

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
	☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ an amended return/report ☐ the final return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ special extension (enter description) ☐ automatic extension ☐ the DFVC program
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan <u>VIRGINIA PHYSICIANS FOR WOMEN, LTD. 401(K) PROFIT SHARING PLAN</u>
1b	Three-digit plan number (PN) ▶ <u>002</u>
1c	Effective date of plan <u>03/01/1976</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>VIRGINIA PHYSICIANS FOR WOMEN, LTD.</u> <u>1212 KOGER CENTER BLVD</u> <u>RICHMOND, VA 23235</u>
2b	Employer Identification Number (EIN) <u>54-1001246</u>
2c	Plan Sponsor's telephone number <u>804-897-2100</u>
2d	Business code (see instructions) <u>621111</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/07/2022	RYAN SHANE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ 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	202
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)	176
a(2) Total number of active participants at the end of the plan year		6a(2)	185
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	46
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	231
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	231
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	209
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	9
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: 2G 2J 2K 2R 2T 3D 2A 2E 2F			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan VIRGINIA PHYSICIANS FOR WOMEN, LTD. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 VIRGINIA PHYSICIANS FOR WOMEN, LTD.	D Employer Identification Number (EIN) 54-1001246	

Part I	Service Provider Information (see instructions)
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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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	63456	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

SAGEVIEW ADVISORY GROUP LLC

33-0818667

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	34000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WELLSCOLEMAN CPA'S

54-0593442

(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	ACCOUNTANT	12750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DODGE & COX INTL STK - DST ASSET M 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GS SM CAP VALUE INST - GOLDMAN SAC 13-5108880	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LD ABT SH DRTN INC I - DST SYSTEMS 43-1581814	0.10%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PUTNAM STABLE VALUE 101 SEAPORT BOULEVARD, SUITE 500 BOSTON, MA 02210	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PUTNAM STABLE VALUE 101 SEAPORT BOULEVARD, SUITE 500 BOSTON, MA 02210	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
WASATCH CORE GR INST - UMB FUND SE 39-1657495	0.15%	

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 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>VIRGINIA PHYSICIANS FOR WOMEN, LTD. 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>VIRGINIA PHYSICIANS FOR WOMEN, LTD.</u>	D Employer Identification Number (EIN) <u>54-1001246</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PUTNAM STABLE VALUE</u>		
b Name of sponsor of entity listed in (a): <u>PUTNAM FIDUCIARY TRUST COMPANY</u>		
c EIN-PN <u>04-3159710-202</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>469773</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

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

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

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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan VIRGINIA PHYSICIANS FOR WOMEN, LTD. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 VIRGINIA PHYSICIANS FOR WOMEN, LTD.	D Employer Identification Number (EIN) 54-1001246	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	884524	951346
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1373718	6868951
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	2151885	3010520
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	355816	291114
(9) Value of interest in common/collective trusts	1c(9)	536231	469773
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	33931911	35242531
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	39234085	46834235

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	39234085	46834235
---	-----------	----------	----------

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)	1522238	
(B) Participants	2a(1)(B)	1020280	
(C) Others (including rollovers).....	2a(1)(C)	377573	
(2) Noncash contributions.....	2a(2)	0	2920091
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	512	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	17907	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		18419
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	1606774
(B) Common stock	2b(2)(B)	49544	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1557230	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	489563	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	524445	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-34882
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	569114
(B) Other	2b(5)(B)	569114	
(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)		10328
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		3685037
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		8774881
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1061701	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		1061701
f Corrective distributions (see instructions).....	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		2824
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other.....	2i(4)	110206	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		110206
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1174731
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		7600150
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

Part III Accountant's Opinion

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

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

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

b 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) ☒ DOL Regulation 2520.103-8 (2) ☐ 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: WELLSCOLEMAN

(2) EIN: 54-0593442

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

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

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
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?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n		X	

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

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

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

5c 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 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan VIRGINIA PHYSICIANS FOR WOMEN, LTD. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 VIRGINIA PHYSICIANS FOR WOMEN, LTD.	D Employer Identification Number (EIN) 54-1001246

Part I	Distributions
--------	---------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-6568107 Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? If the plan is a defined benefit plan, go to line 8.	☐ Yes ☐ No ☐ N/A
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.	
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a
b Enter the amount contributed by the employer to the plan for this plan year	6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c
If you completed line 6c, skip lines 8 and 9.	
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes ☐ No ☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes ☐ No ☐ N/A

Part III	Amendments
----------	------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes ☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes ☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes ☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2021
v. 201209

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 _____

Virginia Physicians for Women, Ltd.
401(k) Profit-Sharing Plan
Financial Statements and
Supplemental Information
December 31, 2021 and 2020



WELLSCOLEMAN

5004 Monument Avenue • Richmond, VA 23230

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INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor and Participants
Virginia Physicians for Women, Ltd.
401(k) Profit-Sharing Plan
Richmond, Virginia

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for 2021 Financial Statements

We have performed an audit of the accompanying financial statements of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section:

- The amounts and disclosures in the 2021 financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the 2021 financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section of our report. We are required to be independent of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments; administering the Plan; and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2021 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

2021 Supplemental Schedule Required by ERISA

The supplemental schedule of assets held at end of year as of December 31, 2021 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated October 7, 2021, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements and supplemental schedule, and (b) the form and content of the information included in the 2020 financial statements and supplemental schedule other than that derived from the certified information were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

A handwritten signature in black ink, appearing to read "Wells Coleman". The signature is written in a cursive, flowing style.

August 24, 2022

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Assets		
Participant-directed investments, at fair value	<u>\$ 45,591,775</u>	<u>\$ 37,993,745</u>
Receivables		
Employer contributions	951,346	884,524
Notes receivable from participants	<u>291,114</u>	<u>355,816</u>
	<u>1,242,460</u>	<u>1,240,340</u>
Total Assets	46,834,235	39,234,085
Liabilities	<u>-</u>	<u>-</u>
Net Assets Available for Benefits	<u>\$ 46,834,235</u>	<u>\$ 39,234,085</u>

See accompanying notes to financial statements.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the year ended December 31, 2021

Additions

Investment Income

Net appreciation in fair market value of investments	\$ 4,264,479
Realized loss on sale of investments	(34,882)
Dividends and interest	<u>1,607,286</u>

Total investment income	<u>5,836,883</u>
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Interest income on notes receivable from participants	<u>17,907</u>
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Contributions

Participants	1,020,280
Employer	1,522,238
Other	<u>377,573</u>

Total contributions	<u>2,920,091</u>
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Total additions	<u>8,774,881</u>
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Deductions

Distributions to participants	1,061,701
Deemed distributions to participants	2,824
Administrative expenses	<u>110,206</u>

Total deductions	<u>1,174,731</u>
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Increase in net assets available for benefits	7,600,150
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Net Assets Available for Benefits, beginning of year	<u>39,234,085</u>
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Net Assets Available for Benefits, end of year	<u><u>\$ 46,834,235</u></u>
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See accompanying notes to financial statements.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS

December 31, 2021

1. Plan Description

The following brief description of the Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan ("Plan") is provided for general information purposes only. Participants should refer to the Plan documents for more complete information.

General: The Plan is a defined-contribution, safe harbor 401(k) plan covering non-excluded employees of Virginia Physicians for Women, Ltd. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective Date: March 1, 1976

Anniversary Date: December 31

Entry Dates: January 1, April 1, July 1, and October 1

Valuation Date: December 31

Eligibility: All new employees will become eligible to participate in the Plan on the entry date following the date for which employees are age 21 and have three months of service.

Compensation: Compensation is defined as salary or wages, including any overtime, commissions, or bonuses, but excluding contributions by the employer to the Plan and benefits paid under the Plan.

Normal Retirement Date: The Plan defines the normal retirement date as the anniversary date coinciding with or next following the date of the participant's 65th birthday or fifth anniversary of joining the Plan, if later.

Early Retirement Date: The early retirement date is defined as the anniversary date coinciding with or next following the date of the participant's 55th birthday and having completed seven years of service.

Disability Retirement Date: Disability retirement shall be upon total permanent disability under the federal Social Security Act.

Retirement Benefits: At the applicable retirement date, each participant shall be entitled to receive his vested interest in his Trust account.

Participant Contributions: Participants may elect to defer a percentage of pretax compensation as defined by the Plan and up to 100% of any bonuses received during the year. However, total deferrals in any taxable year may not exceed the dollar limit set by law. For 2021, this dollar limit is \$19,500. A participant may make catch-up contributions if he has attained age 50 by the end of the calendar year. Participants are 100% vested in all elective deferrals made to the Plan and any investment earnings on these deferrals.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

1. Plan Description - Continued

Employer Contributions: The Plan qualifies as a safe harbor 401(k) plan. A safe harbor matching contribution equal to 100% of the participant's salary deferrals that do not exceed 4% of compensation will be made by the Company. This safe harbor matching contribution is fully vested and is referred to as an Enhanced Matching Contribution. In addition, the Company may contribute additional matching contributions and discretionary profit-sharing contributions. The additional matching contribution is equal to a uniform percentage of the participant's salary deferrals and will be determined each year.

Participant Accounts: Each participant's account is credited with the participant's contribution, and Company matching contributions, as well as allocations of the Company's discretionary profit-sharing and Plan earnings, participant accounts are charged with an allocation of administrative expenses paid by the Plan. 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.

Death Benefits: If a participant dies before his normal retirement date, his designated beneficiary vests 100% in the participant's account.

Vesting: Employer contributions which are not safe harbor contributions shall vest in accordance with a participant's years of continuous service with the employer as follows:

Less than 2 years	0%
2 years of service	20%
3 years of service	40%
4 years of service	60%
5 years of service	80%
6 or more years of service	100%

Forfeitures: Forfeitures will be added to any employer discretionary contributions. However, any forfeitures attributable to additional matching contributions will be used to reduce any additional matching contributions. Forfeited nonvested accounts totaled \$17,835 as of December 31, 2021. During 2021, participant forfeitures were \$19,572, of which, the Plan sponsor used \$13,040 of to reduce employer contributions.

Investment Options: Upon enrollment in the Plan, a participant may direct up to 100% of employee and employer contributions in any of the available investment funds offered.

Notes Receivable from Participants: Participants may borrow from their benefit accounts a minimum of \$1,000. The maximum loan amount is determined by the lesser of \$50,000 reduced by the excess, if any, of the participant's highest outstanding balance of loans from the Plan during the one-year period ending on the day before the date of the new loan over the current outstanding balances of loans or 50% of the vested account balance. A participant may have up to two outstanding loans at any one time. The notes are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest are paid ratably through bi-monthly payroll deductions.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

1. Plan Description - Continued

Payment of Benefits: Upon termination of service or attainment of retirement age, each participant shall be entitled to receive his vested interest in his accrued benefits account. Participants will receive their accrued benefits as an annuity unless this form of payment is waived. If the participant waives the annuity election, payment will be made as a single lump-sum payment in cash or in property. Annuity payments will be made in installments over a period of not more than his assumed life expectancy, or the purchase of a different form of annuity. Participants with a vested interest of \$5,000 or less will automatically receive a lump-sum distribution. Participants may elect to receive the distribution or to roll over the distribution to another retirement plan such as an individual retirement account (IRA). However, if the amount of the distribution is more than \$1,000 and no election is made, then the distribution will automatically be rolled over into an IRA.

2. Summary of Significant Accounting Policies

Basis of Accounting: The Plan prepares its financial statements on the accrual basis whereby revenue is recognized when earned and expenses are recognized when incurred.

Investment Valuation and Income Recognition: The Plan's investments are stated at fair value using generally accepted accounting principles and applicable laws.

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.

Notes Receivable from Participants: Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

Contributions: Employer contributions are accrued based upon the salaries of Plan participants. Employee contributions are recorded when payroll deductions are made from participating employees.

Payment of Benefits: Benefits are recorded when paid.

Operating Expenses: The Plan permits the payment of operating expenses to be made from the Plan's assets. The expenses paid using the Plan's assets will generally be allocated among the accounts of participants in the Plan. These expenses will be allocated either proportionately based on the value of the account balance or as an equal dollar amount based on the number of participants in the Plan.

Hardship Distributions: Hardship distributions are permitted from a participant's pre-tax elective deferrals, employer matching contributions, employer profit-sharing contributions, and transfer accounts. The minimum amount of hardship withdrawals is \$1,000 and distributions may only be made from amounts which are fully vested.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

2. Summary of Significant Accounting Policies - Continued

Estimates: The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Evaluation of Subsequent Events: Management has evaluated subsequent events through August 24, 2022, which is the date the financial statements were available to be issued.

3. Information Certified by Plan Trustee (Unaudited)

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments and notes receivable from participants held at December 31, 2021, and net appreciation in fair value of investments, interest and dividends, and interest income on notes receivable from participants for the year ended December 31, 2021, was obtained by management and agreed to or derived from information certified as complete and accurate by Fidelity Management Trust Company (FMTC) (the trustee of the Plan). The information certified includes total investments of \$45,591,775 and related investment income of \$5,854,790 for the year ended December 31, 2021.

4. Fair Value Measurements (Unaudited)

Financial Accounting Standards Board Accounting Standards Codification ("FASB ASC") 820-10, *Fair Value Measurement and Disclosure*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs are used only when Level 1 or 2 inputs are not available.

Level 1 Inputs

Level 1 inputs are based on quoted prices in active markets for identical assets that the Plan has the ability to access at year-end. Level 1 investments include mutual funds. Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. 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.

Level 2 Inputs

The Plan currently has no assets that would be considered Level 2 inputs.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

4. Fair Value Measurements (Unaudited) - Continued

Level 3 Inputs

The Plan currently has no assets that would be considered Level 3 inputs.

The Plan's investments are reported at fair value in the statement of net assets available for benefits.

Input Levels by Investment Category:

	<u>Fair Value Measurements at Reporting Date Using</u> Quoted Prices in			
		Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	<u>Fair Value</u>			
<u>December 31, 2021</u>				
Interest-Bearing Cash	\$ 6,868,951	\$ 6,868,951	\$ -	\$ -
Common Stocks	3,010,520	3,010,520	-	-
Registered Investment Companies	<u>35,242,531</u>	<u>35,242,531</u>	-	-
Subtotal	<u>45,122,002</u>	<u>45,122,002</u>	-	-
Investments measured at Net Asset Value	<u>469,773</u>	-	-	-
Total	<u>\$45,591,775</u>	<u>\$ 45,122,002</u>	<u>\$ -</u>	<u>\$ -</u>
<u>December 31, 2020</u>				
Interest-Bearing Cash	\$ 1,373,719	\$ 1,373,719	\$ -	\$ -
Common Stocks	2,151,886	2,151,886	-	-
Registered Investment Companies	<u>33,931,909</u>	<u>33,931,909</u>	-	-
Subtotal	<u>37,457,514</u>	<u>37,457,514</u>	-	-
Investments measured at Net Asset Value	<u>536,231</u>	-	-	-
Total	<u>\$37,993,745</u>	<u>\$ 37,457,514</u>	<u>\$ -</u>	<u>\$ -</u>

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

4. Fair Value Measurements (Unaudited) - Continued

Investments Measured Using Net Asset Value per Share Practical Expedient: The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2021 and 2020, respectively. There are no participant redemption restrictions for these investments. The redemption notice period is applicable only to the Plan.

	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
<u>December 31, 2021</u>				
Putnam Stable Value	\$469,773	N/A	Daily	N/A
<u>December 31, 2020</u>				
Putnam Stable Value	\$536,231	N/A	Daily	N/A

5. Plan Termination

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

6. Plan Qualification

The Plan obtained its latest determination letter in March 2014, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan sponsor believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

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

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

7. Parties-in-Interest

During the year ended December 31, 2021, the Plan held shares of mutual funds managed by FMTC, the Plan's trustee. Therefore, transactions with FMTC qualify as party-in-interest transactions. Fees paid to FMTC by the Plan totaled \$63,456 for the year ended December 31, 2021.

SageView Advisory Group manages Plan investments. SageView is a service provider of the Plan, therefore, transactions qualify as party-in-interest transactions. Fees paid by the Plan totaled \$34,000 for the year ended December 31, 2021.

WellsColeman performs the audit for the Plan. WellsColeman is a service provider of the Plan; therefore, transactions are party-in-interest transactions. Fees paid to the firm by the Plan totaled \$12,750 for the year ended December 31, 2021.

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

8. Risks and Uncertainties

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

9. Plan Amendment

The Plan has implemented provisions of Section 2202 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) enacted on March 27, 2020. The Plan has been amended effective November 17, 2021.

10. Subsequent Events

Due to the adverse market conditions, the Plan has incurred significant reductions in the fair market value of its investments since December 31, 2021. The permanency of the reduction in fair market value is not determinable at this time.

SUPPLEMENTAL INFORMATION

VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Interest-Bearing Cash</u>		
*	Fidelity Cash Reserves	Brokeragelink	\$ 2,685,215
*	Fidelity Investments	Treasury Fund	4,183,736
			<u>6,868,951</u>
	<u>Common/Collective Trusts</u>		
	Putnam	Stable Value	469,773
			<u>469,773</u>
	<u>Common Stocks</u>		
	Abbott Laboratories NFS	493	69,320
	Amgen, Inc.	182	40,843
	Analog Devices, Inc NFS	111	19,490
	Apple Computer, Inc.	815	144,754
	Applied Materials, Inc.	582	91,587
	Astrazeneca PLC	462	26,910
	AT&T, Inc.	314	7,733
	Bristol Myers Squibb	588	36,688
	Carrier Global Corporation Company	753	40,853
	Costco Wholesale Corp	100	56,924
	CitiGroup, Inc.	921	55,625
	Dana Holding Corp	450	10,269
	Deere & Company NFS	75	25,717
	Dow, Inc.	830	47,055
	Emerson Electric Company	424	39,459
	Estee Lauder Companies, Inc.	42	15,649
	Gilead Sciences, Inc.	794	57,632
	Global Pmts, Inc.	1	94
	Hartford Financial Services Group, Inc.	753	51,998
	Intel Corporation	1	33
	International Flavors & Fragrances, Inc.	264	39,788
	Leidos Holdings, Inc.	1	54
	Lilly Eli & Company	501	138,287
	Lowes Companies	255	66,034
	Manpower, Inc.	92	8,957
	McDonalds Corporation	415	111,204
	Merck & Company, Inc.	222	17,003
	Microsoft Corporation	806	271,119
	Mondelez International, Inc.	594	39,382

- Continued -

VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR - CONTINUED

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Common Stocks - Continued</u>		
	NASDAQ Stock Market, Inc.	640	134,473
	Newell Rubbermaid, Inc.	1033	22,550
	Nike, Inc.	606	100,923
	Norton Lifelock, Inc.	1545	40,142
	Organon & Co	19	589
	Origin Materials, Inc.	7000	45,150
	PayPal Holdings, Inc.	280	52,802
	Pepsico, Inc.	352	61,224
	Pfizer, Inc.	953	56,277
	Philip Morris International, Inc.	370	35,181
	Proctor & Gamble Company	303	49,548
	Prudential Financial, Inc.	754	81,662
	Seagate Technology PLC	712	80,487
	Skyworks Solutions, Inc.	255	39,537
	Starbucks Corp NFS	508	59,390
	Unilever PLC	874	47,022
	Velo3d, Inc	2000	15,620
	Verizon Communications	474	24,652
	Visa, Inc.	607	131,490
	Wal-Mart Stores, Inc.	400	57,821
	Wells Fargo & Co	1465	70,292
	Western Digital Corporation	87	5,675
	Whirlpool Corporation	675	158,510
	Yum! Brands, Inc.	431	59,856
	Zoetis, Inc.	202	49,186
			<u>3,010,520</u>
	<u>Registered Investment Companies</u>		
	BlackRock	LifePath Index 2025 K	2,637,542
		LifePath Index 2030 K	742,306
		LifePath Index 2035 K	1,569,822
		LifePath Index 2040 K	2,737,208
		LifePath Index 2045 K	2,946,440
		LifePath Index 2050 K	1,987,283
		LifePath Index 2055 K	555,368
		LifePath Index 2060 K	233,139
		LifePath Index Retirement K	1,477,127
	BrokerageLink	IShares Russell 1000 Idx Fd	632,426

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**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002**

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR - CONTINUED

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Registered Investment Companies - Continued</u>		
		IShares S&P Small Cap 600	98,000
		IShares Floating Rate Fd	47,582
		Vanguard Index Fds	77,106
		Vanguard Bd Idx Fd ST	52,279
		Vanguard Intl Equity Idx	177,222
		Vanguard Intl Equity Idx FT	375,727
		Vanguard Adm Fds 500 Gro	1,726
		Sector Spdr Tr	19,450
	Carillon Eagle	Mid Cap Growth R6	2,090,244
	Dodge & Cox	International Stock	299,622
*	Fidelity Investments	Fidelity Advisor Int Growth I	1,031,718
		500 Index Adv	3,594,438
		Global ex U.S. Index Fund	397,358
		Extended Market Index Fund	386,839
	Invesco	Developing Markets R6	343,429
	Lord Abbett	Short Duration Income I	57,435
	MFS	Growth R6	3,593,822
	Prudential Financial	Global Total Return R6	2,046,961
		Total Return Bond R6	359,069
	Pimco	PIM RAE US Small I	842,204
	Putnam	Equity Income R6	1,726,136
	Victory	Sycamore Established Value	1,225,124
	Wasatch	Core Growth Inst	880,378
			<u>35,242,531</u>
	Participant-Directed Investments		<u>45,591,775</u>
	<u>Participant Loans</u>		
*	Participant Loans	Participant loans, at interest rates ranging from 4.25% to 6.50%, with maturities of 1 - 10 years	<u>291,114</u>
	Total Investments		<u>\$ 45,882,889</u>

Note: An asterisk (*) in column (a) denotes an entity known to be a party-in-interest to the Plan. Column (d) is not presented since cost of investments is not required for participant-directed investments.

Virginia Physicians for Women, Ltd.
401(k) Profit-Sharing Plan
Financial Statements and
Supplemental Information
December 31, 2021 and 2020



WELLSCOLEMAN

5004 Monument Avenue • Richmond, VA 23230

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INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor and Participants
Virginia Physicians for Women, Ltd.
401(k) Profit-Sharing Plan
Richmond, Virginia

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for 2021 Financial Statements

We have performed an audit of the accompanying financial statements of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section:

- The amounts and disclosures in the 2021 financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the 2021 financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section of our report. We are required to be independent of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments; administering the Plan; and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2021 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

2021 Supplemental Schedule Required by ERISA

The supplemental schedule of assets held at end of year as of December 31, 2021 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated October 7, 2021, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements and supplemental schedule, and (b) the form and content of the information included in the 2020 financial statements and supplemental schedule other than that derived from the certified information were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

A handwritten signature in black ink, reading "Wells Coleman". The signature is written in a cursive, flowing style.

August 24, 2022

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Assets		
Participant-directed investments, at fair value	<u>\$ 45,591,775</u>	<u>\$ 37,993,745</u>
Receivables		
Employer contributions	951,346	884,524
Notes receivable from participants	<u>291,114</u>	<u>355,816</u>
	<u>1,242,460</u>	<u>1,240,340</u>
Total Assets	46,834,235	39,234,085
Liabilities	<u>-</u>	<u>-</u>
Net Assets Available for Benefits	<u>\$ 46,834,235</u>	<u>\$ 39,234,085</u>

See accompanying notes to financial statements.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the year ended December 31, 2021

Additions

Investment Income

Net appreciation in fair market value of investments	\$ 4,264,479
Realized loss on sale of investments	(34,882)
Dividends and interest	<u>1,607,286</u>

Total investment income	<u>5,836,883</u>
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Interest income on notes receivable from participants	<u>17,907</u>
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Contributions

Participants	1,020,280
Employer	1,522,238
Other	<u>377,573</u>

Total contributions	<u>2,920,091</u>
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Total additions	<u>8,774,881</u>
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Deductions

Distributions to participants	1,061,701
Deemed distributions to participants	2,824
Administrative expenses	<u>110,206</u>

Total deductions	<u>1,174,731</u>
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Increase in net assets available for benefits	7,600,150
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Net Assets Available for Benefits, beginning of year	<u>39,234,085</u>
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Net Assets Available for Benefits, end of year	<u><u>\$ 46,834,235</u></u>
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See accompanying notes to financial statements.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS

December 31, 2021

1. Plan Description

The following brief description of the Virginia Physicians for Women, Ltd. 401(k) Profit-Sharing Plan ("Plan") is provided for general information purposes only. Participants should refer to the Plan documents for more complete information.

General: The Plan is a defined-contribution, safe harbor 401(k) plan covering non-excluded employees of Virginia Physicians for Women, Ltd. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective Date: March 1, 1976

Anniversary Date: December 31

Entry Dates: January 1, April 1, July 1, and October 1

Valuation Date: December 31

Eligibility: All new employees will become eligible to participate in the Plan on the entry date following the date for which employees are age 21 and have three months of service.

Compensation: Compensation is defined as salary or wages, including any overtime, commissions, or bonuses, but excluding contributions by the employer to the Plan and benefits paid under the Plan.

Normal Retirement Date: The Plan defines the normal retirement date as the anniversary date coinciding with or next following the date of the participant's 65th birthday or fifth anniversary of joining the Plan, if later.

Early Retirement Date: The early retirement date is defined as the anniversary date coinciding with or next following the date of the participant's 55th birthday and having completed seven years of service.

Disability Retirement Date: Disability retirement shall be upon total permanent disability under the federal Social Security Act.

Retirement Benefits: At the applicable retirement date, each participant shall be entitled to receive his vested interest in his Trust account.

Participant Contributions: Participants may elect to defer a percentage of pretax compensation as defined by the Plan and up to 100% of any bonuses received during the year. However, total deferrals in any taxable year may not exceed the dollar limit set by law. For 2021, this dollar limit is \$19,500. A participant may make catch-up contributions if he has attained age 50 by the end of the calendar year. Participants are 100% vested in all elective deferrals made to the Plan and any investment earnings on these deferrals.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

1. Plan Description - Continued

Employer Contributions: The Plan qualifies as a safe harbor 401(k) plan. A safe harbor matching contribution equal to 100% of the participant's salary deferrals that do not exceed 4% of compensation will be made by the Company. This safe harbor matching contribution is fully vested and is referred to as an Enhanced Matching Contribution. In addition, the Company may contribute additional matching contributions and discretionary profit-sharing contributions. The additional matching contribution is equal to a uniform percentage of the participant's salary deferrals and will be determined each year.

Participant Accounts: Each participant's account is credited with the participant's contribution, and Company matching contributions, as well as allocations of the Company's discretionary profit-sharing and Plan earnings, participant accounts are charged with an allocation of administrative expenses paid by the Plan. 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.

Death Benefits: If a participant dies before his normal retirement date, his designated beneficiary vests 100% in the participant's account.

Vesting: Employer contributions which are not safe harbor contributions shall vest in accordance with a participant's years of continuous service with the employer as follows:

Less than 2 years	0%
2 years of service	20%
3 years of service	40%
4 years of service	60%
5 years of service	80%
6 or more years of service	100%

Forfeitures: Forfeitures will be added to any employer discretionary contributions. However, any forfeitures attributable to additional matching contributions will be used to reduce any additional matching contributions. Forfeited nonvested accounts totaled \$17,835 as of December 31, 2021. During 2021, participant forfeitures were \$19,572, of which, the Plan sponsor used \$13,040 of to reduce employer contributions.

Investment Options: Upon enrollment in the Plan, a participant may direct up to 100% of employee and employer contributions in any of the available investment funds offered.

Notes Receivable from Participants: Participants may borrow from their benefit accounts a minimum of \$1,000. The maximum loan amount is determined by the lesser of \$50,000 reduced by the excess, if any, of the participant's highest outstanding balance of loans from the Plan during the one-year period ending on the day before the date of the new loan over the current outstanding balances of loans or 50% of the vested account balance. A participant may have up to two outstanding loans at any one time. The notes are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest are paid ratably through bi-monthly payroll deductions.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

1. Plan Description - Continued

Payment of Benefits: Upon termination of service or attainment of retirement age, each participant shall be entitled to receive his vested interest in his accrued benefits account. Participants will receive their accrued benefits as an annuity unless this form of payment is waived. If the participant waives the annuity election, payment will be made as a single lump-sum payment in cash or in property. Annuity payments will be made in installments over a period of not more than his assumed life expectancy, or the purchase of a different form of annuity. Participants with a vested interest of \$5,000 or less will automatically receive a lump-sum distribution. Participants may elect to receive the distribution or to roll over the distribution to another retirement plan such as an individual retirement account (IRA). However, if the amount of the distribution is more than \$1,000 and no election is made, then the distribution will automatically be rolled over into an IRA.

2. Summary of Significant Accounting Policies

Basis of Accounting: The Plan prepares its financial statements on the accrual basis whereby revenue is recognized when earned and expenses are recognized when incurred.

Investment Valuation and Income Recognition: The Plan's investments are stated at fair value using generally accepted accounting principles and applicable laws.

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.

Notes Receivable from Participants: Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

Contributions: Employer contributions are accrued based upon the salaries of Plan participants. Employee contributions are recorded when payroll deductions are made from participating employees.

Payment of Benefits: Benefits are recorded when paid.

Operating Expenses: The Plan permits the payment of operating expenses to be made from the Plan's assets. The expenses paid using the Plan's assets will generally be allocated among the accounts of participants in the Plan. These expenses will be allocated either proportionately based on the value of the account balance or as an equal dollar amount based on the number of participants in the Plan.

Hardship Distributions: Hardship distributions are permitted from a participant's pre-tax elective deferrals, employer matching contributions, employer profit-sharing contributions, and transfer accounts. The minimum amount of hardship withdrawals is \$1,000 and distributions may only be made from amounts which are fully vested.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

2. Summary of Significant Accounting Policies - Continued

Estimates: The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Evaluation of Subsequent Events: Management has evaluated subsequent events through August 24, 2022, which is the date the financial statements were available to be issued.

3. Information Certified by Plan Trustee (Unaudited)

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments and notes receivable from participants held at December 31, 2021, and net appreciation in fair value of investments, interest and dividends, and interest income on notes receivable from participants for the year ended December 31, 2021, was obtained by management and agreed to or derived from information certified as complete and accurate by Fidelity Management Trust Company (FMTC) (the trustee of the Plan). The information certified includes total investments of \$45,591,775 and related investment income of \$5,854,790 for the year ended December 31, 2021.

4. Fair Value Measurements (Unaudited)

Financial Accounting Standards Board Accounting Standards Codification ("FASB ASC") 820-10, *Fair Value Measurement and Disclosure*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs are used only when Level 1 or 2 inputs are not available.

Level 1 Inputs

Level 1 inputs are based on quoted prices in active markets for identical assets that the Plan has the ability to access at year-end. Level 1 investments include mutual funds. Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. 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.

Level 2 Inputs

The Plan currently has no assets that would be considered Level 2 inputs.

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

4. Fair Value Measurements (Unaudited) - Continued

Level 3 Inputs

The Plan currently has no assets that would be considered Level 3 inputs.

The Plan's investments are reported at fair value in the statement of net assets available for benefits.

Input Levels by Investment Category:

		<u>Fair Value Measurements at Reporting Date Using</u>		
		Quoted Prices in		
		Active Markets	Significant Other	Significant
		for Identical	Observable	Unobservable
	<u>Fair Value</u>	<u>Assets (Level 1)</u>	<u>Inputs (Level 2)</u>	<u>Inputs (Level 3)</u>
<u>December 31, 2021</u>				
Interest-Bearing Cash	\$ 6,868,951	\$ 6,868,951	\$ -	\$ -
Common Stocks	3,010,520	3,010,520	-	-
Registered Investment Companies	<u>35,242,531</u>	<u>35,242,531</u>	-	-
Subtotal	<u>45,122,002</u>	<u>45,122,002</u>	-	-
Investments measured at Net Asset Value	<u>469,773</u>	-	-	-
Total	<u>\$45,591,775</u>	<u>\$ 45,122,002</u>	<u>\$ -</u>	<u>\$ -</u>
<u>December 31, 2020</u>				
Interest-Bearing Cash	\$ 1,373,719	\$ 1,373,719	\$ -	\$ -
Common Stocks	2,151,886	2,151,886	-	-
Registered Investment Companies	<u>33,931,909</u>	<u>33,931,909</u>	-	-
Subtotal	<u>37,457,514</u>	<u>37,457,514</u>	-	-
Investments measured at Net Asset Value	<u>536,231</u>	-	-	-
Total	<u>\$37,993,745</u>	<u>\$ 37,457,514</u>	<u>\$ -</u>	<u>\$ -</u>

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

4. Fair Value Measurements (Unaudited) - Continued

Investments Measured Using Net Asset Value per Share Practical Expedient: The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2021 and 2020, respectively. There are no participant redemption restrictions for these investments. The redemption notice period is applicable only to the Plan.

	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
<u>December 31, 2021</u>				
Putnam Stable Value	\$469,773	N/A	Daily	N/A
<u>December 31, 2020</u>				
Putnam Stable Value	\$536,231	N/A	Daily	N/A

5. Plan Termination

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

6. Plan Qualification

The Plan obtained its latest determination letter in March 2014, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan sponsor believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

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

**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN**

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021

7. Parties-in-Interest

During the year ended December 31, 2021, the Plan held shares of mutual funds managed by FMTC, the Plan's trustee. Therefore, transactions with FMTC qualify as party-in-interest transactions. Fees paid to FMTC by the Plan totaled \$63,456 for the year ended December 31, 2021.

SageView Advisory Group manages Plan investments. SageView is a service provider of the Plan, therefore, transactions qualify as party-in-interest transactions. Fees paid by the Plan totaled \$34,000 for the year ended December 31, 2021.

WellsColeman performs the audit for the Plan. WellsColeman is a service provider of the Plan; therefore, transactions are party-in-interest transactions. Fees paid to the firm by the Plan totaled \$12,750 for the year ended December 31, 2021.

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

8. Risks and Uncertainties

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

9. Plan Amendment

The Plan has implemented provisions of Section 2202 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) enacted on March 27, 2020. The Plan has been amended effective November 17, 2021.

10. Subsequent Events

Due to the adverse market conditions, the Plan has incurred significant reductions in the fair market value of its investments since December 31, 2021. The permanency of the reduction in fair market value is not determinable at this time.

SUPPLEMENTAL INFORMATION

VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Interest-Bearing Cash</u>		
*	Fidelity Cash Reserves	Brokeragelink	\$ 2,685,215
*	Fidelity Investments	Treasury Fund	4,183,736
			<u>6,868,951</u>
	<u>Common/Collective Trusts</u>		
	Putnam	Stable Value	469,773
			<u>469,773</u>
	<u>Common Stocks</u>		
	Abbott Laboratories NFS	493	69,320
	Amgen, Inc.	182	40,843
	Analog Devices, Inc NFS	111	19,490
	Apple Computer, Inc.	815	144,754
	Applied Materials, Inc.	582	91,587
	Astrazeneca PLC	462	26,910
	AT&T, Inc.	314	7,733
	Bristol Myers Squibb	588	36,688
	Carrier Global Corporation Company	753	40,853
	Costco Wholesale Corp	100	56,924
	CitiGroup, Inc.	921	55,625
	Dana Holding Corp	450	10,269
	Deere & Company NFS	75	25,717
	Dow, Inc.	830	47,055
	Emerson Electric Company	424	39,459
	Estee Lauder Companies, Inc.	42	15,649
	Gilead Sciences, Inc.	794	57,632
	Global Pmts, Inc.	1	94
	Hartford Financial Services Group, Inc.	753	51,998
	Intel Corporation	1	33
	International Flavors & Fragrances, Inc.	264	39,788
	Leidos Holdings, Inc.	1	54
	Lilly Eli & Company	501	138,287
	Lowes Companies	255	66,034
	Manpower, Inc.	92	8,957
	McDonalds Corporation	415	111,204
	Merck & Company, Inc.	222	17,003
	Microsoft Corporation	806	271,119
	Mondelez International, Inc.	594	39,382

- Continued -

VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR - CONTINUED

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Common Stocks - Continued</u>		
	NASDAQ Stock Market, Inc.	640	134,473
	Newell Rubbermaid, Inc.	1033	22,550
	Nike, Inc.	606	100,923
	Norton Lifelock, Inc.	1545	40,142
	Organon & Co	19	589
	Origin Materials, Inc.	7000	45,150
	PayPal Holdings, Inc.	280	52,802
	Pepsico, Inc.	352	61,224
	Pfizer, Inc.	953	56,277
	Philip Morris International, Inc.	370	35,181
	Proctor & Gamble Company	303	49,548
	Prudential Financial, Inc.	754	81,662
	Seagate Technology PLC	712	80,487
	Skyworks Solutions, Inc.	255	39,537
	Starbucks Corp NFS	508	59,390
	Unilever PLC	874	47,022
	Velo3d, Inc	2000	15,620
	Verizon Communications	474	24,652
	Visa, Inc.	607	131,490
	Wal-Mart Stores, Inc.	400	57,821
	Wells Fargo & Co	1465	70,292
	Western Digital Corporation	87	5,675
	Whirlpool Corporation	675	158,510
	Yum! Brands, Inc.	431	59,856
	Zoetis, Inc.	202	49,186
			<u>3,010,520</u>
	<u>Registered Investment Companies</u>		
	BlackRock	LifePath Index 2025 K	2,637,542
		LifePath Index 2030 K	742,306
		LifePath Index 2035 K	1,569,822
		LifePath Index 2040 K	2,737,208
		LifePath Index 2045 K	2,946,440
		LifePath Index 2050 K	1,987,283
		LifePath Index 2055 K	555,368
		LifePath Index 2060 K	233,139
		LifePath Index Retirement K	1,477,127
	BrokerageLink	IShares Russell 1000 Idx Fd	632,426

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**VIRGINIA PHYSICIANS FOR WOMEN, LTD.
401(k) PROFIT-SHARING PLAN
EIN 54-1001246, PLAN 002**

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD AT END OF YEAR - CONTINUED

December 31, 2021

(a)	(b) Identity of Issuer, Borrowers, Lessor, or Similar Party	(c) Description of Investment, or Number of Shares or Options	(e) Current Value
	<u>Registered Investment Companies - Continued</u>		
		IShares S&P Small Cap 600	98,000
		IShares Floating Rate Fd	47,582
		Vanguard Index Fds	77,106
		Vanguard Bd Idx Fd ST	52,279
		Vanguard Intl Equity Idx	177,222
		Vanguard Intl Equity Idx FT	375,727
		Vanguard Adm Fds 500 Gro	1,726
		Sector Spdr Tr	19,450
	Carillon Eagle	Mid Cap Growth R6	2,090,244
	Dodge & Cox	International Stock	299,622
*	Fidelity Investments	Fidelity Advisor Int Growth I	1,031,718
		500 Index Adv	3,594,438
		Global ex U.S. Index Fund	397,358
		Extended Market Index Fund	386,839
	Invesco	Developing Markets R6	343,429
	Lord Abbett	Short Duration Income I	57,435
	MFS	Growth R6	3,593,822
	Prudential Financial	Global Total Return R6	2,046,961
		Total Return Bond R6	359,069
	Pimco	PIM RAE US Small I	842,204
	Putnam	Equity Income R6	1,726,136
	Victory	Sycamore Established Value	1,225,124
	Wasatch	Core Growth Inst	880,378
			<u>35,242,531</u>
	Participant-Directed Investments		<u>45,591,775</u>
	<u>Participant Loans</u>		
*	Participant Loans	Participant loans, at interest rates ranging from 4.25% to 6.50%, with maturities of 1 - 10 years	<u>291,114</u>
	Total Investments		<u>\$ 45,882,889</u>

Note: An asterisk (*) in column (a) denotes an entity known to be a party-in-interest to the Plan. Column (d) is not presented since cost of investments is not required for participant-directed investments.