Form 5500-SF

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed 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-SF.**

OMB Nos. 1210-0110
1210-0089

2022

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A This return/report is for: [X] a single-employer plan [ ] a multiple-employer plan (not multiemployer) (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)

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 Check box if filing under: [X] Form 5558 [ ] automatic extension [ ] DFVC program
[ ] special extension (enter description)

D 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
THOMPSON HINE CASH BALANCE PLAN

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 01/01/2021

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)
THOMPSON HINE LLP

3900 KEY CENTER

127 PUBLIC SQUARE
CLEVELAND, OH 44114

2b Employer Identification Number (EIN) 34-0575300

2c Sponsor's telephone number 216-566-5500

2d Business code (see instructions) 541110

3a Plan administrator's name and address [X] Same as Plan Sponsor.

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report.
a Sponsor's name
c Plan Name

4b EIN

4d PN

5a Total number of participants at the beginning of the plan year	5a	97
b Total number of participants at the end of the plan year	5b	96
c Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	5c	
d(1) Total number of active participants at the beginning of the plan year	5d(1)	97
d(2) Total number of active participants at the end of the plan year	5d(2)	94
e Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	5e	0

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, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, 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.	09/26/2023	EDWARD REDDER
	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

6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) [X] Yes [ ] No

b Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) [X] Yes [ ] No

If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.

c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 473560. (See instructions.)

Part III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	2230830	1734601
b Total plan liabilities	7b		
c Net plan assets (subtract line 7b from line 7a)	7c	2230830	1734601

8 Income, Expenses, and Transfers for this Plan Year		(a) Amount	(b) Total
a Contributions received or receivable from: (1) Employers	8a(1)		
(2) Participants	8a(2)		
(3) Others (including rollovers)	8a(3)		
b Other income (loss)	8b	26037	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		26037
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	522266	
e Certain deemed and/or corrective distributions (see instructions)	8e		
f Administrative service providers (salaries, fees, commissions)	8f		
g Other expenses	8g		
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		522266
i Net income (loss) (subtract line 8h from line 8c)	8i		-496229
j Transfers to (from) the plan (see instructions)	8j		

Part IV Plan Characteristics

9a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1C

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

Part V Compliance Questions

10 During the plan year:		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program)	10a		X	
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	10b		X	
c Was the plan covered by a fidelity bond?	10c	X		5000000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	10d		X	
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service, or other organization that provides some or all of the benefits under the plan? (See instructions.)	10e		X	
f Has the plan failed to provide any benefit when due under the plan?	10f		X	
g Did the plan have any participant loans? (If "Yes," enter amount as of year-end.)	10g		X	
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	10h		X	
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	10i			

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and lines 11a and b below.) If this is a defined contribution pension plan, leave line 11 blank and complete line 12 below. ☒ Yes ☐ No

a Enter the unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 **11a** 0

b **PBGC missed contribution reporting requirements.** If the plan is covered by PBGC and the amount reported on line 11a is greater than $0, 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 _____

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? (If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.) If this is a defined benefit pension plan, leave line 12 blank and complete line 11 above. ☐ Yes ☒ No

a 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 letter ruling granting the waiver. Month _____ Day _____ Year _____

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year	**12b**	
c Enter the amount contributed by the employer to the plan for this plan year	**12c**	
d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount)	**12d**	

e Will the minimum funding amount reported on line 12d be met by the funding deadline? ☐ Yes ☐ No ☐ N/A

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year **13a**

b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? ☐ Yes ☒ No

c 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.)

13c(1) Name of plan(s):	**13c(2)** EIN(s)	**13c(3)** PN(s)

SCHEDULE SB (Form 5500)	Single-Employer Defined Benefit Plan Actuarial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500 or 5500-SF.**	**2022** **This Form is Open to Public Inspection**

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
THOMPSON HINE CASH BALANCE PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THOMPSON HINE LLP

D Employer Identification Number (EIN)
34-0575300

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [X] 100 or fewer [ ] 101-500 [ ] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2022

2 Assets:

a Market value	2a	2208033
b Actuarial value	2b	2208033

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	0	0	0
b For terminated vested participants	0	0	0
c For active participants	97	1825955	1825955
d Total	97	1825955	1825955

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5 Effective interest rate	5	5.11 %
6 Target normal cost		
a Present value of current plan year accruals	6a	2396378
b Expected plan-related expenses	6b	0
c Total (line 6a + line 6b)	6c	2396378

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary	09/24/2023 Date
CHRISTOPHER J. ROMAN, EA, MAAA Type or print name of actuary	23-08485 Most recent enrollment number
SCHWAB RETIREMENT PLAN SERVICES Firm name	330-908-4742 Telephone number (including area code)
4150 KINROSS LAKES PARKWAY RICHFIELD, OH 44286 Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 0.00 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		350695
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.27 %		18482
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		369177
	d Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	120.92 %
15	Adjusted funding target attainment percentage	15	120.92 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
02/08/2023	2917453	0			
			Totals ► 18(b)	2917453	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	2761255

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	N/A, full yield curve used
4.75 %	5.18 %	5.92 %	

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	61

23 Mortality table(s) (see instructions) [X] Prescribed - combined [ ] Prescribed - separate [ ] Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [ ] Yes [X] No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	31a	2396378
b Excess assets, if applicable, but not greater than line 31a	31b	382078

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	2014300

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	2014300
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	2761255

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	38a	746955
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. [ ] 2019 [ ] 2020 [ ] 2021

Schedule SB, line 26 – Schedule of Active Participant Data

Age versus Service Scatter for Active Plan Participants:

Credited Service:	under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	over 40	Total
Age											
under 25	-	-	-	-	-	-	-	-	-	-	0
25 to 29	-	-	-	-	-	-	-	-	-	-	0
30 to 34	-	-	-	-	-	-	-	-	-	-	0
35 to 39	7	-	-	-	-	-	-	-	-	-	7
40 to 44	8	4	-	-	-	-	-	-	-	-	12
45 to 49	5	3	-	-	-	-	-	-	-	-	8
50 to 54	6	18	-	-	-	-	-	-	-	-	24
55 to 59	4	10	-	-	-	-	-	-	-	-	14
60 to 64	4	18	-	-	-	-	-	-	-	-	22
65 to 69	3	4	-	-	-	-	-	-	-	-	7
over 70	2	-	-	-	-	-	-	-	-	-	2
Total	39	57	0	0	0	0	0	0	0	0	96

Classification: Schwab Internal

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

A summary of the actuarial methods and assumptions used in the valuation is presented below:

Valuation Data

Census data as of 1/1/2022 is used.

Funding Methods

Cost Method – The actuarial cost method used in this report for determining ERISA contributions is the unit credit method as defined by the Pension Protection Act of 2006. Under this method, an active participant's accrued benefit is calculated based on the Plan's benefit formula using current service and current compensation.

Asset Method - The market value of assets represents the fair value of assets plus receivable contributions (if any) discounted to the valuation date using the prior year's effective interest rate as defined by PPA 2006.

- The Actuarial Value of Assets is equal to the Market Value of Assets

Actuarial Assumptions

Discount Rates for Funding - The assumed discount rates on benefits paid in the future are based on the January 2022 PPA Segment rates, reflecting the funding stabilization under ARPA as prescribed by the IRS:

Segment	Rate	Applicable to benefit payments made:
1	4.75%	During first 5 years from the valuation date
2	5.18%	During years 6-20 from the valuation date
3	5.92%	During year 21 and beyond from the valuation date

Mortality – The 2022 Static Optional Small Plan Mortality Table as prescribed by the IRS.

Withdrawal Rates – None assumed.

Disability – None assumed.

Retirement Rates – Retirement rates are based on the following table:

Age	Rate
60	50%
61	50%
62	50%
63	50%
64	50%
65	80%
66	80%
67	100%

Classification: Schwab Internal

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Assumed Future Interest Crediting Rate – Future interest crediting rates are assumed to be 1.00% each year.

Assumed Form of Payment – All participants are assumed to receive a lump sum upon commencement.

Percent Married - 80% of males and 80% of females were assumed to be married.

Age of Spouse - The female spouse is assumed to be the same age as the male spouse.

Administrative Expenses – No administrative expenses are assumed to be paid from the plan's trust.

Changes in Prescribed Methods and Assumptions since the Preceding Valuation:

As required by PPA and IRS regulations (reflecting the Funding Stabilization provisions under ARPA and its current regulations), the interest rates used to determine the Funding Target Liability were as follows:

January 1, 2022: IRS Segment Rates for January 2022 (4.75%, 5.18%, 5.92%);
January 1, 2021: IRS Segment Rates for January 2021 (4.75%, 5.36%, 6.11%)

The mortality tables prescribed by the IRS for funding purposes were changed from the 2021 Static Optional Small Plan Mortality Tables to the 2022 Static Optional Small Plan Mortality Tables.

All other prescribed methods and assumptions remain unchanged from the prior valuation.

Changes in Non-Prescribed Methods and Assumptions since the Preceding Valuation:

All non-prescribed methods and assumptions remain unchanged from the prior valuation.

Classification: Schwab Internal

SCHEDULE SB (Form 5500)	Single-Employer Defined Benefit Plan Actuarial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500 or 5500-SF.**	**2022** **This Form is Open to Public Inspection**

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
Thompson Hine Cash Balance Plan

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
Thompson Hine LLP

D Employer Identification Number (EIN)
34-0575300

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [X] 100 or fewer [ ] 101-500 [ ] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2022

2 Assets:

a Market value	**2a**	2,208,033
b Actuarial value	**2b**	2,208,033

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	0	0	0
b For terminated vested participants	0	0	0
c For active participants	97	1,825,955	1,825,955
d Total	97	1,825,955	1,825,955

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	5.11%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	2,396,378
b Expected plan-related expenses	**6b**	0
c Total (line 6a + line 6b)	**6c**	2,396,378

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE Christopher Roman CR — Signature of actuary — Date 9/24/2023

CHRISTOPHER J. ROMAN, EA, MAAA — Type or print name of actuary — Most recent enrollment number 2308485

SCHWAB RETIREMENT PLAN SERVICES — Firm name — Telephone number (including area code) 330-908-4742

4150 KINROSS LAKES PARKWAY
RICHFIELD OH 44286
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 0.00 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		350,695
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.27 %		18,482
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		369,177
	d Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	120.92 %
15	Adjusted funding target attainment percentage	15	120.92 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
02/08/2023	2,917,453	0			
			Totals ► 18(b)	2,917,453	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	2,761,255

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [ ] Yes [X] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [ ] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
4.75 %	5.18 %	5.92%	

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	61

23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	31a	2,396,378
b Excess assets, if applicable, but not greater than line 31a	31b	382,078

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	2,014,300

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	2,014,300
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	2,761,255

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	38a	746,955
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

Thompson Hine Cash Balance Plan
EIN/PN 34-0575300 / 003

charles SCHWAB

Schedule SB, line 19 – Discounted Employer Contributions

Valuation Date: 1/1/2022

Effective Interest Rate: 5.11%

Actual Contribution Date	Actual Contribution Amount	Discounted Contribution Amount	Plan Year to which the Contribution is Applied
2/8/2023	2,917,453	2,761,255	2022
Total	2,917,453	2,761,255	

Classification: Schwab Internal

Schedule SB, line 22 – Description of Weighted Average Retirement Age

(A) Age	(B) Retirement Decrement	(C) Lx	(D) Number Retiring	(E) Weighting (A) times (D)
60	50%	10,000	5,000	300,000
61	50%	5,000	2,500	152,500
62	50%	2,500	1,250	77,500
63	50%	1,250	625	39,375
64	50%	625	313	20,032
65	80%	312	250	16,250
66	80%	62	50	3,300
67	100%	12	12	804
Actives			10,000	609,761

Weighted Average Retirement Age =	**61**

Classification: Schwab Internal

Schedule SB, line 26 – Schedule of Active Participant Data

Age versus Service Scatter for Active Plan Participants:

Credited Service:	under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	over 40	Total
Age											
under 25	-	-	-	-	-	-	-	-	-	-	0
25 to 29	-	-	-	-	-	-	-	-	-	-	0
30 to 34	-	-	-	-	-	-	-	-	-	-	0
35 to 39	7	-	-	-	-	-	-	-	-	-	7
40 to 44	8	4	-	-	-	-	-	-	-	-	12
45 to 49	5	3	-	-	-	-	-	-	-	-	8
50 to 54	6	18	-	-	-	-	-	-	-	-	24
55 to 59	4	10	-	-	-	-	-	-	-	-	14
60 to 64	4	18	-	-	-	-	-	-	-	-	22
65 to 69	3	4	-	-	-	-	-	-	-	-	7
over 70	2	-	-	-	-	-	-	-	-	-	2
Total	39	57	0	0	0	0	0	0	0	0	96

Classification: Schwab Internal

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

A summary of the actuarial methods and assumptions used in the valuation is presented below:

Valuation Data

Census data as of 1/1/2022 is used.

Funding Methods

Cost Method – The actuarial cost method used in this report for determining ERISA contributions is the unit credit method as defined by the Pension Protection Act of 2006. Under this method, an active participant's accrued benefit is calculated based on the Plan's benefit formula using current service and current compensation.

Asset Method - The market value of assets represents the fair value of assets plus receivable contributions (if any) discounted to the valuation date using the prior year's effective interest rate as defined by PPA 2006.

- The Actuarial Value of Assets is equal to the Market Value of Assets

Actuarial Assumptions

Discount Rates for Funding - The assumed discount rates on benefits paid in the future are based on the January 2022 PPA Segment rates, reflecting the funding stabilization under ARPA as prescribed by the IRS:

Segment	Rate	Applicable to benefit payments made:
1	4.75%	During first 5 years from the valuation date
2	5.18%	During years 6-20 from the valuation date
3	5.92%	During year 21 and beyond from the valuation date

Mortality – The 2022 Static Optional Small Plan Mortality Table as prescribed by the IRS.

Withdrawal Rates – None assumed.

Disability – None assumed.

Retirement Rates – Retirement rates are based on the following table:

Age	Rate
60	50%
61	50%
62	50%
63	50%
64	50%
65	80%
66	80%
67	100%

Classification: Schwab Internal

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Assumed Future Interest Crediting Rate – Future interest crediting rates are assumed to be 1.00% each year.

Assumed Form of Payment – All participants are assumed to receive a lump sum upon commencement.

Percent Married - 80% of males and 80% of females were assumed to be married.

Age of Spouse - The female spouse is assumed to be the same age as the male spouse.

Administrative Expenses – No administrative expenses are assumed to be paid from the plan's trust.

Changes in Prescribed Methods and Assumptions since the Preceding Valuation:

As required by PPA and IRS regulations (reflecting the Funding Stabilization provisions under ARPA and its current regulations), the interest rates used to determine the Funding Target Liability were as follows:

January 1, 2022: IRS Segment Rates for January 2022 (4.75%, 5.18%, 5.92%);
January 1, 2021: IRS Segment Rates for January 2021 (4.75%, 5.36%, 6.11%)

The mortality tables prescribed by the IRS for funding purposes were changed from the 2021 Static Optional Small Plan Mortality Tables to the 2022 Static Optional Small Plan Mortality Tables.

All other prescribed methods and assumptions remain unchanged from the prior valuation.

Changes in Non-Prescribed Methods and Assumptions since the Preceding Valuation:

All non-prescribed methods and assumptions remain unchanged from the prior valuation.

Classification: Schwab Internal

Schedule SB, Part V – Summary of Plan Provisions

A summary of the major plan provisions used in the valuation is presented below:

Definitions:

Original Plan effective date – January 1, 2021.

Covered Employees – Partner or Executive Staff Member identified in Addendum A to the plan.

Eligibility & Participation – There is no service requirement for eligibility. The minimum age at participation is 21.

Entry Date – January 1 or July 1 first following satisfaction of the Eligibility and Participation requirements.

Vesting – A participant is immediately 100% vested in their accrued benefit at all times.

Normal Retirement Date (NRD) – The participant's age 65.

Actuarial Equivalence – Forms of Payment are set equal to the value of the Hypothetical Account Balance using a 5% interest rate and the mortality table in effect under IRC 417(e)(3)(B) on the annuity starting date. There is no preretirement mortality assumed.

Lump Sum Amount – The amount of benefit payable under the lump sum form of payment equals the value of the Hypothetical Account Balance.

Hypothetical Account Balance:

Hypothetical Account Balance – Each participant has a Hypothetical Account Balance, the value of which equals the sum of Pension Credits and Interest Credits.

Interest Credits – Credited as of the last day of each Plan Year. The Interest Crediting Rate is based on the Plan's actual rate of return not to exceed effective annual rate of 5%.

Pension Credits – Credits are granted each year on the last day of the Plan Year based on amounts listed in Appendix A of the Plan Document.

Payment of Benefits:

Normal Form of Payment – The normal form of payment is the Life Annuity option for single participants, and the Qualified Joint and Survivor for married participants.

Optional Forms of Payment – participants are offered a single lump sum distribution, life annuity, or 50% and 75% joint and survivor annuities.

Maximum on Benefits and Pay - benefits may not exceed the maximum limitations as defined in the Internal Revenue Code.

Classification: Schwab Internal

Schedule SB, Part V – Summary of Plan Provisions (continued)

Amount of Benefits – Benefit amounts are based on the actuarially equivalent value of the Participant's Hypothetical Account Balance.

Pre-Retirement Death Benefit - The beneficiary may elect to receive the entire benefit based on the value of the Participant's Hypothetical Account Balance.

Changes since Preceding Valuation:

No changes since the previous valuation.

Classification: Schwab Internal

Schedule SB, line 19 – Discounted Employer Contributions

Valuation Date: 1/1/2022

Effective Interest Rate: 5.11%

Actual Contribution Date	Actual Contribution Amount	Discounted Contribution Amount	Plan Year to which the Contribution is Applied
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66	80%	62	50	3,300
67	100%	12	12	804
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Weighted Average Retirement Age =	**61**

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Schedule SB, Part V – Summary of Plan Provisions

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Definitions:

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Covered Employees – Partner or Executive Staff Member identified in Addendum A to the plan.

Eligibility & Participation – There is no service requirement for eligibility. The minimum age at participation is 21.

Entry Date – January 1 or July 1 first following satisfaction of the Eligibility and Participation requirements.

Vesting – A participant is immediately 100% vested in their accrued benefit at all times.

Normal Retirement Date (NRD) – The participant's age 65.

Actuarial Equivalence – Forms of Payment are set equal to the value of the Hypothetical Account Balance using a 5% interest rate and the mortality table in effect under IRC 417(e)(3)(B) on the annuity starting date. There is no preretirement mortality assumed.

Lump Sum Amount – The amount of benefit payable under the lump sum form of payment equals the value of the Hypothetical Account Balance.

Hypothetical Account Balance:

Hypothetical Account Balance – Each participant has a Hypothetical Account Balance, the value of which equals the sum of Pension Credits and Interest Credits.

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Pension Credits – Credits are granted each year on the last day of the Plan Year based on amounts listed in Appendix A of the Plan Document.

Payment of Benefits:

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Optional Forms of Payment – participants are offered a single lump sum distribution, life annuity, or 50% and 75% joint and survivor annuities.

Maximum on Benefits and Pay - benefits may not exceed the maximum limitations as defined in the Internal Revenue Code.

Classification: Schwab Internal

Schedule SB, Part V – Summary of Plan Provisions (continued)

Amount of Benefits – Benefit amounts are based on the actuarially equivalent value of the Participant's Hypothetical Account Balance.

Pre-Retirement Death Benefit - The beneficiary may elect to receive the entire benefit based on the value of the Participant's Hypothetical Account Balance.

Changes since Preceding Valuation:

No changes since the previous valuation.

Classification: Schwab Internal