

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
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>TELADOC HEALTH 401(K) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/2013</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/2013</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/2013</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>TELADOC HEALTH, INC.</u> <u>2 MANHATTANVILLE ROAD</u> <u>SUITE 203</u> <u>PURCHASE, NY 10577</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>04-3705970</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>844-798-3810</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>621111</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>04-3705970</u>	2c Plan Sponsor's telephone number <u>844-798-3810</u>	2d Business code (see instructions) <u>621111</u>	
2b Employer Identification Number (EIN) <u>04-3705970</u>					
2c Plan Sponsor's telephone number <u>844-798-3810</u>					
2d Business code (see instructions) <u>621111</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2022	ARNNON GESHURI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	1697
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	1444
a(2) Total number of active participants at the end of the plan year		6a(2)	2720
b Retired or separated participants receiving benefits.....		6b	3
c Other retired or separated participants entitled to future benefits		6c	609
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	3332
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	1
f Total. Add lines 6d and 6e		6f	3333
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	2900
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	20
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2G 2E 2F 2J 2K 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) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan TELADOC HEALTH 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TELADOC HEALTH, INC.	D Employer Identification Number (EIN) 04-3705970

Part I

Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a

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

☒ Yes

☐ No

b

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

(b)	Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	
04-2647786	
(b)	Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	225670	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

AMERIPRISE FINANCIAL SERVICES INC

38-2722519

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	185044	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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AS SPL MID CAP VAL A - DST ASSET M 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.30%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
C&S REAL ESTATE A - DST ASSET MANA 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.20%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
CALAMOS GRTH & INC I - U.S. BANK G 615 EAST MICHIGAN STREET MILWAUKEE, WI 53202	0.25%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COL CONTRARN CORE A - COLUMBIA MGT 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
EV ATL CAP SMID-CP A - BNY MELLON 301 BELLEVUE PARKWAY WILMINGTON, DE 19809	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
INVS DEVELOP MKT A - INVESCO INVES 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
INVS DIVRS DIVIDND A - INVESCO INV 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
J H TRITON S - JANUS HENDERSON SER 151 DETROIT STREET, DENVER, CO 80206	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JHANCOCK INTL GR R2 - JOHN HANCOCK	0.25%	
01-0233346		

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LD ABT HIGH YIELD R4 - DST SYSTEMS 43-1581814	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
MSIF GROWTH I - DST ASSET MANAGER 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
NATIXIS US EQ OPP A - DST ASSET MA 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.30%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
NUVEEN SM CP VAL A - DST ASSET MAN 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PGIM TOTAL RTN BD A - PRUDENTIAL M 22-3703799	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PIM REAL RETURN A - DST ASSET MANA 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.20%	

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TMPL GLOBAL BOND A - FRANKLIN TEMP 94-3167260	0.25%

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

(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
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(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:	SUMMIT CPA GROUP	b EIN:	11-3730017
c Position:	AUDITOR		
d Address:	9809 DAWN'S CREEK BLVD FORT WAYNE, IN 46825	e Telephone:	

Explanation: WE MOVED TO A NEW BIGGER AUDITOR THIS YEAR AS WE ARE GROWING AS A COMPANY.

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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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 TELADOC HEALTH 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 TELADOC HEALTH, INC.		
D Employer Identification Number (EIN) 04-3705970		

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	3	7
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	260883	596443
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	857775	1479445
(9) Value of interest in common/collective trusts.....	1c(9)	559589	1869430
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	73247529	163058023
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	74925779	167003348

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	74925779	167003348
---	-----------	----------	-----------

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)	10970824	
(B) Participants	2a(1)(B)	24880906	
(C) Others (including rollovers).....	2a(1)(C)	6444571	
(2) Noncash contributions.....	2a(2)	0	42296301
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	59	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	59503	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		59562
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	6497571
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	6497571	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		6497571
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	0
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	0
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		16282
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		12292799
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		61162515
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	15311330	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		15311330
f Corrective distributions (see instructions).....	2f		10783
g Certain deemed distributions of participant loans (see instructions).....	2g		2435
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other.....	2i(4)	410715	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		410715
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		15735263
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		45427252
l Transfers of assets:			
(1) To this plan.....	2l(1)		46650317
(2) From this plan.....	2l(2)		0

Part III Accountant's Opinion

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

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

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

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

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: BDO USA LLP

(2) EIN: 13-5381590

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		244390

	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		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n		X	
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.			
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)			
5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)	
5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.			

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan TELADOC HEALTH 401(K) PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 TELADOC HEALTH, INC.	D Employer Identification Number (EIN) 04-3705970

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

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

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

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

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

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

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

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

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

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

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

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

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

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

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

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

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

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

Teladoc Health 401(k) Plan

**Financial Statements
and Supplemental Schedules**
As of December 31, 2021 and 2020
and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

Financial Statements and Supplemental Schedules

As of December 31, 2021 and 2020 and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

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Independent Auditor's Report

The Plan Administrator
Teladoc Health 401(k) Plan
Purchase, New York

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

We have performed an audit of the financial statements of the Teladoc Health 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year 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 (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). 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 (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from a qualified institution as of December 31, 2021, and for the year then ended, stating that the certified investment information, as described in Note 8 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

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

- 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 (U.S. GAAP).
- The certified investment information in the accompanying 2021 financial statements agrees to, or is derived from, in all material respects, the information prepared and certified by a qualified 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 (U.S. 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 the 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 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, 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 the Plan's ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

Management is responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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 2021 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 U.S. 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 2021 financial statements.



In performing an audit in accordance with U.S. GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the 2021 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 2021 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 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 2021 financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the 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 U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2021 financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

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 Matter - 2021 Supplemental Schedules Required by ERISA

The supplemental Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2021 and Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2021 are presented for purposes of additional analysis and are not required parts of the 2021 financial statements but are supplementary information required by the DOL'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 2021 financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, have been subjected to auditing procedures applied in the audit of the 2021 financial statements and to certain additional procedures, including comparing and reconciling such information directly to the underlying



accounting and other records used to prepare the 2021 financial statements or to the 2021 financial statements themselves, and other additional procedures in accordance with U.S. GAAS. For information included in the supplemental schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

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

Other Matter - Report on the 2020 Financial Statements

The financial statements of the Plan as of December 31, 2020 were audited by predecessor auditors and comprise the statement of net assets available for benefits as of December 31, 2020. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the qualified institution. Their audit report, dated October 5, 2021, indicated that (a) because of the significance of the information that they did not audit, they were not able to obtain sufficient appropriate audit evidence to provide a basis for an opinion and, accordingly, they 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 information certified by the qualified institution, were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

BDO USA, LLP

October 17, 2022

Financial Statements

Teladoc Health 401(k) Plan

Statements of Net Assets Available for Benefits

<i>December 31,</i>	2021	2020
Assets		
Investments, at fair value	\$ 165,523,896	\$ 74,068,001
Receivables:		
Employee contributions	690,787	297,800
Employer contributions	1,678,413	565,643
Notes receivable from participants	1,479,445	857,775
Accrued income	7	3
Total Receivables	3,848,652	1,721,221
Net Assets Available for Benefits	\$ 169,372,548	\$ 75,789,222

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2021

Additions

Investment income:

Net appreciation in fair value of investments \$ 12,292,858

Interest and dividend income 6,513,853

Total Investment Income 18,806,711

Interest income on notes receivable from participants 59,503

Contributions:

Participant 25,273,893

Employer 12,083,594

Rollover 6,444,571

Total Contributions 43,802,058

Total Additions 62,668,272

Deductions

Benefit payments 15,322,113

Deemed distributions of participant loans 2,435

Administrative expenses 410,715

Total Deductions 15,735,263

Increase in Net Assets 46,933,009

Transfer of Assets, to this Plan 46,650,317

Net Assets Available for Benefits, beginning of year 75,789,222

Net Assets Available for Benefits, end of year \$ 169,372,548

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

1. Plan Description

The following brief description of the Teladoc Health 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 defined contribution plan covering all eligible employees, as defined in the Plan document, of Teladoc Health, Inc. (the Company or Employer). The Plan was established effective January 1, 2013, for all employees except for those covered under a collective-bargaining agreement and non-resident alien employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Transfer of Assets

On December 17, 2020, the Company approved the merger of the Livongo Health Inc 401(k) Profit Sharing Plan and Trust into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the Livongo Health Inc 401(k) Profit Sharing Plan and Trust amounting to \$30,240,103 were transferred into the Plan on January 4, 2021.

On December 16, 2020, the Company approved the merger of the InTouch Health 401(k) Retirement Plan into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the InTouch Health 401(k) Retirement Plan amounting to \$16,410,214 were transferred into the Plan on January 13, 2021.

Eligibility

All employees who are age 21 or older with a minimum of three consecutive months of service may elect to enter the Plan. In general, covered employees may enter the Plan on the first day of each Plan year and the first day of the quarter following the date on which they satisfy the eligibility requirements.

Participation

Participants are eligible to contribute and receive Employer matching, Employer non-elective, and profit-sharing contributions after completing three months of eligibility service requirements.

Contributions

Each year, participants may contribute from pre-tax eligible earnings, as defined in the Plan. Participants who have attained age 50 during a calendar year are eligible to make catch-up contributions at any time during that calendar year. Participants also may contribute amounts from other eligible retirement plans (rollover), as defined in the Plan. Contributions are subject to certain annual limitations as imposed by the Internal Revenue Code (IRC).

The Plan allows for Safe Harbor Company matching contributions up to 4% of compensation. All participants are eligible for Safe Harbor matching contributions; however, they must have

Teladoc Health 401(k) Plan

Notes to Financial Statements

completed a minimum of three months of eligibility service requirements during the Plan year or be employed on the last day of the Plan year.

The Plan also allows for a qualified non-elective contribution to non-highly compensated employees. This contribution would be allocated proportionally to participants based upon total compensation and would be paid as of the last day of the Plan year. For Plan years ending December 31, 2021 and 2020, there were no qualified non-elective Employer contributions. The Employer contributions are invested as directed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions, the Employer's contributions, and the allocations of Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investment of their account balances into various investment options offered by the Plan.

Vesting

Participants are immediately vested in their contributions, including rollover contributions and Employer safe harbor matching contributions plus actual earnings thereon.

Participants are fully vested in non-elective Employer contributions after three years of vesting service.

Participants who merged into the Plan from the InTouch Health 401(k) Retirement Plan are vested for discretionary profit sharing and discretionary match, as follows:

Years	Vesting (%)
Less than 1	-
1 but less than 2	25
2 but less than 3	50
3 but less than 4	75
4 or more	100

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are vested for discretionary profit sharing, as follows:

Years	Vesting (%)
Less than 2	-
2 but less than 3	20
3 but less than 4	40
4 but less than 5	60
5 but less than 6	80
6 or more	100

Teladoc Health 401(k) Plan

Notes to Financial Statements

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are immediately vested in discretionary match.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and must be repaid in level payments through payroll deductions over a period no longer than five years, unless the loans were used to purchase a primary residence, in which case the loan terms may not exceed 30 years. The loans bear interest at rates that are based on other lenders' rates for similar loans.

Payment of Benefits

On termination of service due to death, disability, retirement, or other reasons, a participant may receive installments or a lump-sum distribution equal to the value of the participant's vested interest in their account. The Plan will make a mandatory distribution following termination from employment to the extent that the participant's accumulated benefit does not exceed the mandatory distribution amount of \$5,000. In addition, the Plan allows for hardship distributions if certain criteria are met.

Forfeited Accounts

Non-vested portions of participant accounts, if any, are forfeited upon termination of employment. Forfeited accounts may be used to pay expenses under the Plan, or to reduce Employer contributions at the discretion of the Company. The balance in the forfeiture account as of December 31, 2021 and 2020 totaled \$153,694 and \$27,663, respectively. Forfeitures of \$25,814 were used during 2021 to pay administrative expenses.

2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and conform to accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's management determines the Plan's valuation policies utilizing information provided by the custodian. See Note 3 for a discussion of fair value measurements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the gains and losses on investments bought and sold, as well as held during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. Interest income is recorded on the accrual basis. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in the net appreciation of the fair value of the investments.

3. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

Level 1 - This level consists of inputs to the valuation methodology that are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - This level consists of inputs to the methodology that 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 and corroborated by observable market data by correlation or other means.

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

Level 3 - This level consists of inputs to the valuation methodology that are unobservable and significant to the fair value measurement.

Teladoc Health 401(k) Plan

Notes to Financial Statements

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 observable inputs and minimize the use of unobservable inputs.

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

Money Market Funds - Money market funds are valued based on quoted prices in active markets for identical securities.

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

Stable Value Collective Trust Fund - Stable Value Collective Trust Funds are valued at the NAV of the units of the Fidelity Advisor Stable Value Fund. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. There are no participant redemption restrictions or notice periods for these investments. There were no unfunded commitments as of December 31, 2021 and 2020.

This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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's management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020. Classification within the fair value hierarchy tables is based on the lowest level of any input that is significant to the fair value measurement.

December 31, 2021

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 596,443	\$ 596,443	\$ -	\$ -
Mutual funds	163,058,023	163,058,023	-	-
Total Investments, at fair value	163,654,466	163,654,466	-	-
Common/collective trusts, at NAV*	1,869,430	-	-	-
Total Assets, at fair value	\$ 165,523,896	\$ 163,654,466	\$ -	\$ -

Teladoc Health 401(k) Plan

Notes to Financial Statements

December 31, 2020

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 260,883	\$ 260,883	\$ -	\$ -
Mutual funds	73,247,529	73,247,529	-	-
Total Investments, at fair value	73,508,412	73,508,412	-	-
Common/collective trusts, at NAV*	559,589	-	-	-
Total Assets, at fair value	\$ 74,068,001	\$ 73,508,412	\$ -	\$ -

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

4. Related Party and Party-in-Interest Transactions

Certain Plan investments are managed by Fidelity Management Trust Company, the custodian as defined by the Plan, and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment manager services are included in net appreciation in fair value of the investments. Additionally, the Plan issues loans to participants, which are secured by the participants' account balances. These transactions qualify as party-in-interest transactions. Certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

5. Plan Termination

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

6. Tax Status

Effective July 22, 2021, the Plan adopted the FMR LLC Non-Standardized Pre-Approved Profit Sharing Plan with Cash or Deferred Arrangement. The Internal Revenue Service (IRS) has determined and informed FMR LLC by a letter dated June 30, 2020, that the Plan is designed in accordance with applicable sections of the IRC. Previously, the Plan adopted a volume-submitter 401(k) plan document sponsored by Fidelity Management Trust Company and covered by an IRS advisory letter dated March 31, 2014, affirming that the form of the volume-submitter plan document is designed in accordance with the applicable sections of the IRC. The Plan itself has not received a determination letter from the IRS. However, the Plan administrator believes the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes the Plan meets the requirements of IRC Section 401(k).

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

Teladoc Health 401(k) Plan

Notes to Financial Statements

7. 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.

8. Information Certified by the Custodian

The Plan administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Fidelity Management Trust Company, a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Total investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefit as of December 31, 2021 and 2020.
- Net appreciation in fair value of investments, dividend and interest income, and interest income on notes receivable from participants reflected on the accompanying statement of changes in net assets available for benefit for the year ended December 31, 2021.
- Investments reflected on the supplemental Schedule of Assets (Held at End of Year).

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedule.

9. Reconciliation of Financial Statements

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

<i>December 31,</i>	2021	2020
Net Assets Available for Benefits , per the financial statements	\$ 169,372,548	\$ 75,789,222
Less: contributions receivables	(2,369,200)	(863,443)
Net Assets Available for Benefits , per the Form 5500	\$ 167,003,348	\$ 74,925,779

The following is a reconciliation of contributions per the financial statements to the Form 5500:

Year ended December 31, 2021

Contributions , per the financial statements	\$ 43,802,058
Add: contributions receivable 2020	863,443
Less: contributions receivable 2021	(2,369,200)
Contributions , per the Form 5500	\$ 42,296,301

Teladoc Health 401(k) Plan

Notes to Financial Statements

10. Late Remittances

During the year ended December 31, 2021, there were employee withholdings in the amount of \$244,390 that were not remitted to the Plan within the appropriate time period by the Company. These transactions constitute prohibited transactions as defined by ERISA. The Company is in the process of taking corrective action.

11. Subsequent Events

There have been no material subsequent events that occurred through October 17, 2022 that would require disclosure in these financial statements as of or for the year ended December 31, 2021.

ERISA-Required Supplemental Schedules

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions

EIN: 04-3705970

Plan No.: 001

Year ended December 31, 2021

	Participant Contributions Transferred Late to Plan	Total That Constitutes Nonexempt Prohibited Transactions			Contributions Pending Correction in VFCP*	Total Fully Corrected Under VFCP* and PTE 2002-51
		Contributions Not Corrected	Contributions Corrected Outside VFCP*			
Check here if late participant loan repayments are included: ☒						
2021	\$ 244,390	\$ 244,390	\$ -	\$ -	\$ -	\$ -

* Voluntary Fiduciary Correction Program (DOL)

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
EIN: 04-3705970 **Plan No.: 001**

December 31, 2021

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value	
Common Collective Trust				
* Fidelity Investments	Fidelity Advisor Stable Value Fund	** \$	1,869,430	
Mutual Funds				
Allspring Global Investments	Allspring Special Mid Cap Value Fund- Class A	**	1	
Allspring Global Investments	Allspring Special Mid Cap Value Fund R6	**	1,294,928	
American Funds	American Funds American Mutual Fund R6	**	1,570,321	
American Funds	American Funds Small Cap World Fund R6	**	824,708	
Ariel Investments	Ariel Fund Institutional Class	**	128,155	
Calamos Investments	Calamos Growth & Income Fund Institutional Class	**	492,222	
Calvert Investments	Calvert Us Large Cap Core Responsible Index Fund (R6)	**	200,661	
Cohen & Steers	Cohen & Steers Real Estate Fund Z	**	931,058	
Eaton Vance	Eaton Vance Atlanta Capital Smid Cap Fund R6	**	2,903,709	
* Fidelity Investments	Fidelity 500 Index Fund	**	20,596,174	
* Fidelity Investments	Fidelity Advisor Freedom 2030 Fund Class A	**	8	
* Fidelity Investments	Fidelity Advisor Freedom 2035 Fund Class A	**	1	
* Fidelity Investments	Fidelity Advisor Freedom 2040 Fund Class A	**	22	
* Fidelity Investments	Fidelity Advisor Technology Fund Z	**	3,579,849	
* Fidelity Investments	Fidelity Extended Market Index Fund	**	4,456,882	
* Fidelity Investments	Fidelity Freedom Index 2005 Fund Investor	**	399,450	
* Fidelity Investments	Fidelity Freedom Index 2010 Fund Investor	**	192,309	
* Fidelity Investments	Fidelity Freedom Index 2015 Fund Investor	**	332,771	
* Fidelity Investments	Fidelity Freedom Index 2020 Fund Investor	**	1,436,723	
* Fidelity Investments	Fidelity Freedom Index 2025 Fund Investor	**	8,110,357	
* Fidelity Investments	Fidelity Freedom Index 2030 Fund Investor	**	10,953,644	
* Fidelity Investments	Fidelity Freedom Index 2035 Fund Investor	**	14,190,446	
* Fidelity Investments	Fidelity Freedom Index 2040 Fund Investor	**	16,546,847	
* Fidelity Investments	Fidelity Freedom Index 2045 Fund Investor	**	14,943,847	
* Fidelity Investments	Fidelity Freedom Index 2050 Fund Investor	**	14,978,610	
* Fidelity Investments	Fidelity Freedom Index 2055 Fund Investor	**	11,669,006	
* Fidelity Investments	Fidelity Freedom Index 2060 Fund Investor	**	4,499,133	
* Fidelity Investments	Fidelity Freedom Index 2065 Fund Investor	**	535,489	
* Fidelity Investments	Fidelity Freedom Index Income Investor	**	1,139,557	
* Fidelity Investments	Fidelity International Index Fund	**	2,649,493	
* Fidelity Investments	Fidelity Small Cap Index Fund	**	1,852,876	
* Fidelity Investments	Fidelity Us Bond Index Fund	**	1,999,877	
First Eagle Investment Management	First Eagle Global Fund R6	**	468,187	
Franklin Templeton	Templeton Global Bond Fund	**	246,115	
Invesco	Invesco Developing Markets Fund R6	**	1,211,949	
Janus Henderson	Janus Henderson Triton Fund N	**	2,517,475	
John Hancock Investment Management	John Hancock International Growth Fund	**	1,113,800	
Lord Abbett	Lord Abbett High Yield Fund R6	**	960,312	
Massachusetts Financial Services	Mfs International Diversions Fund R6	**	425,769	
Morgan Stanley	Msif Growth Fund I	**	9,827,493	
Natixis Investment Managers	Natixis U.S. Equity Opportunities Fund Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class R6	**	1,810,949	
PIMCO	Pimco Real Return Fund	**	1,066,836	
Total Mutual Funds				163,058,023

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 04-3705970 Plan No.: 001

December 31, 2021

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value
Money Market Funds				
*	Fidelity Investments	Fidelity Government Money Market Fund	**	\$ 6,943
*	Fidelity Investments	Fidelity Short Term Investment Fund	**	589,500
Total Money Market Funds				596,443
Total Investments, per financial statements				165,523,896
*	Participant Loans	Interest rates of 4.00% to 7.00%, maturing at various dates through 2030.	-	1,479,445
Total				\$ 167,003,341

* A party-in-interest, as defined by ERISA.

** The cost of participant-directed investments is not required to be disclosed.

Teladoc Health 401(k) Plan

**Financial Statements
and Supplemental Schedules**
As of December 31, 2021 and 2020
and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

Financial Statements and Supplemental Schedules

As of December 31, 2021 and 2020 and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

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Independent Auditor's Report

The Plan Administrator
Teladoc Health 401(k) Plan
Purchase, New York

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

We have performed an audit of the financial statements of the Teladoc Health 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year 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 (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). 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 (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from a qualified institution as of December 31, 2021, and for the year then ended, stating that the certified investment information, as described in Note 8 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

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

- 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 (U.S. GAAP).
- The certified investment information in the accompanying 2021 financial statements agrees to, or is derived from, in all material respects, the information prepared and certified by a qualified 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 (U.S. 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 the 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 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, 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 the Plan's ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

Management is responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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 2021 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 U.S. 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 2021 financial statements.



In performing an audit in accordance with U.S. GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the 2021 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 2021 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 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 2021 financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the 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 U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2021 financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

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 Matter - 2021 Supplemental Schedules Required by ERISA

The supplemental Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2021 and Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2021 are presented for purposes of additional analysis and are not required parts of the 2021 financial statements but are supplementary information required by the DOL'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 2021 financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, have been subjected to auditing procedures applied in the audit of the 2021 financial statements and to certain additional procedures, including comparing and reconciling such information directly to the underlying



accounting and other records used to prepare the 2021 financial statements or to the 2021 financial statements themselves, and other additional procedures in accordance with U.S. GAAS. For information included in the supplemental schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

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

Other Matter - Report on the 2020 Financial Statements

The financial statements of the Plan as of December 31, 2020 were audited by predecessor auditors and comprise the statement of net assets available for benefits as of December 31, 2020. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the qualified institution. Their audit report, dated October 5, 2021, indicated that (a) because of the significance of the information that they did not audit, they were not able to obtain sufficient appropriate audit evidence to provide a basis for an opinion and, accordingly, they 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 information certified by the qualified institution, were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

BDO USA, LLP

October 17, 2022

Financial Statements

Teladoc Health 401(k) Plan

Statements of Net Assets Available for Benefits

<i>December 31,</i>	2021	2020
Assets		
Investments, at fair value	\$ 165,523,896	\$ 74,068,001
Receivables:		
Employee contributions	690,787	297,800
Employer contributions	1,678,413	565,643
Notes receivable from participants	1,479,445	857,775
Accrued income	7	3
Total Receivables	3,848,652	1,721,221
Net Assets Available for Benefits	\$ 169,372,548	\$ 75,789,222

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2021

Additions

Investment income:

Net appreciation in fair value of investments \$ 12,292,858

Interest and dividend income 6,513,853

Total Investment Income 18,806,711

Interest income on notes receivable from participants 59,503

Contributions:

Participant 25,273,893

Employer 12,083,594

Rollover 6,444,571

Total Contributions 43,802,058

Total Additions 62,668,272

Deductions

Benefit payments 15,322,113

Deemed distributions of participant loans 2,435

Administrative expenses 410,715

Total Deductions 15,735,263

Increase in Net Assets 46,933,009

Transfer of Assets, to this Plan 46,650,317

Net Assets Available for Benefits, beginning of year 75,789,222

Net Assets Available for Benefits, end of year \$ 169,372,548

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

1. Plan Description

The following brief description of the Teladoc Health 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 defined contribution plan covering all eligible employees, as defined in the Plan document, of Teladoc Health, Inc. (the Company or Employer). The Plan was established effective January 1, 2013, for all employees except for those covered under a collective-bargaining agreement and non-resident alien employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Transfer of Assets

On December 17, 2020, the Company approved the merger of the Livongo Health Inc 401(k) Profit Sharing Plan and Trust into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the Livongo Health Inc 401(k) Profit Sharing Plan and Trust amounting to \$30,240,103 were transferred into the Plan on January 4, 2021.

On December 16, 2020, the Company approved the merger of the InTouch Health 401(k) Retirement Plan into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the InTouch Health 401(k) Retirement Plan amounting to \$16,410,214 were transferred into the Plan on January 13, 2021.

Eligibility

All employees who are age 21 or older with a minimum of three consecutive months of service may elect to enter the Plan. In general, covered employees may enter the Plan on the first day of each Plan year and the first day of the quarter following the date on which they satisfy the eligibility requirements.

Participation

Participants are eligible to contribute and receive Employer matching, Employer non-elective, and profit-sharing contributions after completing three months of eligibility service requirements.

Contributions

Each year, participants may contribute from pre-tax eligible earnings, as defined in the Plan. Participants who have attained age 50 during a calendar year are eligible to make catch-up contributions at any time during that calendar year. Participants also may contribute amounts from other eligible retirement plans (rollover), as defined in the Plan. Contributions are subject to certain annual limitations as imposed by the Internal Revenue Code (IRC).

The Plan allows for Safe Harbor Company matching contributions up to 4% of compensation. All participants are eligible for Safe Harbor matching contributions; however, they must have

Teladoc Health 401(k) Plan

Notes to Financial Statements

completed a minimum of three months of eligibility service requirements during the Plan year or be employed on the last day of the Plan year.

The Plan also allows for a qualified non-elective contribution to non-highly compensated employees. This contribution would be allocated proportionally to participants based upon total compensation and would be paid as of the last day of the Plan year. For Plan years ending December 31, 2021 and 2020, there were no qualified non-elective Employer contributions. The Employer contributions are invested as directed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions, the Employer's contributions, and the allocations of Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investment of their account balances into various investment options offered by the Plan.

Vesting

Participants are immediately vested in their contributions, including rollover contributions and Employer safe harbor matching contributions plus actual earnings thereon.

Participants are fully vested in non-elective Employer contributions after three years of vesting service.

Participants who merged into the Plan from the InTouch Health 401(k) Retirement Plan are vested for discretionary profit sharing and discretionary match, as follows:

Years	Vesting (%)
Less than 1	-
1 but less than 2	25
2 but less than 3	50
3 but less than 4	75
4 or more	100

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are vested for discretionary profit sharing, as follows:

Years	Vesting (%)
Less than 2	-
2 but less than 3	20
3 but less than 4	40
4 but less than 5	60
5 but less than 6	80
6 or more	100

Teladoc Health 401(k) Plan

Notes to Financial Statements

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are immediately vested in discretionary match.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and must be repaid in level payments through payroll deductions over a period no longer than five years, unless the loans were used to purchase a primary residence, in which case the loan terms may not exceed 30 years. The loans bear interest at rates that are based on other lenders' rates for similar loans.

Payment of Benefits

On termination of service due to death, disability, retirement, or other reasons, a participant may receive installments or a lump-sum distribution equal to the value of the participant's vested interest in their account. The Plan will make a mandatory distribution following termination from employment to the extent that the participant's accumulated benefit does not exceed the mandatory distribution amount of \$5,000. In addition, the Plan allows for hardship distributions if certain criteria are met.

Forfeited Accounts

Non-vested portions of participant accounts, if any, are forfeited upon termination of employment. Forfeited accounts may be used to pay expenses under the Plan, or to reduce Employer contributions at the discretion of the Company. The balance in the forfeiture account as of December 31, 2021 and 2020 totaled \$153,694 and \$27,663, respectively. Forfeitures of \$25,814 were used during 2021 to pay administrative expenses.

2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and conform to accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's management determines the Plan's valuation policies utilizing information provided by the custodian. See Note 3 for a discussion of fair value measurements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the gains and losses on investments bought and sold, as well as held during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. Interest income is recorded on the accrual basis. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in the net appreciation of the fair value of the investments.

3. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

Level 1 - This level consists of inputs to the valuation methodology that are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - This level consists of inputs to the methodology that 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 and corroborated by observable market data by correlation or other means.

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

Level 3 - This level consists of inputs to the valuation methodology that are unobservable and significant to the fair value measurement.

Teladoc Health 401(k) Plan

Notes to Financial Statements

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 observable inputs and minimize the use of unobservable inputs.

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

Money Market Funds - Money market funds are valued based on quoted prices in active markets for identical securities.

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

Stable Value Collective Trust Fund - Stable Value Collective Trust Funds are valued at the NAV of the units of the Fidelity Advisor Stable Value Fund. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. There are no participant redemption restrictions or notice periods for these investments. There were no unfunded commitments as of December 31, 2021 and 2020.

This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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's management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020. Classification within the fair value hierarchy tables is based on the lowest level of any input that is significant to the fair value measurement.

December 31, 2021

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 596,443	\$ 596,443	\$ -	\$ -
Mutual funds	163,058,023	163,058,023	-	-
Total Investments, at fair value	163,654,466	163,654,466	-	-
Common/collective trusts, at NAV*	1,869,430	-	-	-
Total Assets, at fair value	\$ 165,523,896	\$ 163,654,466	\$ -	\$ -

Teladoc Health 401(k) Plan

Notes to Financial Statements

December 31, 2020

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 260,883	\$ 260,883	\$ -	\$ -
Mutual funds	73,247,529	73,247,529	-	-
Total Investments, at fair value	73,508,412	73,508,412	-	-
Common/collective trusts, at NAV*	559,589	-	-	-
Total Assets, at fair value	\$ 74,068,001	\$ 73,508,412	\$ -	\$ -

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

4. Related Party and Party-in-Interest Transactions

Certain Plan investments are managed by Fidelity Management Trust Company, the custodian as defined by the Plan, and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment manager services are included in net appreciation in fair value of the investments. Additionally, the Plan issues loans to participants, which are secured by the participants' account balances. These transactions qualify as party-in-interest transactions. Certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

5. Plan Termination

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

6. Tax Status

Effective July 22, 2021, the Plan adopted the FMR LLC Non-Standardized Pre-Approved Profit Sharing Plan with Cash or Deferred Arrangement. The Internal Revenue Service (IRS) has determined and informed FMR LLC by a letter dated June 30, 2020, that the Plan is designed in accordance with applicable sections of the IRC. Previously, the Plan adopted a volume-submitter 401(k) plan document sponsored by Fidelity Management Trust Company and covered by an IRS advisory letter dated March 31, 2014, affirming that the form of the volume-submitter plan document is designed in accordance with the applicable sections of the IRC. The Plan itself has not received a determination letter from the IRS. However, the Plan administrator believes the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes the Plan meets the requirements of IRC Section 401(k).

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

Teladoc Health 401(k) Plan

Notes to Financial Statements

7. 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.

8. Information Certified by the Custodian

The Plan administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Fidelity Management Trust Company, a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Total investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefit as of December 31, 2021 and 2020.
- Net appreciation in fair value of investments, dividend and interest income, and interest income on notes receivable from participants reflected on the accompanying statement of changes in net assets available for benefit for the year ended December 31, 2021.
- Investments reflected on the supplemental Schedule of Assets (Held at End of Year).

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedule.

9. Reconciliation of Financial Statements

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

<i>December 31,</i>	2021	2020
Net Assets Available for Benefits , per the financial statements	\$ 169,372,548	\$ 75,789,222
Less: contributions receivables	(2,369,200)	(863,443)
Net Assets Available for Benefits , per the Form 5500	\$ 167,003,348	\$ 74,925,779

The following is a reconciliation of contributions per the financial statements to the Form 5500:

Year ended December 31, 2021

Contributions , per the financial statements	\$ 43,802,058
Add: contributions receivable 2020	863,443
Less: contributions receivable 2021	(2,369,200)
Contributions , per the Form 5500	\$ 42,296,301

Teladoc Health 401(k) Plan

Notes to Financial Statements

10. Late Remittances

During the year ended December 31, 2021, there were employee withholdings in the amount of \$244,390 that were not remitted to the Plan within the appropriate time period by the Company. These transactions constitute prohibited transactions as defined by ERISA. The Company is in the process of taking corrective action.

11. Subsequent Events

There have been no material subsequent events that occurred through October 17, 2022 that would require disclosure in these financial statements as of or for the year ended December 31, 2021.

ERISA-Required Supplemental Schedules

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions

EIN: 04-3705970

Plan No.: 001

Year ended December 31, 2021

	Participant Contributions Transferred Late to Plan	Total That Constitutes Nonexempt Prohibited Transactions			Contributions Pending Correction in VFCP*	Total Fully Corrected Under VFCP* and PTE 2002-51
		Contributions Not Corrected	Contributions Corrected Outside VFCP*			
Check here if late participant loan repayments are included: ☒						
2021	\$ 244,390	\$ 244,390	\$ -	\$ -	\$ -	\$ -

* Voluntary Fiduciary Correction Program (DOL)

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
EIN: 04-3705970 **Plan No.: 001**

December 31, 2021

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value	
Common Collective Trust				
* Fidelity Investments	Fidelity Advisor Stable Value Fund	** \$	1,869,430	
Mutual Funds				
Allspring Global Investments	Allspring Special Mid Cap Value Fund- Class A	**	1	
Allspring Global Investments	Allspring Special Mid Cap Value Fund R6	**	1,294,928	
American Funds	American Funds American Mutual Fund R6	**	1,570,321	
American Funds	American Funds Small Cap World Fund R6	**	824,708	
Ariel Investments	Ariel Fund Institutional Class	**	128,155	
Calamos Investments	Calamos Growth & Income Fund Institutional Class	**	492,222	
Calvert Investments	Calvert Us Large Cap Core Responsible Index Fund (R6)	**	200,661	
Cohen & Steers	Cohen & Steers Real Estate Fund Z	**	931,058	
Eaton Vance	Eaton Vance Atlanta Capital Smid Cap Fund R6	**	2,903,709	
* Fidelity Investments	Fidelity 500 Index Fund	**	20,596,174	
* Fidelity Investments	Fidelity Advisor Freedom 2030 Fund Class A	**	8	
* Fidelity Investments	Fidelity Advisor Freedom 2035 Fund Class A	**	1	
* Fidelity Investments	Fidelity Advisor Freedom 2040 Fund Class A	**	22	
* Fidelity Investments	Fidelity Advisor Technology Fund Z	**	3,579,849	
* Fidelity Investments	Fidelity Extended Market Index Fund	**	4,456,882	
* Fidelity Investments	Fidelity Freedom Index 2005 Fund Investor	**	399,450	
* Fidelity Investments	Fidelity Freedom Index 2010 Fund Investor	**	192,309	
* Fidelity Investments	Fidelity Freedom Index 2015 Fund Investor	**	332,771	
* Fidelity Investments	Fidelity Freedom Index 2020 Fund Investor	**	1,436,723	
* Fidelity Investments	Fidelity Freedom Index 2025 Fund Investor	**	8,110,357	
* Fidelity Investments	Fidelity Freedom Index 2030 Fund Investor	**	10,953,644	
* Fidelity Investments	Fidelity Freedom Index 2035 Fund Investor	**	14,190,446	
* Fidelity Investments	Fidelity Freedom Index 2040 Fund Investor	**	16,546,847	
* Fidelity Investments	Fidelity Freedom Index 2045 Fund Investor	**	14,943,847	
* Fidelity Investments	Fidelity Freedom Index 2050 Fund Investor	**	14,978,610	
* Fidelity Investments	Fidelity Freedom Index 2055 Fund Investor	**	11,669,006	
* Fidelity Investments	Fidelity Freedom Index 2060 Fund Investor	**	4,499,133	
* Fidelity Investments	Fidelity Freedom Index 2065 Fund Investor	**	535,489	
* Fidelity Investments	Fidelity Freedom Index Income Investor	**	1,139,557	
* Fidelity Investments	Fidelity International Index Fund	**	2,649,493	
* Fidelity Investments	Fidelity Small Cap Index Fund	**	1,852,876	
* Fidelity Investments	Fidelity Us Bond Index Fund	**	1,999,877	
First Eagle Investment Management	First Eagle Global Fund R6	**	468,187	
Franklin Templeton	Templeton Global Bond Fund	**	246,115	
Invesco	Invesco Developing Markets Fund R6	**	1,211,949	
Janus Henderson	Janus Henderson Triton Fund N	**	2,517,475	
John Hancock Investment Management	John Hancock International Growth Fund	**	1,113,800	
Lord Abbett	Lord Abbett High Yield Fund R6	**	960,312	
Massachusetts Financial Services	Mfs International Diversions Fund R6	**	425,769	
Morgan Stanley	Msif Growth Fund I	**	9,827,493	
Natixis Investment Managers	Natixis U.S. Equity Opportunities Fund Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class R6	**	1,810,949	
PIMCO	Pimco Real Return Fund	**	1,066,836	
Total Mutual Funds				163,058,023

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 04-3705970 Plan No.: 001

December 31, 2021

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value
Money Market Funds				
*	Fidelity Investments	Fidelity Government Money Market Fund	** \$	6,943
*	Fidelity Investments	Fidelity Short Term Investment Fund	**	589,500
Total Money Market Funds				596,443
Total Investments, per financial statements				165,523,896
*	Participant Loans	Interest rates of 4.00% to 7.00%, maturing at various dates through 2030.	-	1,479,445
Total				\$ 167,003,341

* A party-in-interest, as defined by ERISA.

** The cost of participant-directed investments is not required to be disclosed.

Teladoc Health 401(k) Plan

**Financial Statements
and Supplemental Schedules**
As of December 31, 2021 and 2020
and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

Financial Statements and Supplemental Schedules

As of December 31, 2021 and 2020 and for the Year Ended December 31, 2021

Teladoc Health 401(k) Plan

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Independent Auditor's Report

The Plan Administrator
Teladoc Health 401(k) Plan
Purchase, New York

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

We have performed an audit of the financial statements of the Teladoc Health 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year 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 (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). 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 (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from a qualified institution as of December 31, 2021, and for the year then ended, stating that the certified investment information, as described in Note 8 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

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

- 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 (U.S. GAAP).
- The certified investment information in the accompanying 2021 financial statements agrees to, or is derived from, in all material respects, the information prepared and certified by a qualified 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 (U.S. 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 the 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 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, 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 the Plan's ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

Management is responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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 2021 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 U.S. 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 2021 financial statements.



In performing an audit in accordance with U.S. GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the 2021 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 2021 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 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 2021 financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the 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 U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2021 financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

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 Matter - 2021 Supplemental Schedules Required by ERISA

The supplemental Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions for the year ended December 31, 2021 and Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2021 are presented for purposes of additional analysis and are not required parts of the 2021 financial statements but are supplementary information required by the DOL'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 2021 financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, have been subjected to auditing procedures applied in the audit of the 2021 financial statements and to certain additional procedures, including comparing and reconciling such information directly to the underlying



accounting and other records used to prepare the 2021 financial statements or to the 2021 financial statements themselves, and other additional procedures in accordance with U.S. GAAS. For information included in the supplemental schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

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

Other Matter - Report on the 2020 Financial Statements

The financial statements of the Plan as of December 31, 2020 were audited by predecessor auditors and comprise the statement of net assets available for benefits as of December 31, 2020. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the qualified institution. Their audit report, dated October 5, 2021, indicated that (a) because of the significance of the information that they did not audit, they were not able to obtain sufficient appropriate audit evidence to provide a basis for an opinion and, accordingly, they 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 information certified by the qualified institution, were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

BDO USA, LLP

October 17, 2022

Financial Statements

Teladoc Health 401(k) Plan

Statements of Net Assets Available for Benefits

<i>December 31,</i>	2021	2020
Assets		
Investments, at fair value	\$ 165,523,896	\$ 74,068,001
Receivables:		
Employee contributions	690,787	297,800
Employer contributions	1,678,413	565,643
Notes receivable from participants	1,479,445	857,775
Accrued income	7	3
Total Receivables	3,848,652	1,721,221
Net Assets Available for Benefits	\$ 169,372,548	\$ 75,789,222

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2021

Additions

Investment income:

Net appreciation in fair value of investments \$ 12,292,858

Interest and dividend income 6,513,853

Total Investment Income 18,806,711

Interest income on notes receivable from participants 59,503

Contributions:

Participant 25,273,893

Employer 12,083,594

Rollover 6,444,571

Total Contributions 43,802,058

Total Additions 62,668,272

Deductions

Benefit payments 15,322,113

Deemed distributions of participant loans 2,435

Administrative expenses 410,715

Total Deductions 15,735,263

Increase in Net Assets 46,933,009

Transfer of Assets, to this Plan 46,650,317

Net Assets Available for Benefits, beginning of year 75,789,222

Net Assets Available for Benefits, end of year \$ 169,372,548

See accompanying notes to financial statements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

1. Plan Description

The following brief description of the Teladoc Health 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 defined contribution plan covering all eligible employees, as defined in the Plan document, of Teladoc Health, Inc. (the Company or Employer). The Plan was established effective January 1, 2013, for all employees except for those covered under a collective-bargaining agreement and non-resident alien employees. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Transfer of Assets

On December 17, 2020, the Company approved the merger of the Livongo Health Inc 401(k) Profit Sharing Plan and Trust into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the Livongo Health Inc 401(k) Profit Sharing Plan and Trust amounting to \$30,240,103 were transferred into the Plan on January 4, 2021.

On December 16, 2020, the Company approved the merger of the InTouch Health 401(k) Retirement Plan into the Plan. The provisions of the Plan are effective with respect to the merged-in plans as of January 1, 2021. As a result, all remaining assets from the InTouch Health 401(k) Retirement Plan amounting to \$16,410,214 were transferred into the Plan on January 13, 2021.

Eligibility

All employees who are age 21 or older with a minimum of three consecutive months of service may elect to enter the Plan. In general, covered employees may enter the Plan on the first day of each Plan year and the first day of the quarter following the date on which they satisfy the eligibility requirements.

Participation

Participants are eligible to contribute and receive Employer matching, Employer non-elective, and profit-sharing contributions after completing three months of eligibility service requirements.

Contributions

Each year, participants may contribute from pre-tax eligible earnings, as defined in the Plan. Participants who have attained age 50 during a calendar year are eligible to make catch-up contributions at any time during that calendar year. Participants also may contribute amounts from other eligible retirement plans (rollover), as defined in the Plan. Contributions are subject to certain annual limitations as imposed by the Internal Revenue Code (IRC).

The Plan allows for Safe Harbor Company matching contributions up to 4% of compensation. All participants are eligible for Safe Harbor matching contributions; however, they must have

Teladoc Health 401(k) Plan

Notes to Financial Statements

completed a minimum of three months of eligibility service requirements during the Plan year or be employed on the last day of the Plan year.

The Plan also allows for a qualified non-elective contribution to non-highly compensated employees. This contribution would be allocated proportionally to participants based upon total compensation and would be paid as of the last day of the Plan year. For Plan years ending December 31, 2021 and 2020, there were no qualified non-elective Employer contributions. The Employer contributions are invested as directed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions, the Employer's contributions, and the allocations of Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Participants may direct the investment of their account balances into various investment options offered by the Plan.

Vesting

Participants are immediately vested in their contributions, including rollover contributions and Employer safe harbor matching contributions plus actual earnings thereon.

Participants are fully vested in non-elective Employer contributions after three years of vesting service.

Participants who merged into the Plan from the InTouch Health 401(k) Retirement Plan are vested for discretionary profit sharing and discretionary match, as follows:

Years	Vesting (%)
Less than 1	-
1 but less than 2	25
2 but less than 3	50
3 but less than 4	75
4 or more	100

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are vested for discretionary profit sharing, as follows:

Years	Vesting (%)
Less than 2	-
2 but less than 3	20
3 but less than 4	40
4 but less than 5	60
5 but less than 6	80
6 or more	100

Teladoc Health 401(k) Plan

Notes to Financial Statements

Participants who merged into the Plan from the Livongo Health Inc. 401(k) Profit Sharing Plan and Trust are immediately vested in discretionary match.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and must be repaid in level payments through payroll deductions over a period no longer than five years, unless the loans were used to purchase a primary residence, in which case the loan terms may not exceed 30 years. The loans bear interest at rates that are based on other lenders' rates for similar loans.

Payment of Benefits

On termination of service due to death, disability, retirement, or other reasons, a participant may receive installments or a lump-sum distribution equal to the value of the participant's vested interest in their account. The Plan will make a mandatory distribution following termination from employment to the extent that the participant's accumulated benefit does not exceed the mandatory distribution amount of \$5,000. In addition, the Plan allows for hardship distributions if certain criteria are met.

Forfeited Accounts

Non-vested portions of participant accounts, if any, are forfeited upon termination of employment. Forfeited accounts may be used to pay expenses under the Plan, or to reduce Employer contributions at the discretion of the Company. The balance in the forfeiture account as of December 31, 2021 and 2020 totaled \$153,694 and \$27,663, respectively. Forfeitures of \$25,814 were used during 2021 to pay administrative expenses.

2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and conform to accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's management determines the Plan's valuation policies utilizing information provided by the custodian. See Note 3 for a discussion of fair value measurements.

Teladoc Health 401(k) Plan

Notes to Financial Statements

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the gains and losses on investments bought and sold, as well as held during the year.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. Interest income is recorded on the accrual basis. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in the net appreciation of the fair value of the investments.

3. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

Level 1 - This level consists of inputs to the valuation methodology that are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - This level consists of inputs to the methodology that 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 and corroborated by observable market data by correlation or other means.

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

Level 3 - This level consists of inputs to the valuation methodology that are unobservable and significant to the fair value measurement.

Teladoc Health 401(k) Plan

Notes to Financial Statements

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 observable inputs and minimize the use of unobservable inputs.

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

Money Market Funds - Money market funds are valued based on quoted prices in active markets for identical securities.

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

Stable Value Collective Trust Fund - Stable Value Collective Trust Funds are valued at the NAV of the units of the Fidelity Advisor Stable Value Fund. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. There are no participant redemption restrictions or notice periods for these investments. There were no unfunded commitments as of December 31, 2021 and 2020.

This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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's management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020. Classification within the fair value hierarchy tables is based on the lowest level of any input that is significant to the fair value measurement.

December 31, 2021

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 596,443	\$ 596,443	\$ -	\$ -
Mutual funds	163,058,023	163,058,023	-	-
Total Investments, at fair value	163,654,466	163,654,466	-	-
Common/collective trusts, at NAV*	1,869,430	-	-	-
Total Assets, at fair value	\$ 165,523,896	\$ 163,654,466	\$ -	\$ -

Teladoc Health 401(k) Plan

Notes to Financial Statements

December 31, 2020

	Total	Level 1	Level 2	Level 3
Money market funds	\$ 260,883	\$ 260,883	\$ -	\$ -
Mutual funds	73,247,529	73,247,529	-	-
Total Investments, at fair value	73,508,412	73,508,412	-	-
Common/collective trusts, at NAV*	559,589	-	-	-
Total Assets, at fair value	\$ 74,068,001	\$ 73,508,412	\$ -	\$ -

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

4. Related Party and Party-in-Interest Transactions

Certain Plan investments are managed by Fidelity Management Trust Company, the custodian as defined by the Plan, and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment manager services are included in net appreciation in fair value of the investments. Additionally, the Plan issues loans to participants, which are secured by the participants' account balances. These transactions qualify as party-in-interest transactions. Certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

5. Plan Termination

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

6. Tax Status

Effective July 22, 2021, the Plan adopted the FMR LLC Non-Standardized Pre-Approved Profit Sharing Plan with Cash or Deferred Arrangement. The Internal Revenue Service (IRS) has determined and informed FMR LLC by a letter dated June 30, 2020, that the Plan is designed in accordance with applicable sections of the IRC. Previously, the Plan adopted a volume-submitter 401(k) plan document sponsored by Fidelity Management Trust Company and covered by an IRS advisory letter dated March 31, 2014, affirming that the form of the volume-submitter plan document is designed in accordance with the applicable sections of the IRC. The Plan itself has not received a determination letter from the IRS. However, the Plan administrator believes the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes the Plan meets the requirements of IRC Section 401(k).

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

Teladoc Health 401(k) Plan

Notes to Financial Statements

7. 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.

8. Information Certified by the Custodian

The Plan administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Fidelity Management Trust Company, a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Total investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefit as of December 31, 2021 and 2020.
- Net appreciation in fair value of investments, dividend and interest income, and interest income on notes receivable from participants reflected on the accompanying statement of changes in net assets available for benefit for the year ended December 31, 2021.
- Investments reflected on the supplemental Schedule of Assets (Held at End of Year).

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedule.

9. Reconciliation of Financial Statements

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

<i>December 31,</i>	2021	2020
Net Assets Available for Benefits , per the financial statements	\$ 169,372,548	\$ 75,789,222
Less: contributions receivables	(2,369,200)	(863,443)
Net Assets Available for Benefits , per the Form 5500	\$ 167,003,348	\$ 74,925,779

The following is a reconciliation of contributions per the financial statements to the Form 5500:

Year ended December 31, 2021

Contributions , per the financial statements	\$ 43,802,058
Add: contributions receivable 2020	863,443
Less: contributions receivable 2021	(2,369,200)
Contributions , per the Form 5500	\$ 42,296,301

Teladoc Health 401(k) Plan

Notes to Financial Statements

10. Late Remittances

During the year ended December 31, 2021, there were employee withholdings in the amount of \$244,390 that were not remitted to the Plan within the appropriate time period by the Company. These transactions constitute prohibited transactions as defined by ERISA. The Company is in the process of taking corrective action.

11. Subsequent Events

There have been no material subsequent events that occurred through October 17, 2022 that would require disclosure in these financial statements as of or for the year ended December 31, 2021.

ERISA-Required Supplemental Schedules

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4a - Schedule of Delinquent Participant Contributions

EIN: 04-3705970

Plan No.: 001

Year ended December 31, 2021

	Participant Contributions Transferred Late to Plan	Total That Constitutes Nonexempt Prohibited Transactions			Contributions Pending Correction in VFCP*	Total Fully Corrected Under VFCP* and PTE 2002-51
		Contributions Not Corrected	Contributions Corrected Outside VFCP*			
Check here if late participant loan repayments are included: ☒						
2021	\$ 244,390	\$ 244,390	\$ -	\$ -	\$ -	\$ -

* Voluntary Fiduciary Correction Program (DOL)

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
EIN: 04-3705970 **Plan No.: 001**

December 31, 2021

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value	
Common Collective Trust				
* Fidelity Investments	Fidelity Advisor Stable Value Fund	** \$	1,869,430	
Mutual Funds				
Allspring Global Investments	Allspring Special Mid Cap Value Fund- Class A	**	1	
Allspring Global Investments	Allspring Special Mid Cap Value Fund R6	**	1,294,928	
American Funds	American Funds American Mutual Fund R6	**	1,570,321	
American Funds	American Funds Small Cap World Fund R6	**	824,708	
Ariel Investments	Ariel Fund Institutional Class	**	128,155	
Calamos Investments	Calamos Growth & Income Fund Institutional Class	**	492,222	
Calvert Investments	Calvert Us Large Cap Core Responsible Index Fund (R6)	**	200,661	
Cohen & Steers	Cohen & Steers Real Estate Fund Z	**	931,058	
Eaton Vance	Eaton Vance Atlanta Capital Smid Cap Fund R6	**	2,903,709	
* Fidelity Investments	Fidelity 500 Index Fund	**	20,596,174	
* Fidelity Investments	Fidelity Advisor Freedom 2030 Fund Class A	**	8	
* Fidelity Investments	Fidelity Advisor Freedom 2035 Fund Class A	**	1	
* Fidelity Investments	Fidelity Advisor Freedom 2040 Fund Class A	**	22	
* Fidelity Investments	Fidelity Advisor Technology Fund Z	**	3,579,849	
* Fidelity Investments	Fidelity Extended Market Index Fund	**	4,456,882	
* Fidelity Investments	Fidelity Freedom Index 2005 Fund Investor	**	399,450	
* Fidelity Investments	Fidelity Freedom Index 2010 Fund Investor	**	192,309	
* Fidelity Investments	Fidelity Freedom Index 2015 Fund Investor	**	332,771	
* Fidelity Investments	Fidelity Freedom Index 2020 Fund Investor	**	1,436,723	
* Fidelity Investments	Fidelity Freedom Index 2025 Fund Investor	**	8,110,357	
* Fidelity Investments	Fidelity Freedom Index 2030 Fund Investor	**	10,953,644	
* Fidelity Investments	Fidelity Freedom Index 2035 Fund Investor	**	14,190,446	
* Fidelity Investments	Fidelity Freedom Index 2040 Fund Investor	**	16,546,847	
* Fidelity Investments	Fidelity Freedom Index 2045 Fund Investor	**	14,943,847	
* Fidelity Investments	Fidelity Freedom Index 2050 Fund Investor	**	14,978,610	
* Fidelity Investments	Fidelity Freedom Index 2055 Fund Investor	**	11,669,006	
* Fidelity Investments	Fidelity Freedom Index 2060 Fund Investor	**	4,499,133	
* Fidelity Investments	Fidelity Freedom Index 2065 Fund Investor	**	535,489	
* Fidelity Investments	Fidelity Freedom Index Income Investor	**	1,139,557	
* Fidelity Investments	Fidelity International Index Fund	**	2,649,493	
* Fidelity Investments	Fidelity Small Cap Index Fund	**	1,852,876	
* Fidelity Investments	Fidelity Us Bond Index Fund	**	1,999,877	
First Eagle Investment Management	First Eagle Global Fund R6	**	468,187	
Franklin Templeton	Templeton Global Bond Fund	**	246,115	
Invesco	Invesco Developing Markets Fund R6	**	1,211,949	
Janus Henderson	Janus Henderson Triton Fund N	**	2,517,475	
John Hancock Investment Management	John Hancock International Growth Fund	**	1,113,800	
Lord Abbett	Lord Abbett High Yield Fund R6	**	960,312	
Massachusetts Financial Services	Mfs International Diversions Fund R6	**	425,769	
Morgan Stanley	Msif Growth Fund I	**	9,827,493	
Natixis Investment Managers	Natixis U.S. Equity Opportunities Fund Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class A	**	2	
PGIM Investments	PGIM Total Return Bond Fund- Class R6	**	1,810,949	
PIMCO	Pimco Real Return Fund	**	1,066,836	
Total Mutual Funds				163,058,023

Teladoc Health 401(k) Plan

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 04-3705970 Plan No.: 001

December 31, 2021

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost**	Current Value
Money Market Funds				
*	Fidelity Investments	Fidelity Government Money Market Fund	**	\$ 6,943
*	Fidelity Investments	Fidelity Short Term Investment Fund	**	589,500
Total Money Market Funds				596,443
Total Investments, per financial statements				165,523,896
*	Participant Loans	Interest rates of 4.00% to 7.00%, maturing at various dates through 2030.	-	1,479,445
Total				\$ 167,003,341

* A party-in-interest, as defined by ERISA.

** The cost of participant-directed investments is not required to be disclosed.