directed Brokerage - Mutual Fund		11,395
	Janus Henderson Balanced T	Self Directed Brokerage - Mutual Fund		9,155
	VANGUARD GNMA	Self Directed Brokerage - Mutual Fund		304,535
	FMI Common Stock Fund	Self Directed Brokerage - Mutual Fund		6,673
	Jensen Quality Growth FD CL J	Self Directed Brokerage - Mutual Fund		15,993
	Matthews Asia Dividend Fund	Self Directed Brokerage - Mutual Fund		760
	PIMCO Inrl BC FC (U.S. Dollar-Hedged) A	Self Directed Brokerage - Mutual Fund		29,911
	Eaton Vance Floating Rate Class I	Self Directed Brokerage - Mutual Fund		115,728
	Akre Focus Fund Retail Class	Self Directed Brokerage - Mutual Fund		4,372
	American Century Equity Income Fund	Self Directed Brokerage - Mutual Fund		1,243
	Fidelity Government Cash Reserves Fund	Self Directed Brokerage - Mutual Fund		3,273,697
	AVE MARIE RISING DIVIDEND FUND	Self Directed Brokerage - Mutual Fund		4,466
	CONESTOGA SMALL CAP INVESTOR CLASS	Self Directed Brokerage - Mutual Fund		560
	Artisan High Income Fund Investor	Self Directed Brokerage - Mutual Fund		9,995
	Fidelity Total Bond	Self Directed Brokerage - Mutual Fund		123,299
	Fidelity Corporate Bond Fund	Self Directed Brokerage - Mutual Fund		77,643
	Doubleline Low Duration Bond CL I	Self Directed Brokerage - Mutual Fund		166,269
	Doubleline Low Duration CL N	Self Directed Brokerage - Mutual Fund		198,437
	Champlain Mid Cap Advisor Share	Self Directed Brokerage - Mutual Fund		16,794
	T Rowe Price Global Stock	Self Directed Brokerage - Mutual Fund		26,550
	Value Line Mid Cap Focused Investors FD	Self Directed Brokerage - Mutual Fund		1,117
	Doubleline Total RT Bond FD CL N	Self Directed Brokerage - Mutual Fund		15,282
	Fidelity Blue Chip Growth	Self Directed Brokerage - Mutual Fund		10,349
	Pfg American Fds Cons Inc Strat Cl R	Self Directed Brokerage - Mutual Fund		36,836
	Pfg American Funds Growth Strat Cl R	Self Directed Brokerage - Mutual Fund		98,039
	Pfg Balanced Strategy Fund Cl R	Self Directed Brokerage - Mutual Fund		53,810
	Pfg Bny Mellon Diversifier Start R	Self Directed Brokerage - Mutual Fund		119,713
	Pfg Br Equity Esg Strategy Cl R	Self Directed Brokerage - Mutual Fund		93,315
	Pfg Equity Index Focused Strategy R	Self Directed Brokerage - Mutual Fund		12,995
	Pfg Jp Morgan Tactic Moderate Strategy R	Self Directed Brokerage - Mutual Fund		107,941
	Pfg Jp Morgan Tactic Agressive Strategy R	Self Directed Brokerage - Mutual Fund		22,111
	Pfg Meeder Tactical Strategy Fund R	Self Directed Brokerage - Mutual Fund		89,697
	Pfg Mfs Aggressive Growth Strategy R	Self Directed Brokerage - Mutual Fund		57,103

See Independent Auditor's Report.

Community Care Physicians, P.C.
Profit Sharing Plan

Supplemental Schedule Required Under ERISA and
Department of Labor Regulations
Schedule H
September 30, 2021

Line 4i - Schedule of Assets (Held at End of Year) - Continued

(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 (1)	(e) Current Value
	Pfg Tactical Income Strategy Cl R	Self Directed Brokerage - Mutual Fund		73,949
	Pfg Active Core Bond Strategy Fund Cl R	Self Directed Brokerage - Mutual Fund		73,527
	Vanguard Index Funds S&P 500 Etf	Self Directed Brokerage - Mutual Fund		1,972
	Buffalo Divident Focused Fund	Self Directed Brokerage - Mutual Fund		3,736
	Hussman Strategic Total Return	Self Directed Brokerage - Mutual Fund		40,223
	T Rowe Price Diversd Mid Cap Growth	Self Directed Brokerage - Mutual Fund		1,572
	Commerce Value	Self Directed Brokerage - Mutual Fund		16,330
	Dodge & Cox Stock I	Self Directed Brokerage - Mutual Fund		193
	First Eagle Gold A	Self Directed Brokerage - Mutual Fund		978
	Franklin Gold And Precious Metals A	Self Directed Brokerage - Mutual Fund		2,472
	Manning & Napier Rainier Intl Discv S	Self Directed Brokerage - Mutual Fund		20,201
	Pfg Fdlt Ins Am&Eq Idx Str R	Self Directed Brokerage - Mutual Fund		120,610
	Pfg Fdlt Ins Am&Eq Sctr Str R	Self Directed Brokerage - Mutual Fund		102,452
	Seven Canyons World Innovators Investor	Self Directed Brokerage - Mutual Fund		2,713
	T. Rowe Price Lrg Cp Va I	Self Directed Brokerage - Mutual Fund		16,159
	T. Rowe Price Mid-Cap Value	Self Directed Brokerage - Mutual Fund		12,208
	Vanguard Star Investor Class	Self Directed Brokerage - Mutual Fund		5,392
	Virtus Allianzgi Convertible A	Self Directed Brokerage - Mutual Fund		4,476
	Virtus Seix Floating Rate High Inc I	Self Directed Brokerage - Mutual Fund		5,128
	Wasatch Small Cap Value	Self Directed Brokerage - Mutual Fund		4,048
	Value Line Asset Allocation Investor	Self Directed Brokerage - Mutual Fund		23,689
				325,885,245
*	Participant notes receivable	3.25% -5.50%		1,777,531
				327,662,776

* Represents a party-in-interest to the Plan, as defined by ERISA.

(1) Cost information may be omitted with respect to participant or beneficiary directed investments under an individual account plan.

See Independent Auditor's Report.