

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 single-employer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ 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>FAIRHOPE HOSPICE & PALLIATIVE CARE, INC. PROFIT SHARING & 401(K) PLAN</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>FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.</u> <u>282 SELLS ROAD</u> <u>LANCASTER, OH 43130</u>
1b	Three-digit plan number (PN) ▶ <u>001</u>
1c	Effective date of plan <u>01/01/2000</u>
2b	Employer Identification Number (EIN) <u>31-1084518</u>
2c	Plan Sponsor's telephone number <u>740-654-7077</u>
2d	Business code (see instructions) <u>621610</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.	10/13/2022	KRISTIN GLASURE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2022	KRISTIN GLASURE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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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	5 142
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 116 6a(2) 112 6b 5 6c 17 6d 134 6e 0 6f 134 6g 131 6h 7
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2G 2J 2K 2T 3D b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ 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) ☐ 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 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.	D Employer Identification Number (EIN) 31-1084518	

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
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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)

FAIRFIELD NATIONAL BANK

31-1198067

(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?
21	TRUSTEE	31134	Yes ☒ No ☐	Yes ☐ No ☒	191	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 ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 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 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC. PROFIT SHARING & 401(K) PLAN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.				D Employer Identification Number (EIN) 31-1084518	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL PRESERVATION FUND					
b Name of sponsor of entity listed in (a): FEDERATED INVESTORS TRUST COMPANY					
c EIN-PN 22-2712853-001		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

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Schedule D (Form 5500) 2021 v. 201209

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
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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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 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.	D Employer Identification Number (EIN) 31-1084518	

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	132443	150986
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	71926	47512
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	2867	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	3226920	4073379
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	3434156	4271877

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	3434156	4271877
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	150742	
(B) Participants	2a(1)(B)	317246	
(C) Others (including rollovers).....	2a(1)(C)	2333	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		470321
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	10	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		10
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	236139	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		236139
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	60857	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		60857
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	221719	
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		221719

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		989046
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	108550	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		108550
f Corrective distributions (see instructions).....	2f		11642
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	31133	
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		31133
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		151325
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		837721
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

b 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: HILL, BARTH & KING, LLC

(2) EIN: 34-1897225

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		300000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5c 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 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.	D Employer Identification Number (EIN) 31-1084518

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 73-1721841		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

Part III	Amendments
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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
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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.
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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 _____

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE**

December 31, 2021 and 2020

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September 9, 2022

Plan Administrator
FairHoPe Hospice & Palliative Care, Inc.
Profit Sharing & 401(k) Plan
Lancaster, Ohio

Independent Auditor's Report

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

We have performed an audit of the financial statements of FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) 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) (ERISA Section 103(a)(3)(C) audit). 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 then ended, and the related notes to the financial statements (2021 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 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 C 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 accompanying 2021 financial statements, 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 accompanying 2021 financial statements 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 (GAAS). 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 FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) 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 FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) Plan's ability to continue as a going concern within one year after 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 of the 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 GAAS 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 GAAS, 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 FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) 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 FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) 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.

Other Matters

2021 Supplemental Schedule Required by ERISA

The supplemental schedule of Schedule H, Part IV, Line 4i – Schedule of Assets Held for Investment Purposes at End of Year at 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 GAAS. 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 FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) 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 12, 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 (b) the form and content of the information included in the 2020 financial statements 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.

Hill, Barth & King LLC

Certified Public Accountants

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ASSETS		
INVESTMENTS		
Interest-bearing cash	\$ 47,512	\$ 71,926
Mutual funds	<u>4,073,379</u>	<u>3,229,787</u>
TOTAL INVESTMENTS	<u>4,120,891</u>	<u>3,301,713</u>
RECEIVABLES		
Employer contribution receivable	147,196	132,443
Accrued investment income	<u>442</u>	<u>872</u>
TOTAL RECEIVABLES	<u>147,638</u>	<u>133,315</u>
TOTAL ASSETS	4,268,529	3,435,028
LIABILITIES		
EXCESS CONTRIBUTION PAYABLE	<u>5,814</u>	<u>12,886</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 4,262,715</u></u>	<u><u>\$ 3,422,142</u></u>

See accompanying notes to financial statements

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ADDITIONS		
Investment activity:		
Net appreciation in fair value of investments	\$ 282,576	\$ 410,220
Interest and dividends	<u>235,706</u>	<u>70,949</u>
	<u>518,282</u>	<u>481,169</u>
Contributions:		
Employee	311,189	303,298
Employer	147,196	132,443
Rollovers	2,333	-
Other receipts	<u>191</u>	<u>285</u>
	<u>460,909</u>	<u>436,026</u>
TOTAL ADDITIONS	<u>979,191</u>	<u>917,195</u>
 DEDUCTIONS		
Benefits paid to participants	107,306	133,372
Administrative expenses	<u>31,312</u>	<u>22,597</u>
TOTAL DEDUCTIONS	<u>138,618</u>	<u>155,969</u>
 NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS	 840,573	 761,226
 NET ASSETS AVAILABLE FOR BENEFITS BEGINNING OF YEAR	 <u>3,422,142</u>	 <u>2,660,916</u>
 NET ASSETS AVAILABLE FOR BENEFITS END OF YEAR	 <u><u>\$ 4,262,715</u></u>	 <u><u>\$ 3,422,142</u></u>

See accompanying notes to financial statements

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS

December 31, 2021 and 2020

NOTE A - DESCRIPTION OF PLAN

The following description of FairHoPe Hospice & Palliative Care, Inc. Profit Sharing & 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan is a 401(k) Profit Sharing Plan covering all full-time employees of FairHope Hospice & Palliative Care, Inc. (the Organization) who have completed six months of service and have attained the age of 18. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Investment Options

Upon enrollment in the Plan, a participant may direct employee contributions and employer matching and profit sharing contributions in any of the investment options offered by the Plan.

Contributions

Participants may contribute up to 75% of their compensation, within the salary deferral limitations imposed by Section 401(k) of the Internal Revenue Code (IRC). In 2021 and 2020, the employer made a discretionary matching contribution of 50% of the first 4% of compensation and 50% of the first 2% of compensation that a participant contributed to the Plan, respectively. Match is discretionary. They also made a discretionary profit sharing contribution based on a pro rata formula of each participants qualifying compensation to total compensation of all qualifying participants for the Plan year. The profit sharing contribution was 1% for the years ended December 31, 2021 and 2020.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of the Organization's contributions and Plan earnings. Allocations are based on participant earnings, compensation, or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Vesting in the remainder of their account is based on years of continuous service, provided the deferral percentage tests are satisfied. In 2021 and 2020, a participant is 100% vested after five years of service. In the event that the participant becomes disabled or dies, or the Plan is terminated, a participant becomes 100% vested in their account balance regardless of years of service.

Payments of Benefits

On termination of service, a participant may elect to receive either a lump-sum amount or annual installments over a certain period.

Forfeited Accounts

Accounts forfeited by participants who terminate service prior to becoming fully vested are used to reduce employer contributions. Forfeitures used to offset employer contributions for the years ended December 31, 2021 and 2020 amounted to \$3,546 and \$5,027, respectively.

Participant Directed

All investment funds contained in this Plan are self-directed by the participants.

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

December 31, 2021 and 2020

NOTE A - DESCRIPTION OF PLAN (CONTINUED)

CARES Act:

Effective April 14, 2020, the Plan adopted the applicable provisions of the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act"), which was signed into law on March 27, 2020. The CARES Act distribution provision allowed the Plan's participants to take a distribution up to \$100,000 or 100% of their vested balance, whichever is less, from the Plan beginning on or after January 1, 2020 and before December 31, 2020. Eligible participants who receive a distribution under the CARES Act were not subject to the standard early withdrawal penalty that generally applies to participants under the age of 59½. Pursuant to the CARES Act, the Plan also suspended all minimum required distributions for 2020 and allowed participants who had already taken their minimum required distributions to roll them back into the Plan.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of significant accounting policies followed in the preparation of these financial statements. These policies conform to accounting principles generally accepted in the United States of America and have been applied on a consistent basis.

Basis of Accounting

The financial statements of the Plan are prepared using the accrual basis of accounting in conformity with generally accepted accounting principles.

Valuation of Investments and Income Recognition

Plan investments are stated at estimated fair values. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. 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.

Estimates

Management uses estimates and assumptions in preparing these financial statements in accordance with U.S. generally accepted accounting principles. Those estimates and assumptions affect certain reported amounts and disclosures. Accordingly, actual result could differ from those estimates.

Income Taxes

The Internal Revenue Service (IRS) has determined and informed the Organization by a letter dated June 30, 2020, that the Plan and related trust are designed in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC, and therefore, believe that the Plan is qualified and the related trust is tax-exempt.

Reclassification

Certain prior year amounts were reclassified to conform with current year presentation. Such reclassifications have no effect on the net assets available for benefits.

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

December 31, 2021 and 2020

NOTE C - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The Trustee, Fairfield National Bank Trust Department, a division of Park National Bank, has certified to the Plan Administrator that the annual account provided by the Trustee, including the list of investments and investment income, as of and for the years ended December 31, 2021 and 2020, is complete and accurate. A summary of information included in the financial statements, which has been certified, is as follows at December 31:

	<u>2021</u>	<u>2020</u>
Money markets	\$ 47,512	\$ 71,926
Mutual funds	4,073,379	3,229,787
Net appreciation in fair value of investments	282,576	410,220
Interest and dividends	235,706	70,949

NOTE D - FAIR VALUE MEASUREMENTS

FASB ASC 820 establishes a framework for measuring fair value which provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described in the table below:

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

Level 2 – Inputs to the valuation methodology include:

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

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

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

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

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

December 31, 2021 and 2020

NOTE D - FAIR VALUE MEASUREMENTS (CONTINUED)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020.

- *Money markets:* Valued at amortized cost which approximates fair value and includes investments in high quality, short-term money market instruments which are issued and payable in US dollars. (Level 1)
- *Mutual funds:* Valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. (Level 1)

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

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

	<u>2021</u>	<u>Total</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Money markets	\$	47,512	\$ 47,512	\$ -	\$ -
Mutual funds		<u>4,073,379</u>	<u>4,073,379</u>	<u>-</u>	<u>-</u>
Total	\$	<u>4,120,891</u>	<u>\$ 4,120,891</u>	<u>\$ -</u>	<u>\$ -</u>
	<u>2020</u>	<u>Total</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Money market	\$	71,926	\$ 71,926	\$ -	\$ -
Mutual funds		<u>3,229,787</u>	<u>3,229,787</u>	<u>-</u>	<u>-</u>
Total	\$	<u>3,301,713</u>	<u>\$ 3,301,713</u>	<u>\$ -</u>	<u>\$ -</u>

NOTE E - PLAN TERMINATION

Although it has not expressed intent to do so, the Plan's management has the right to terminate the Plan subject to the provisions of ERISA. In the event of termination, participants will become 100% vested in their accounts.

NOTE F - ADMINISTRATIVE COSTS

The Plan's administrative fees are paid by the Plan. For the years ended December 31, 2021 and 2020, the Plan incurred administrative expenses of \$22,597 and \$20,308, respectively.

NOTE G - PARTY-IN-INTEREST

The Plan Sponsor (FairHoPe Hospice & Palliative Care, Inc.) and the Trustee (Fairfield National Bank Trust Department, a division of Park National Bank) are considered parties-in-interest.

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

December 31, 2021 and 2020

NOTE H - 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 statements of net assets available for benefits.

On January 30, 2020, the World Health Organization ("WHO") announced a global health emergency because of a new strain of coronavirus originating in Wuhan, China (the "COVID-19" outbreak) and the risks to the international community as the virus spreads globally beyond its point of origin. In March 2020, the WHO classified the COVID-19 outbreak as a pandemic, based on the rapid increase in exposure globally.

The full impact of the COVID-19 outbreak continues to evolve as of the date of this report. This pandemic has adversely affected global economic activity and greatly contributed to instability in financial markets. Because the values of the Plan's individual investments may fluctuate in response to changing market conditions, the amount of losses that will be recognized in subsequent periods, if any, and related impact on the Plan's liquidity cannot be determined at this time.

NOTE I - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of the net assets available for benefits per the financial statements to Form 5500 at December 31:

	<u>2021</u>	<u>2020</u>
Net assets available for benefits per the financial statements	\$ 4,262,715	\$ 3,422,142
Accrued income	(442)	(872)
Excess contributions liability	5,814	12,886
Forfeitures applied to contributions	3,790	-
Net assets available for benefits per Form 5500	<u>\$ 4,271,877</u>	<u>\$ 3,434,156</u>

The following is a reconciliation of the net increase of net assets per the financial statements to Form 5500 for the year ended December 31:

	<u>2021</u>	<u>2020</u>
Net increase in net assets per the financial statements	\$ 840,573	\$ 761,226
Change in accrued income not included on Form 5500	442	272
Change in excess contributions liability	(6,829)	(6,889)
Unrealized gain (loss) not on financial statements	(256)	47
Forfeitures applied to contributions	3,790	-
Rounding	1	(1)
Net increase in net assets per Form 5500	<u>\$ 837,721</u>	<u>\$ 754,655</u>

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

December 31, 2021 and 2020

NOTE J - SUBSEQUENT EVENTS

Management evaluated all activity of the Plan through September 9, 2022, the date the financial statements were available to be issued, and concluded that no subsequent events have occurred that would require recognition or disclosure in the financial statements or notes, except for those noted below.

On June 30, 2020, the Plan received an updated IRS determination letter for the restated Plan as a part of the Cycle 3 restatement. The restatement was adopted by the Plan on December 31, 2021 and implementation of the Plan restatement went into effect on January 1, 2022.

**FAIRHOPE HOSPICE & PALLIATIVE CARE, INC.
PROFIT SHARING & 401(k) PLAN**

**SCHEDULE H, PART IV, LINE 4i –
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR**

**EIN: 31-1084518
PLAN NUMBER: 001**

December 31, 2021

				(e) Current
(a)	(b) Identity of issuer	(c) Description of investment	(d) Cost	Value
	Vanguard - 500 Index Admiral	Mutual Fund	**	\$ 729,416
	Vanguard - Windsor II Fund Admiral Shares	Mutual Fund	**	455,460
	Vanguard - Wellesley Income Fund Investor	Mutual Fund	**	363,472
	Vanguard - Growth Index Fund Admiral	Mutual Fund	**	308,591
	Vanguard - Target Retirement 2035	Mutual Fund	**	302,851
	Vanguard - Target Retirement 2025	Mutual Fund	**	234,537
	Vanguard - Small Cap Growth Admiral	Mutual Fund	**	230,331
	Vanguard - Target Retirement 2045	Mutual Fund	**	201,902
	Vanguard - Extended Market Admiral	Mutual Fund	**	195,718
	Vanguard - Target Retirement 2055	Mutual Fund	**	183,183
	American Funds - New Perspective Fund R6	Mutual Fund	**	172,704
	Vanguard - Wellington Fund Admiral Shares	Mutual Fund	**	137,675
	Vanguard - Short-Term Bond Index Admiral	Mutual Fund	**	99,245
	Vanguard - Short Term Investment Grade Admiral Fund	Mutual Fund	**	97,176
	Vanguard - Intermediate-Term Bond Admiral	Mutual Fund	**	82,558
	Vanguard - Developed Markets Index Admiral	Mutual Fund	**	65,665
	Vanguard - Treasury Money Market Investor	Money Market	**	43,966
	American Funds - American Funds EuroPacific R6	Mutual Fund	**	37,775
	Vanguard - High Yield Corp Fund Admiral Shares	Mutual Fund	**	27,126
	Vanguard - European Admiral	Mutual Fund	**	26,271
	Vanguard - Ultra-Short-Term Bond Fund Admiral	Mutual Fund	**	25,481
	Vanguard - Total International Bond Indx Fd Amd	Mutual Fund	**	25,034
	Vanguard - Pacific Stock Signal	Mutual Fund	**	23,855
	Vanguard - Target Retirement 2015	Mutual Fund	**	23,076
	Vanguard - Small Cap Value Index Admiral Shs	Mutual Fund	**	13,541
	Vanguard - Emerging Markets Stock Index Fd Adm	Mutual Fund	**	10,240
	Northern Institutional Government Select Portfolio	Money Market	**	3,546
	Vanguard - Target Retirement 2065	Mutual Fund	**	496
	TOTAL			\$ 4,120,891

** Denotes participant directed accounts

Audited Financial Statements

Year Ended December 31, 2021



Y Pricing

R6 Pricing

Institutional Pricing

Institutional Service Pricing

Service Pricing

R Pricing

Federated Hermes Capital Preservation Fund

Not FDIC Insured • May Lose Value • No Bank Guarantee

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Report of Independent Auditors

TO THE BOARD OF DIRECTORS OF FEDERATED INVESTORS TRUST COMPANY:

Opinion

We have audited the financial statements of Federated Hermes Capital Preservation Fund (the “Fund”), which comprise the statement of assets and liabilities, including the portfolio of investments as of December 31, 2021, and the related statements of operations, changes in net assets, cash flows and its financial highlights, for the year then ended, and the related notes (collectively referred to as the “Financial Statements”).

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Fund at December 31, 2021, and the results of its operations, changes in its net assets, its cash flows and its financial highlights, for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor’s Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Fund 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 audit opinion.

Responsibilities of Management for the 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 of material misstatement, whether due to fraud or error.

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 the Fund’s ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Auditor’s Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free of 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 GAAS 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 GAAS, 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 the Fund’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 the Fund’s ability to continue as a going concern for a reasonable period of time.

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.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of investments purchased and schedule of investments sold, matured or redeemed for the year ended December 31, 2021 are presented for purposes of additional analysis and are not a required part of the U.S. generally accepted accounting principles financial statements, but are supplementary information required by the Pennsylvania Department of Banking and Securities. 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 has been subjected to the 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 auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Ernst & Young LLP

Boston, Massachusetts
March 30, 2022

Portfolio of Investments

December 31, 2021

Name	Issuer/Wrap Provider Credit Rating Moody's/S&P	Units or Principal Amount	Investment		Wrap Contracts at Fair Value	Adjustment from Fair Value to Contract Value	Contract Value ^(a)
			Cost	Investments at Fair Value			
COLLECTIVE INVESTMENT FUND— 3.9% ^{(b),(c),(d)}							
Federated Hermes Prime Cash Collective Investment Fund, R6 Class, 0.00%	AAA	134,824,799	\$ 134,824,799	\$ 134,824,799	\$ 0	\$ 0	\$ 134,824,799
TRADITIONAL GUARANTEED INVESTMENT CONTRACTS—4.5% ^(d)							
Prudential Insurance Company of America:							
2.15%, due 5/02/2022	Aa3/AA-	10,000,000	10,000,000	10,071,942	0	(71,359)	10,000,583
2.31%, due 3/31/2022	Aa3/AA-	10,000,000	10,000,000	10,057,099	0	(56,474)	10,000,625
2.33%, due 6/30/2022	Aa3/AA-	10,000,000	10,000,000	10,115,510	0	(114,879)	10,000,631
United of Omaha Life Insurance Company:							
1.15%, due 11/14/2022	A1/A+	25,000,000	25,000,000	25,590,656	0	(253,669)	25,336,987
1.15%, due 11/30/2022	A1/A+	10,000,000	10,000,000	10,241,529	0	(106,601)	10,134,928
1.18%, due 9/01/2022	A1/A+	10,000,000	10,000,000	10,233,347	0	(79,936)	10,153,411
1.18%, due 10/02/2022	A1/A+	10,000,000	10,000,000	10,238,296	0	(90,091)	10,148,205
1.18%, due 10/13/2022	A1/A+	10,000,000	10,000,000	10,241,916	0	(93,711)	10,148,205
1.27%, due 6/30/2022	A1/A+	10,000,000	10,000,000	10,236,014	0	(63,859)	10,172,155
1.27%, due 7/28/2022	A1/A+	10,000,000	10,000,000	10,245,929	0	(73,773)	10,172,156
1.27%, due 8/09/2022	A1/A+	10,000,000	10,000,000	10,257,290	0	(78,079)	10,179,211
1.27%, due 8/23/2022	A1/A+	10,000,000	10,000,000	10,262,256	0	(83,045)	10,179,211
1.27%, due 9/15/2022	A1/A+	15,000,000	15,000,000	15,394,953	0	(136,719)	15,258,234
TOTAL TRADITIONAL GUARANTEED INVESTMENT CONTRACTS			150,000,000	153,186,737	0	(1,302,195)	151,884,542
SYNTHETIC GUARANTEED INVESTMENT CONTRACTS—91.6% ^{(d),(e),(f)}							
INTERNALLY MANAGED—91.6%							
Massachusetts Mutual Life Insurance Company, 2.38%	Aa3/AA+	486,833,777	486,833,777	501,251,956	878,053	(14,322,717)	487,807,292
Metropolitan Tower Life Insurance Company, 2.08%	Aa3/AA-	687,609,660	687,609,660	702,913,141	1,170,982	(15,271,158)	688,812,965
Nationwide Life Insurance Company, 1.19%	A1/A+	441,902,299	441,902,299	445,640,478	796,224	(4,089,819)	442,346,883
New York Life Insurance Company, 1.56%	Aaa/AA+	443,739,140	443,739,140	450,592,064	755,349	(7,024,504)	444,322,909
Prudential Insurance Company of America, 1.98%	Aa3/AA-	571,009,284	571,009,284	587,977,894	857,840	(16,942,323)	571,893,411
Royal Bank of Canada, 1.30%	Aa2/AA-	475,446,244	475,446,244	480,027,618	809,145	(4,869,449)	475,967,314
TOTAL SYNTHETIC GUARANTEED INVESTMENT CONTRACTS			3,106,540,404	3,168,403,151	5,267,593	(62,519,970)	3,111,150,774
TOTAL INVESTMENTS			\$3,391,365,203	\$3,456,414,687	\$5,267,593	\$(63,822,165)	\$3,397,860,115

(a) Contract value approximates cost plus accrued interest at December 31, 2021, for guaranteed investment contracts and net asset value for collective investment funds.

(b) 7-Day net yield at December 31, 2021.

(c) Affiliated holding.

(d) Percentages indicated are based on net assets (at contract value) of \$3,396,169,057.

(e) Floating rate security with current rate shown. Represents current crediting rate for synthetic contracts.

(f) Units/Principal amount and cost include reinvested interest.

Affiliated fund holdings are investment companies or collective investment funds which are managed by the Adviser or an affiliate of the Adviser. Transactions with affiliated fund holdings during the year ended December 31, 2021, were as follows:

	Federated Hermes Prime Cash Collective Investment Fund, R6 Class	Federated Hermes Government Obligations Fund, Institutional Shares*	Total of Affiliated Transactions
Value as of 12/31/2020	\$ 403,830,459	\$ 27,965,799	\$ 431,796,258
Purchases at Cost	\$ 589,173,313	\$ 1,134,209,509	\$ 1,723,382,822
Proceeds from Sales	\$(858,178,973)	\$(1,050,309,301)	\$(1,908,488,274)
Change in Unrealized Appreciation/Depreciation	N/A	N/A	N/A
Net Realized Gain/(Loss)	N/A	N/A	N/A
Value as of 12/31/2021	\$ 134,824,799	\$ 111,866,007	\$ 246,690,806
Shares Held as of 12/31/2021	134,824,799	111,866,007	246,690,806
Dividend Income	\$ 47,163	N/A	\$ 47,163

* Shares only held within underlying synthetic guaranteed investment contract(s).

Various inputs are used in determining the value of the Fund's investments. These inputs are summarized in the three broad levels listed below:

Level 1—quoted prices in active markets for identical securities.

Level 2—other significant observable inputs (including quoted prices for similar securities, interest rates, prepayment speeds, credit risk, etc.). Also includes securities valued at amortized cost.

Level 3—significant unobservable inputs (including the Fund's own assumptions in determining the fair value of investments).

The inputs or methodology used for valuing securities are not an indication of the risk associated with investing in those securities.

The following is a summary of the inputs used, as of December 31, 2021, in valuing the Fund's assets carried at fair value:

Valuation Inputs

	Level 1— Quoted Prices	Level 2— Other Significant Observable Inputs	Level 3— Significant Unobservable Inputs	Total
Traditional Guaranteed Investment Contracts	\$ —	\$ 153,186,737	\$—	\$ 153,186,737
Synthetic Guaranteed Investment Contracts	—	3,168,403,151	—	3,168,403,151
Collective Investment Fund	134,824,799	—	—	134,824,799
TOTAL SECURITIES	\$134,824,799	\$3,321,589,888	\$—	\$3,456,414,687
Other Financial Instruments*	\$ —	\$ 5,267,593	\$—	\$ 5,267,593

* Other Financial Instruments are wrap contracts.

See Notes which are an integral part of the Financial Statements

Statement of Assets and Liabilities

December 31, 2021

Assets:

Investments:

Affiliated collective investment fund*	\$ 134,824,799
Traditional guaranteed investment contracts, including accrued interest of \$1,884,542, at fair value (cost \$150,000,000)	153,186,737
Investments in synthetic guaranteed investment contracts, including accrued interest of \$4,610,370, at fair value (cost \$3,106,540,404)	3,168,403,151
TOTAL INVESTMENTS, AT FAIR VALUE	3,456,414,687

Cash	169,725
Wrap contracts, at fair value	5,267,593
Receivable for fund units sold	3,707,794
TOTAL ASSETS	3,465,559,799

Liabilities:

Payable for fund units redeemed	4,497,555
Management fee payable (Notes 2 and 3)	1,071,022
TOTAL LIABILITIES	5,568,577

Net assets (at fair value)	3,459,991,222
Adjustment from fair value to contract value (Note 4)	(63,822,165)
Net assets (at contract value)	\$3,396,169,057

Net Assets:

Y Pricing:

(equivalent to \$10.00 per unit based on 45,613,685 units outstanding), no par value, unlimited units authorized	\$ 456,159,497
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R6 Pricing:

(equivalent to \$10.00 per unit based on 123,557,931 units outstanding), no par value, unlimited units authorized	\$1,235,665,350
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Institutional Pricing:

(equivalent to \$10.00 per unit based on 63,783,517 units outstanding), no par value, unlimited units authorized	\$ 637,835,348
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Institutional Service Pricing:

(equivalent to \$10.00 per unit based on 79,152,578 units outstanding), no par value, unlimited units authorized	\$ 791,644,930
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Service Pricing:

(equivalent to \$10.00 per unit based on 16,389,139 units outstanding), no par value, unlimited units authorized	\$ 163,902,438
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R Pricing:

(equivalent to \$10.00 per unit based on 11,095,201 units outstanding), no par value, unlimited units authorized	\$ 110,961,494
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* See information listed after the Fund's Portfolio of Investments.

See Notes which are an integral part of the Financial Statements

Statement of Operations

Year Ended December 31, 2021

Investment Income:

Interest Income	\$64,390,568
Dividends received from an affiliated holding*	47,163
TOTAL INCOME	64,437,731

Expenses

Federated Investors Trust Company management fees (Note 2):

Y Pricing	\$ 1,144,841
R6 Pricing	3,205,066
Institutional Pricing	2,086,861
Institutional Service Pricing	4,579,844
Service Pricing	1,382,462
R Pricing	1,252,006
TOTAL EXPENSES	13,651,080

Reimbursements

Federated Investors Trust Company management fees (Note 3):

Y Pricing	\$ (43,171)
R6 Pricing	(94,710)
Institutional Pricing	(52,201)
Institutional Service Pricing	(61,834)
Service Pricing	(12,916)
R Pricing	(8,879)
Net Expenses	\$13,377,369
Net Investment Income	\$51,060,362

* See information listed after the Fund's Portfolio of Investments.

See Notes which are an integral part of the Financial Statements

Statement of Changes in Net Assets

Year Ended December 31, 2021

From Investment Activities:

Net investment income	\$ 51,060,362
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Income Distributions to Participants:

From Y Pricing	(8,920,955)
From R6 Pricing	(19,286,680)
From Institutional Pricing	(10,134,480)
From Institutional Service Pricing	(10,036,803)
From Service Pricing	(1,652,170)
From R Pricing	(841,874)
Undistributed net investment income	187,400

From Unit Transactions:

From Y Pricing:

Proceeds from sale of units (11,849,169 units)	118,491,689
Net asset value of units issued to shareholders in lieu of payment of distributions declared (890,090 units)	8,900,904
Cost of units redeemed (31,383,681 units)	(313,836,811)

From R6 Pricing:

Proceeds from sale of units (61,673,812 units)	616,738,136
Net asset value of units issued to shareholders in lieu of payment of distributions declared (1,925,929 units)	19,259,284
Cost of units redeemed (71,467,201 units)	(714,672,013)

From Institutional Pricing:

Proceeds from sale of units (24,231,432 units)	242,314,311
Net asset value of units issued to shareholders in lieu of payment of distributions declared (1,009,647 units)	10,096,467
Cost of units redeemed (39,210,536 units)	(392,105,364)

From Institutional Service Pricing:

Proceeds from sale of units (29,240,863 units)	292,408,644
Net asset value of units issued to shareholders in lieu of payment of distributions declared (999,928 units)	9,999,278
Cost of units redeemed (40,357,601 units)	(403,576,012)

From Service Pricing:

Proceeds from sale of units (6,285,020 units)	62,850,204
Net asset value of units issued to shareholders in lieu of payment of distributions declared (165,155 units)	1,651,553
Cost of units redeemed (8,905,463 units)	(89,054,626)

From R Pricing:

Proceeds from sale of units (4,207,242 units)	42,072,408
Net asset value of units issued to shareholders in lieu of payment of distributions declared (83,829 units)	838,291
Cost of units redeemed (6,619,765 units)	(66,197,649)

Decrease in net assets	(553,633,906)
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Net assets at beginning of year (at contract value)	3,949,802,963
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Net assets at end of year (at contract value)	\$3,396,169,057
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See Notes which are an integral part of the Financial Statements

Statement of Cash Flows

Year Ended December 31, 2021

Operating Activities:

Net investment income	\$ 51,060,362
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Adjustments to Reconcile Net Investment Income to Net Cash Provided By Operating Activities:

Purchase of investment securities	(50,000,000)
Proceeds from disposition of investment securities	400,000,000
Purchase of short-term investments	(589,173,313)
Reinvestment of interest income from investment securities	(62,916,396)
Proceeds from disposition of short-term investments	858,178,973
Increase in interest receivable	(234,978)
Decrease in management fee payable	(146,437)
NET CASH PROVIDED BY OPERATING ACTIVITIES	606,768,211

Financing Activities:

Proceeds from sale of shares	1,381,342,678
Income distributions to participants	(127,231)
Payments for units redeemed	(1,987,813,933)
NET CASH USED BY FINANCING ACTIVITIES	(606,598,486)
Increase in cash	169,725
Cash at beginning of year	—
Cash at end of year	\$ 169,725

Non-cash financing activities not included herein consist of reinvestment of dividends and distributions to participants of \$50,745,777.

See Notes which are an integral part of the Financial Statements

Financial Highlights – Y Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.16
Less Distributions:	
Distributions from net investment income	(0.16)
Net Asset Value, End of Period	\$10.00
Total Return	1.56%
Ratios to Average Net Assets:	
Net expenses ¹	0.19%
Net investment income	1.56%
Expense reimbursement ²	0.01%
Supplemental Data:	
Net assets, end of period (000 omitted)	\$456,159
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Financial Highlights – R6 Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.15
Less Distributions:	
Distributions from net investment income	(0.15)
Net Asset Value, End of Period	\$10.00
Total Return	1.51%

Ratios to Average Net Assets:

Net expenses ¹	0.24%
Net investment income	1.51%
Expense reimbursement ²	0.01%

Supplemental Data:

Net assets, end of period (000 omitted)	\$1,235,665
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Financial Highlights – Institutional Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.15
Less Distributions:	
Distributions from net investment income	(0.15)
Net Asset Value, End of Period	\$10.00
Total Return	1.46%

Ratios to Average Net Assets:

Net expenses ¹	0.29%
Net investment income	1.46%
Expense reimbursement ²	0.01%

Supplemental Data:

Net assets, end of period (000 omitted)	\$637,835
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Financial Highlights – Institutional Service Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.12
Less Distributions:	
Distributions from net investment income	(0.12)
Net Asset Value, End of Period	\$10.00
Total Return	1.21%

Ratios to Average Net Assets:

Net expenses ¹	0.54%
Net investment income	1.21%
Expense reimbursement ²	0.01%

Supplemental Data:

Net assets, end of period (000 omitted)	\$791,645
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Financial Highlights – Service Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.10
Less Distributions:	
Distributions from net investment income	(0.10)
Net Asset Value, End of Period	\$10.00
Total Return	0.96%
Ratios to Average Net Assets:	
Net expenses ¹	0.79%
Net investment income	0.96%
Expense reimbursement ²	0.01%
Supplemental Data:	
Net assets, end of period (000 omitted)	\$163,902
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Financial Highlights – R Pricing

Year Ended December 31,	2021
Net Asset Value, Beginning of Period	\$10.00
Income From Investment Operations:	
Net investment income	0.07
Less Distributions:	
Distributions from net investment income	(0.07)
Net Asset Value, End of Period	\$10.00
Total Return	0.71%

Ratios to Average Net Assets:

Net expenses ¹	1.04%
Net investment income	0.71%
Expense reimbursement ²	0.01%

Supplemental Data:

Net assets, end of period (000 omitted)	\$110,961
Portfolio turnover ³	1%

1 Amount does not reflect net expenses incurred by investment companies in which the Fund may invest.

2 This expense decrease is reflected in both the net expense and the net investment income ratios shown above. Amount does not reflect expense waiver/reimbursement recorded by investment companies in which the Fund may invest.

3 Securities that mature are considered sales for purposes of this calculation.

See Notes which are an integral part of the Financial Statements

Notes to Financial Statements

December 31, 2021

1. PROVISIONS OF THE FUND

Federated Hermes Capital Preservation Fund ("Fund") is a collective investment fund for which Federated Investors Trust Company ("Trustee"), a wholly owned subsidiary of Federated Hermes, Inc. ("Federated Hermes"), serves as trustee under a Declaration of Trust dated October 25, 2007, as amended and restated on August 30, 2011, August 23, 2016, June 26, 2020 and July 16, 2021 ("Trust Agreement"). The Trust Agreement is the governing instrument of the Fund. The Trustee is organized as a Pennsylvania state-chartered trust company. The Trustee and the Fund operate in conformity with the rules and regulations of the Pennsylvania Department of Banking and Securities as they apply to collective investment of fiduciary funds.

Investors in the Fund are limited to those defined contribution retirement plan trusts set forth in the Trust Agreement ("Participants"). The Fund is exempt from income taxes under sections 401 and 501 of the Internal Revenue Code (the "Code"). The Fund offers six pricing options: Y Pricing, R6 Pricing, Institutional Pricing, Institutional Service Pricing, Service Pricing and R Pricing. The investment objective of the Fund is stability of principal and high current income.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of significant accounting policies consistently followed by the Fund in the preparation of its financial statements. These policies are in conformity with U.S. generally accepted accounting principles (GAAP).

Valuation of Investments

The Fund may hold guaranteed investment contracts (traditional GICs) and synthetic guaranteed investment contracts (synthetic GICs). Traditional GICs represent deposits which guarantee a stated interest rate for the term of the contracts. The fair value of traditional GICs is determined based on the present value of the contract's expected cash flows, discounted by current market interest rates for like-duration and like-quality investments. Synthetic GICs are portfolios of securities owned by the Fund. Each of the synthetic GICs has a wrap contract that provides a minimum guaranteed rate of return for the term of the respective contracts. The fair value of a synthetic GIC is determined based on the fair value of the securities underlying each GIC. The underlying securities can be comprised of, primarily, over-the-counter market securities and open-end mutual funds. Over-the-counter securities, such as fixed-income instruments, with remaining maturities greater than 90 days are fair valued using price evaluations provided by a pricing service. In addition, the fair value of the wrap contract is calculated using the contract value of the GIC as of the balance sheet date, giving consideration to any contractually agreed-upon replacement fees charged by the wrap contract provider.

Investments in open-end, registered investment companies and collective investment funds are valued at the respective net asset values as reported.

Cash and Cash Equivalents

Cash and cash equivalents may include cash, noninterest-bearing deposits and time deposits with a maturity of three months or less. Cash equivalents may also include other instruments as described in the Trust Agreement.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the amounts of assets, liabilities, expenses and revenues reported in the financial statements. Actual results could differ materially from those estimated. The Fund applies investment company accounting and reporting guidance.

Investment Transactions and Related Investment Income

Investment transactions are accounted for on the date the investments are purchased or sold ("trade date"). Interest income is accrued on a daily basis. Dividend income and distributions to shareholders are recorded on the ex-dividend date. Distributions of net investment income are declared daily and paid monthly. The Fund offers multiple pricing options. Investment income of the Fund is allocated to each pricing option based on average daily net assets, without distinction between pricing options. Dividends are declared separately for each pricing option. Differences in dividend rates are generally due to differences in expenses between pricing options.

Unit Issues, Redemptions and Distributions

Participants may purchase units of the Fund daily based on the established unit value of \$10.00. Participants may redeem units of the Fund for the purpose of funding a bona fide benefit payment, making a Participant loan, honoring an employee-directed transfer of the employee's interest in the plan to another investment election that is a noncompeting investment, or paying Trustee fees. Participants may make withdrawals from the Fund for other purposes generally only upon 12 months' advance written notice to the Trustee. All Participants of the Fund have a proportionate undivided interest in all assets of the Fund. Net investment income is distributed to Participants monthly and is reinvested to purchase additional units.

Valuation of Units

The Fund attempts to maintain a stable price per unit of \$10.00; however, there can be no assurance that the value of the units in the Fund will not fluctuate. The principal value per unit of the Fund is determined at the end of each day by dividing net assets by the number of units outstanding.

Expenses

The Trust Agreement allows an annual management fee equal to the Participant's average net assets invested in the Y Pricing, R6 Pricing, Institutional Pricing, Institutional Service Pricing, Service Pricing and R Pricing. The management fee, which is accrued daily and paid on a monthly basis, is based on the following fee percentages:

Y Pricing	0.20%
R6 Pricing	0.25%
Institutional Pricing	0.30%
Institutional Service Pricing	0.55%
Service Pricing	0.55%
R Pricing	0.55%

The Trustee has agreed to pay normal operating expenses and legal fees of the Fund (but not expenses of registering the Fund or its units, if applicable, with any securities administrator, legal fees for litigation or transactions or other unanticipated or extraordinary expenses). Normal operating expenses do not include sub-accounting fees, if any, that will be charged to financial institutions.

A consulting services fee of 0.25% of average daily net assets is charged to the Participants in R Pricing. The Trustee will pay such fee, on behalf of the Participants, to entities that are not affiliated with the Trustee to perform various consulting services for the Participants. Additionally, R Pricing and Service Pricing Participants are charged a fee of 0.25% of average daily net assets for recordkeeping and administrative services, which is also paid by the Trustee out of the Fund's assets. Federated Shareholder Services Company (FSSC), an affiliate of the Trustee, will pay such fee, on behalf of Participants, to entities to perform recordkeeping and administrative services. The entities may be affiliated with FSSC or the Trustee only to the extent that an independent fiduciary for the Participants has approved such arrangement.

Federal Income Taxes

The Fund has obtained a determination letter from the Internal Revenue Service (IRS) stating that the Fund is a qualified group trust pursuant to IRS Revenue Ruling 81-100 and, therefore, the Fund is exempt from federal income tax under sections 401 and 501 of the Code.

As of and during the year ended December 31, 2021, the Fund did not have a liability for any uncertain tax positions. The Fund recognizes interest and penalties, if any, related to tax liabilities as income tax expense in the Statement of Operations. As of December 31, 2021, tax years 2018 through 2021 remain subject to examination by the Fund's major tax jurisdictions, which include the United States of America and the Commonwealth of Pennsylvania.

3. TRANSACTIONS WITH AFFILIATES

To assist in the management of the Fund, the Trustee has retained Federated Investment Counseling (FIC), a subsidiary of Federated Hermes and an affiliate of the Trustee, as the Fund's investment adviser. FIC's compensation is paid directly by the Trustee from its own resources and is not an incremental expense to the Fund. For the year ended December 31, 2021, FIC earned an investment advisory fee of \$4,213,509.

A portion of the Fund may be invested directly or indirectly in one or more mutual funds or collective investment funds advised, administered or distributed by an affiliate of the Trustee or for which the Trustee also serves as trustee ("Affiliated Funds"). To the extent that the Fund makes investments in Affiliated Funds, a fee will be charged, but a credit will be subtracted from such fee to reflect the investment advisory, administrative or other fees charged to assets in such Affiliated Funds. For the year ended December 31, 2021, the Trustee reimbursed \$273,711 in connection with investments in Affiliated Funds.

4. ADDITIONAL INFORMATION REGARDING INVESTMENT CONTRACTS

Nature of Investment Contracts

To accomplish the objective outlined in Note 1, the Fund invests primarily in stable value products, such as GICs (also known as traditional GICs) and synthetic GICs. A traditional GIC is a contract with an insurance company pursuant to which the Fund agrees to deposit money with the insurance company and the insurance company is contractually obligated to pay interest at a guaranteed rate for the life of the contract and return principal at maturity.

In a synthetic GIC, the Fund purchases one or more fixed-income securities, including mutual funds comprised of fixed-income securities, which are held and owned by the Fund on behalf of the Participants. The synthetic GICs in which the Fund invests may be managed by the Fund's adviser (internally managed) or by an investment adviser that is not affiliated with the Trustee (externally managed). In relation to externally managed GICs, the Fund's adviser performs oversight and approval functions. For synthetic GICs, the Fund then contracts with a high-quality financial institution such as an insurance company or bank to provide a minimum guaranteed rate of return on the fixed-income securities and payments for Participant withdrawals at contract value. The interest rate (also known as the crediting rate) is initially based on the yield of the underlying securities and changes based on the experience of the cash flow and market value of the underlying fixed-income securities.

Calculating the Interest Crediting Rate in Synthetic GICs

The key factors that influence future interest crediting rates for a synthetic GIC include:

- the level of market interest rates;
- the amount and timing of participant contributions, transfers and withdrawals into/out of the GIC;
- the investment returns generated by the fixed-income securities underlying the GIC; and

- the duration of the fixed-income securities underlying the GIC.

Interest crediting rates are typically reset on a monthly or quarterly basis according to each GIC. While there may be slight variations from one to another, most use a formula that is based on the characteristics of the underlying portfolio of fixed-income securities:

$$CR = [(1 + YTM) \times (MV/CV)^{1/Dur} - 1] - F$$

Where:

CR = Contract interest crediting rate

YTM = Yield to maturity of fixed-income securities

MV = Market value of fixed-income securities

CV = Contract value (principal plus accrued interest)

Dur = Duration of the portfolio

F = Wrapper contract fees

Because changes in market interest rates affect the yield to maturity and the fair value of the underlying fixed-income securities, they can have a material impact on the interest crediting rate. In addition, Participant withdrawals and transfers from the Fund are paid at contract value but may be funded through the fair value liquidation of the underlying fixed-income securities, which could impact the interest crediting rate. The resulting gains and losses in the fair value of the underlying fixed-income securities relative to the contract are in the Fund's Statement of Assets and Liabilities as the "Adjustment from Fair Value to Contract Value." If the Adjustment from Fair Value to Contract Value is positive for a given contract, this indicates that the contract value is greater than the fair value of the underlying fixed-income securities. The embedded fair value losses will be amortized in the future through a lower interest crediting rate than would otherwise be the case. If the Adjustment from Fair Value to Contract Value is negative, this indicates that the contract value is less than the fair value of the underlying fixed-income securities. The amortization of the embedded fair value gains will cause the future interest crediting rate to be higher than it otherwise would have been.

All synthetic GICs provide for a minimum interest crediting rate of zero percent, which is intended to protect Participants' principal and accrued interest.

Events That Limit the Ability of the Fund to Transact at Contract Value

In certain circumstances, the amount withdrawn from the GIC would be payable at fair value rather than at contract value. These circumstances may include, but are not limited to, the following: mergers, mass layoffs, plan terminations, implementation of early retirement incentive programs or other events not within the control of the Fund resulting in a material and adverse financial impact on the issuer's obligations under the GIC.

Based on prior experience, the Trustee believes that it is not probable that such circumstances would be of sufficient magnitude to limit the ability of the Fund to transact at contract value with Participants. Of course, there can be no guarantee that this will be the case.

Issuer-Initiated Contract Termination

The GICs into which the Fund has entered limit the circumstances under which the issuer may unilaterally terminate the GIC on short notice. These circumstances may include, but are not limited to, the following: (1) the Fund loses its qualified status under the Code or is otherwise terminated; (2) the Trustee fails to meet its material obligations under the GIC, attempts to assign the GIC or engages in fraud or misrepresentation that materially affects the risk profile of the GIC; or (3) if the fixed-income securities underlying the synthetic GIC fail to meet certain criteria as specified in each GIC. If one of these events were to occur, the issuer could terminate the synthetic GIC at the market value of the underlying fixed-income securities (or in the case of a traditional GIC, at the hypothetical market value based upon a contractual formula).

Addendum to the Statement of Assets and Liabilities

Adjustment from fair value to contract value at 12/31/2020	\$(143,819,121)
Change in the difference between fair value and contract value of all fully benefit-responsive investment contracts	79,996,956
Change in the fully benefit-responsive status of the investment contracts	—
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE AT 12/31/2021	\$ (63,822,165)
Ratio of year end market value yield to investments (at fair value)	1.77%
Ratio of year end crediting rate to investments (at fair value)	1.69%

Sensitivity Analysis

As market interest rates change, synthetic GICs adjust their crediting rate to reflect the earnings of their underlying fixed income securities. If interest rates move up or down, the fair value of the underlying fixed-income securities changes: rising rates cause the fair value of the fixed-income securities to decrease and vice versa. The resulting difference between fair value and contract value is reflected in the crediting rate of the GIC, which adjusts according to its reset schedule.

The following Sensitivity Analysis ("Analysis") illustrates what the impact of immediate hypothetical increases and decreases in market yields would be on the weighted-average crediting rate of the Fund's synthetic GICs. At December 31, 2021, synthetic GICs accounted for 91.6% of the Fund's total net assets. In the Analysis, market rates are assumed to rise and fall by 25% and 50% of the year-end market interest rate. The first scenario assumes no participant withdrawals, and the second illustrates the impact of an immediate, one-time 10% decrease in the net assets of the Fund due to participant withdrawals.

The Analysis shows that the weighted-average crediting rate moves in the direction of the corresponding market rate. The 10% withdrawal scenario shows how the withdrawal amplifies the magnitude of the change, but not the process of moving toward the market rate.

Aggregate market value/book value ratio at December 31, 2021	101.84%
Weighted-average portfolio market yield at December 31, 2021	1.05%
Weighted-average crediting rate (gross) at December 31, 2021	1.98%
Weighted-average crediting rate (net) at December 31, 2021	1.79%
Weighted-average portfolio duration (in yrs.) at December 31, 2021	2.00

	Asset Withdrawal	Hypothetical Immediate Interest Rate Change (Percent of Current Market Yield)				
		-50%	-25%	0%	+25%	+50%
Market Yield		0.52%	0.79%	1.05%	1.31%	1.57%
Immediate Crediting Rate Reset	0%	1.79%	1.79%	1.79%	1.79%	1.79%
	10%	1.97%	1.94%	1.91%	1.88%	1.85%
Reset End of 1 st Quarter	0%	1.64%	1.68%	1.71%	1.74%	1.77%
	10%	1.79%	1.80%	1.82%	1.81%	1.81%
Reset End of 2 nd Quarter	0%	1.50%	1.57%	1.63%	1.69%	1.75%
	10%	1.63%	1.67%	1.72%	1.75%	1.78%
Reset End of 3 rd Quarter	0%	1.38%	1.47%	1.55%	1.64%	1.73%
	10%	1.49%	1.56%	1.63%	1.69%	1.76%
Reset End of 4 th Quarter	0%	1.27%	1.38%	1.49%	1.60%	1.71%
	10%	1.36%	1.46%	1.56%	1.64%	1.73%

5. OTHER MATTERS

An outbreak of respiratory disease caused by a novel coronavirus was first detected in China in late 2019 and subsequently spread globally. As of the date of the issuance of these financial statements, this coronavirus has resulted in closing borders, enhanced health screenings, disruptions to healthcare service preparation and delivery, quarantines, cancellations, and disruptions to supply chains, workflow operations and consumer activity, as well as general concern and uncertainty. The impact of this coronavirus may continue for an extended period of time and has resulted in substantial economic volatility. Health crises caused by outbreaks, such as the coronavirus outbreak, may exacerbate other pre-existing political, social and economic risks. The impact of this outbreak, and other epidemics and pandemics that may arise in the future, could continue to negatively affect the worldwide economy, as well as the economies of individual countries, individual companies (including certain Fund service providers and issuers of the Fund's investments) and the markets in general in significant and unforeseen ways. Any such impact could adversely affect the Fund's performance.

6. SUBSEQUENT EVENTS

Management has evaluated subsequent events through March 30, 2022, the date the financial statements were available for issue, and determined that no events have occurred that require additional disclosure.

Schedule I – Investments Purchased

Year Ended December 31, 2021

Principal	Description	Cost
	SYNTHETIC GUARANTEED INVESTMENT CONTRACTS	
	Massachusetts Mutual Life Insurance Company:	
\$ 25,000,000	2.48% ^(a)	\$ 25,000,000
	New York Life Insurance Company:	
25,000,000	1.68% ^(a)	25,000,000
	TOTAL SYNTHETIC GUARANTEED INVESTMENT CONTRACTS	50,000,000
	COLLECTIVE INVESTMENT FUND	
589,173,913	Federated Hermes Prime Cash Collective Investment Fund, R6 Class, 0.00% ^(b)	589,173,913
	TOTAL INVESTMENTS PURCHASED	\$639,173,913

(a) Floating rate security with rate at time of purchase shown.

(b) 7-Day net yield at December 31, 2021.

Schedule II – Investments Sold, Matured or Redeemed

Year Ended December 31, 2021

Principal	Description	Cost	Proceeds	Gain/Loss
TRADITIONAL GUARANTEED INVESTMENT CONTRACTS				
Prudential Insurance Company of America:				
\$ 10,000,000	2.24%, due 6/30/2021	\$ 10,000,000	\$ 10,000,000	—
10,000,000	2.27%, due 9/30/2021	10,000,000	10,000,000	—
10,000,000	2.29%, due 12/31/2021	10,000,000	10,000,000	—
United of Omaha Life Insurance Company:				
10,000,000	0.63% ^(a) , due 6/01/2021	10,000,000	10,000,000	—
10,000,000	0.71% ^(a) , due 2/01/2021	10,000,000	10,000,000	—
	TOTAL TRADITIONAL GUARANTEED INVESTMENT CONTRACTS	50,000,000	50,000,000	—
SYNTHETIC GUARANTEED INVESTMENT CONTRACTS				
Metropolitan Tower Life Insurance Company:				
200,000,000	1.91% ^(a) 5/20/2021	200,000,000	200,000,000	—
Prudential Insurance Company of America:				
75,000,000	1.98% ^(a) 11/18/2021	75,000,000	75,000,000	—
75,000,000	2.00% ^(a) 9/30/2021	75,000,000	75,000,000	—
	TOTAL SYNTHETIC GUARANTEED INVESTMENT CONTRACTS	350,000,000	350,000,000	—
COLLECTIVE INVESTMENT FUND				
858,178,973	Federated Hermes Prime Cash Collective Investment Fund, R6 Class, 0.00% ^(b)	858,178,973	858,178,973	—
	TOTAL INVESTMENTS SOLD, MATURED OR REDEEMED	\$1,258,178,973	\$1,258,178,973	—

(a) Floating rate security with rate at time of maturity shown.

(b) 7-Day net yield at December 31, 2021.



Federated Hermes Capital Preservation Fund
Federated Hermes Funds
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