

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 2022 This Form is Open to Public Inspection
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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:	☐ 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 VERSANT HEALTH HOLDCO, INC. 401(K) PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 01/14/2002
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) VERSANT HEALTH HOLDCO, INC. 939 ELKRIDGE LANDING ROAD SUITE 200 LINTHICUM, MD 21090	2b Employer Identification Number (EIN) 81-0711451 2c Plan Sponsor's telephone number 916-859-6276 2d Business code (see instructions) 524290

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2023	KIA LINDSAY
	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 (2022)
v. 220413

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 1124
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)..... h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 798 6a(2) 895 6b 7 6c 594 6d 1496 6e 2 6f 1498 6g 1157 6h 0
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: 2F 2G 2J 2K 2T 3H 2E 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) ☐ 0 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 2022 Form M-1 annual report. If the plan was not required to file the 2022 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
		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		
A Name of plan VERSANT HEALTH HOLDCO, INC. 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 VERSANT HEALTH HOLDCO, INC.	D Employer Identification Number (EIN) 81-0711451	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	76117	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

HAYS FINANCIAL GROUP

41-1931920

(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	70000	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.	
AF WASH MUTUAL R5 - AMERICAN FUNDS 95-2566717	0.05%	
(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 MID CAP IDX A - COLUMBIA MGT I PO BOX 219104 KANSAS CITY, MO 64121-9104	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.	
COL SM CAP IDX A - COLUMBIA MGT IN PO BOX 219104 KANSAS CITY, MO 64121-9104	0.35%	

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.	
DL TOTAL RTN BOND I - U.S. BANCORP 615 EAST MICHIGAN STREET, MILWAUKEE, WISCONSIN 53202 MILWAUKEE, WI 53201	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.	
INVS DEVELOP MKT A - INVESCO INVES 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.50%	
(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 ENTERPRISE I - JANUS HENDERSON 151 DETROIT STREET DENVER, CO 80206	0.10%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LS INFL PROT SEC I - DST ASSET MAN	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.
PIM INTL BD USH ADM - DST ASSET M	430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	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.
WA CORE BOND I - FRANKLIN TEMPLETO		0.10%
94-3167260		

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan VERSANT HEALTH HOLDCO, INC. 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 VERSANT HEALTH HOLDCO, INC.	D Employer Identification Number (EIN) 81-0711451	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2020 IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-187	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1628301
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2030 IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-189	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6288305
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2045 IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-192	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2149324
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2015 IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-186	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 383731
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE INC IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-196	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2985523
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2025 IS		
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.		
c EIN-PN 38-7103946-188	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2927176
a Name of MTIA, CCT, PSA, or 103-12 IE: GALLIARD STBLE RTN C		
b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.		
c EIN-PN 52-2250946-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2111628

a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2040 IS

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN 38-7103946-191	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5231793
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2035 IS

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN 38-7103946-190	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4485017
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2050 IS

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN 38-7103946-193	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1958329
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2055 IS

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN 38-7103946-194	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 811498
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2060 IS

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN 38-7103946-195	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 347460
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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**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 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>VERSANT HEALTH HOLDCO, INC. 401(K) PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VERSANT HEALTH HOLDCO, INC.</u>	D Employer Identification Number (EIN) <u>81-0711451</u>	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	1424	681
(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)	1119171	1144900
(9) Value of interest in common/collective trusts.....	1c(9)	34961686	31308085
(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)	36414344	28368343
(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	72496625	60822009

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	72496625	60822009
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	2386189	
(B) Participants	2a(1)(B)	4151608	
(C) Others (including rollovers)	2a(1)(C)	1837129	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		8374926
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	28	
(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)	52935	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		52963
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	761463	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		761463
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	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)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-3945456
(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)		-7522673
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		-2278777
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6574886	
(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)		6574886
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		12943
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)	146117	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		146117
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6733946
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-9012723
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		2661893

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: SC&H ATTEST SERVICES, P.C.

(2) EIN: 52-1743645

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
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.)		X	
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.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
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?		X	
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?	X		2572
4l	X		2572
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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.		X	
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)
METLIFE 401(K)	55-0790010	003

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 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		
A Name of plan VERSANT HEALTH HOLDCO, INC. 401(K) PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 VERSANT HEALTH HOLDCO, INC.		D Employer Identification Number (EIN) 81-0711451
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)? ☐ Yes ☐ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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
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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 _____

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

**Financial Statements
Together with Independent Auditors' Report**

**As of December 31, 2022 and 2021 and
For the Year Ended December 31, 2022**



INDEPENDENT AUDITORS' REPORT

To the Administrator of Versant Health HoldCo, Inc. 401(k) Plan:

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

We have performed audits of the accompanying financial statements of the Versant Health HoldCo, Inc. 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022 stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section—

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Versant Health HoldCo, Inc. 401(k) Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. 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 accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Versant Health HoldCo, Inc. 401(k) Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Versant Health HoldCo, Inc. 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

Our audits 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 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

SC & H Attest Services, P.C.

September 25, 2023

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Statements of Net Assets Available for Benefits

<i>As of December 31,</i>	<i>2022</i>	<i>2021</i>
Assets		
Investments, at Fair Value	\$ 59,677,109	\$ 71,377,455
Receivables		
Notes receivable from participants	1,266,888	1,222,164
Company contributions	132,807	-
Other Company contributions	-	540,343
Total Assets	61,076,804	73,139,962
Liabilities	-	-
Net Assets Available for Benefits	\$ 61,076,804	\$ 73,139,962

The accompanying notes are an integral part of these financial statements.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Statement of Changes in Net Assets Available for Benefits For the Year Ended December 31, 2022

Changes in Net Assets Available for Benefits Attributable to:

Contributions	
Company	\$ 1,978,653
Participants	4,151,608
Rollovers	1,837,129
Total Contributions	7,967,390
Investment Income (Loss)	
Interest and dividends	761,491
Net depreciation in fair value of investments	(11,468,143)
Total Investment Loss	(10,706,652)
Interest Income on Notes Receivable from Participants	59,000
Transfer to MetLife 401(k) Plan (Note 1)	(2,661,893)
Benefits Paid to Participants	(6,574,886)
Administrative Expenses	(146,117)
Net Decrease in Net Assets Available for Benefits	(12,063,158)
Net Assets Available for Benefits:	
Beginning of Year	73,139,962
End of Year	\$ 61,076,804

The accompanying notes are an integral part of this financial statement.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN

The following description of Versant Health HoldCo, Inc. 401(k) Plan (the Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan established by Versant Health HoldCo, Inc. (the Company) and covers employees of the Company's subsidiaries and other corporate entities that have adopted the Plan. The Plan does not cover leased employees, those covered by a collective bargaining agreement, and nonresident aliens. The Plan became effective on January 14, 2002 and was subsequently amended and restated January 1, 2016. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Effective January 1, 2019, the Plan was amended and restated through adoption of the Fidelity Basic Plan Document No. 17, which is a volume submitter plan. Effective March 26, 2021, the Plan was amended and restated to reflect required regulatory changes. Effective January 1, 2023, the Plan was amended to adopt an automatic enrollment provision.

On December 30, 2020, the Company was acquired by MetLife, Inc. Pursuant to the acquisition, certain employees of the Company were transferred to MetLife, Inc. As a result of the change in job classification, these participants had the option to transfer their account balances to the MetLife 401(k) Plan. Related transfers to the MetLife 401(k) Plan on June 30, 2022 totaled \$2,661,893.

Eligibility

Employees who have reached age 18 are eligible to participate in the Plan. Effective January 1, 2022, the Plan was amended to allow eligible participants to participate in the Plan after completion of three months of eligible service. Prior to January 1, 2022, participants were eligible to participate in the Plan after six months of eligible service.

Participant Contributions

Participants may make pre-tax or after-tax (Roth) contributions to the Plan up to 100% of compensation, as defined by the Plan, not to exceed the maximum allowable contribution under the Internal Revenue Code (the Code), which totaled \$20,500 for the year ended December 31, 2022. Participants who have attained or are expected to attain the age of 50 before the end of the Plan year are eligible to make additional catch-up contributions subject to limitations imposed by the Code, which totaled \$6,500 for the year ended December 31, 2022. Participants may roll over amounts, to the Plan, representing distributions from other qualified retirement plans.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Company Contributions

The Company makes safe harbor contributions equal to 100% of the first 3% and 50% of the next 2% of participants' elective deferrals of compensation on a Plan year basis. For the year ended December 31, 2022, the Company made safe harbor contributions totaling \$1,978,653.

The Company may also make annual non-elective discretionary contributions to the Plan. The amount of the non-elective discretionary contribution is determined by the Company each year. Contributions are calculated on an annual basis. There were no non-elective discretionary contributions for the year ended December 31, 2022.

Participant Accounts

Each participant's account is participant-directed and is credited with the participant's contributions and Company contributions in accordance with the investment options selected by each participant. Any earnings, losses, and administrative expenses are allocated to a participant's account based upon the balance in each account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately 100% vested in their salary deferred compensation, the Company safe harbor matching contributions, and any rollover contributions, plus actual earnings thereon. Non-elective discretionary contributions and earnings thereon shall be subject to the following vesting schedule:

Years of Service	Percentage Vested
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5	100%

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Vesting – cont'd.

All years of service are credited to determine a participant's vesting service. The method for crediting vesting service is based on years of service calculated as the aggregate number of periods beginning with the employee's employment commencement Date and each anniversary thereof that an employee is an eligible employee and ending on his subsequent severance date. Fractional periods of a year are expressed in terms of days. Upon death or disability, participants become fully vested in their account balances.

Payment of Benefits

Upon termination of service, death, disability, retirement (age 65), or the attainment of age 59 ½, a participant (or their beneficiary, in the event of death) is entitled to a lump-sum distribution of their vested account balance, as defined by the Plan. If a participant's account balance upon termination is less than or equal to \$5,000 but greater than \$1,000, the balance can be distributed to an individual retirement account or annuity without participant consent. If a participant's account balance upon termination is less than or equal to \$1,000 and no distribution election is made by the participant, the balance can be distributed at any time without participant consent. Distributions are subject to the applicable provisions of the Plan agreement. Certain income tax penalties may apply to withdrawals or distributions prior to age 59 ½.

Hardship distributions to employees are permitted from the participant's elective deferrals and the earnings attributable thereto and the vested portion of the participant's employer contribution account.

As of December 31, 2022 and 2021, there were no net assets of the Plan allocated to participants who had elected to withdraw from the Plan but had not been paid by year-end.

Notes Receivable from Participants

Participants may borrow up to 50% of their vested account balance, not to exceed \$50,000, without regard to the intended use of the funds. The minimum note amount is \$1,000 and a participant may hold two outstanding notes at any given time provided the notes have a term of less than five years. Only one note with an initial term greater than five years may be outstanding at any time. The notes are collateralized by the participant's vested account balance. Note repayments are to be made each pay period through payroll deductions. The interest rate on the loan will be determined by the Plan administrator based on the prevailing interest rates charged by persons in the business of lending money for loans. Notes for reasons other than the purchase of a primary residence are to be repaid within five years. Notes for the purchase of a primary residence are to be repaid within 30 years from the original date of the loan.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Forfeitures

Forfeitures may be used to reduce employer contributions, or pay plan expenses. At December 31, 2022 and 2021, the balance of forfeited non-vested accounts totaled \$0 and \$12,505, respectively. Forfeitures totaling \$3,327, were used to pay Plan expenses during the year ended December 31, 2022. Forfeitures totaling \$9,688 were transferred out of the Plan during the year ended December 31, 2022. There were no forfeitures used to reduce employer contributions during the year ended December 31, 2022.

Plan Expenses

The Plan's administrative expenses are paid by either the Plan or the Company as provided by the Plan. Certain administrative functions are performed by employees of the Company. No such employee receives compensation from the Plan. Expenses relating to specific participant transactions (loans and distributions) are charged directly to the participant's account. Investment related expenses are included in net depreciation in fair value of investments.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements are prepared under the accrual method of accounting whereby income is recognized when earned and expenses are recognized when incurred.

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to 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 value 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.

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires the Plan's management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

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

Fair Value Measurement

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, defines fair value and establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under ASC 820 are described below:

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

Level 2 Inputs to the valuation methodology include:

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

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value.

Interests in registered investment companies: Valued at the closing price of shares held by the Plan at year-end. Shares are traded on an active market.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

Fair Value Measurement – cont'd.

Interests in common/collective trusts: Valued at the net asset value (NAV) as determined by the issuer.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain instruments could result in a different fair value measurement at the reporting date. There have been no changes in the methodologies used as of December 31, 2022 and 2021.

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2022:

	Level 1	Level 2	Level 3	Total
Interests in registered investment companies	\$ 28,369,024	\$ -	\$ -	\$ 28,369,024
Total assets in the fair value hierarchy	28,369,024	-	-	28,369,024
Interests in common/collective trusts (a)	n/a	n/a	n/a	31,308,085
Total investments, at fair value	\$ 28,369,024	\$ -	\$ -	\$ 59,677,109

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2021:

	Level 1	Level 2	Level 3	Total
Interests in registered investment companies	\$ 36,415,769	\$ -	\$ -	\$ 36,415,769
Total assets in the fair value hierarchy	36,415,769	-	-	36,415,769
Interests in common/collective trusts (a)	n/a	n/a	n/a	34,961,686
Total investments, at fair value	\$ 36,415,769	\$ -	\$ -	\$ 71,377,455

- (a) In accordance with ASC 820-10, certain investments that are measured at net asset value per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

Fair Value Measurement – cont'd.

In accordance with the fair value measurements and disclosure guidance, the following table presents the category, fair value, redemption frequency, and redemption notice period for Plan investments, the fair value of which are estimated using the net asset value per share as a practical expedient, as of December 31,:

	2022	2021	Redemption Frequency	Redemption Notice Period	Unfunded Commitments
Interest in common/collective trusts (b)	\$31,308,085	\$34,961,686	Daily	Daily	N/A

- (b) Funds in this category invest in shares of guaranteed investment contracts, bank investment contracts, synthetic investment contracts, the underlying funds and separate account contracts. Other funds in this category are target date funds. These funds adjust asset mixes to become more conservative as the target retirement date approaches contain a mix of U.S. common stocks, international stocks, Treasury Inflation Protected Securities, U.S. issued bonds and cash.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. No allowance for credit losses has been recorded as of December 31, 2022 and 2021. No allowance for doubtful accounts has been recorded as of December 31, 2022 and 2021. Delinquent notes are treated as distributions based on the terms of the Plan agreement.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan evaluated for disclosure any subsequent events through September 25, 2023, the date the financial statements were available to be issued, and determined there were no material events that warrant disclosure, except as disclosed in Note 1.

3. INVESTMENTS

All investment information disclosed in the accompanying financial statements and supplemental schedule, including assets held at December 31, 2022 and 2021, and interest and dividend income and net depreciation in fair value of investments for the year ended December 31, 2022, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the Trustee of the Plan, FMTC.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

4. PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Fidelity Investments Institutional Operations, Inc. (FIIOC). FIIOC is related to the Plan's Trustee. The Company provides certain accounting and administrative services to the Plan for which no fees are charged. The Plan allows participants to borrow against their vested account balances. All such transactions qualify as party-in-interest transactions that are exempt from the prohibited transaction rules.

5. INCOME TAX STATUS

Effective March 26, 2021, the Plan adopted a volume submitter profit sharing plan, which received an opinion letter from the Internal Revenue Service dated June 30, 2020. The opinion letter states that the Plan document is acceptable and may be relied on by an adopting employer with respect to the qualification of the Plan under Section 401(a) of the Code. Prior to March 26, 2021, the Plan adopted a volume submitter profit sharing plan which received a favorable opinion letter from the IRS dated March 31, 2014. Although the Plan has been amended since receiving the latest opinion letter, the Plan administrator believes that the Plan is designed, and currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes the Plan continues to be qualified, and the related trust tax-exempt.

ASC 740, *Income Taxes*, prescribes a recognition threshold and a measurement attribute for the financial statement recognition and measurement of tax positions taken or expected to be taken in a tax return as well as guidance on de-recognition, classification, interest and penalties and financial statement reporting disclosures. For these benefits to be recognized, a tax position must be more-likely-than-not to be sustained upon examination by taxing authorities. Given the Plan is tax exempt and has no unrelated business income, the provisions of ASC 740 do not have an impact on the Plan's financial statements. The Plan recognizes interest and penalties accrued on any unrecognized tax exposures as a component of income tax expense. The Plan does not have any amounts accrued relating to interest and penalties as of December 31, 2022 and 2021.

The Plan is subject to routine audits by the IRS and Department of Labor; however, there are currently no audits for any periods in progress.

6. PLAN TERMINATION

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

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

7. OTHER COMPANY CONTRIBUTIONS

In the course of the audit of the Plan for the 2021 Plan year, the Company became aware of certain operational issues that occurred during certain past Plan years. Certain participants did not receive true up contributions while other participants received excess Company contributions as required by the Plan. The Company self-corrected identified matters based on IRS guidance. The estimated cumulative true up for these years, exclusive of investment earnings, totaled \$540,343, and was recorded as Other Company contribution receivable on the accompanying statement of net assets available for benefits as of December 31, 2021. The funds were received by the Plan during the year ended December 31, 2022.

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits as reported on the financial statements to the Form 5500 (Annual Return/Report of Employee Benefit Plan) as of December 31,:

	2022	2021
Net assets available for benefits reported		
on the financial statements	\$ 61,076,804	\$73,139,962
Notes receivable from participants deemed distributed	(121,988)	(102,994)
Company contributions receivable	(132,807)	-
Other Company contribution receivable	-	(540,343)
Net assets available for benefits reported		
on the Form 5500	\$ 60,822,009	\$72,496,625

The following is a reconciliation of the decrease in net assets available for benefits as reported on the financial statements to the Form 5500 for the year ended December 31, 2022:

Net decrease in net assets available for	
benefits reported on the financial statements	\$ (12,063,158)
Change in deemed distributions	(18,994)
Change in Company contributions receivable	(132,807)
Change in other Company contribution receivable	540,343
Net decrease in net assets available for	
benefits reported on the Form 5500	\$ (11,674,616)

SUPPLEMENTAL SCHEDULE PROVIDED
PURSUANT TO THE DEPARTMENT OF LABOR'S
RULES AND REGULATIONS

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN
Plan Sponsor EIN: 81-0711451
Plan Number: 001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2022

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment (including Maturity Date, Rate of Interest Collateral, Par or Maturity Value)	Cost	Current Value
	Galliard Stable Return Fund C	Interest in common/collective trust	xx	\$2,111,628
	Prudential Day One Income Institutional Class	Interest in common/collective trust	xx	2,985,523
	Prudential Day One 2015 Institutional Class	Interest in common/collective trust	xx	383,731
	Prudential Day One 2020 Institutional Class	Interest in common/collective trust	xx	1,628,301
	Prudential Day One 2025 Institutional Class	Interest in common/collective trust	xx	2,927,176
	Prudential Day One 2030 Institutional Class	Interest in common/collective trust	xx	6,288,305
	Prudential Day One 2035 Institutional Class	Interest in common/collective trust	xx	4,485,017
	Prudential Day One 2040 Institutional Class	Interest in common/collective trust	xx	5,231,793
	Prudential Day One 2045 Institutional Class	Interest in common/collective trust	xx	2,149,324
	Prudential Day One 2050 Institutional Class	Interest in common/collective trust	xx	1,958,329
	Prudential Day One 2055 Institutional Class	Interest in common/collective trust	xx	811,498
	Prudential Day One 2060 Institutional Class	Interest in common/collective trust	xx	347,460
				<u>31,308,085</u>
	AB Large Cap Growth Fund Class Z	Interest in registered investment companies	xx	6,262,537
	Columbia Mid Cap Index Fund Class A	Interest in registered investment companies	xx	1,215,640
*	Fidelity 500 Index Fund	Interest in registered investment companies	xx	5,857,974
*	Fidelity Government Money Market Fund	Interest in registered investment companies	xx	680
*	Fidelity International Enhanced Index Fund	Interest in registered investment companies	xx	978,233
*	Fidelity Small Cap Growth Fund	Interest in registered investment companies	xx	1,830,410
*	Fidelity Small Cap Index Fund	Interest in registered investment companies	xx	926,501
	Goldman Sachs Small Cap Value Insights Fund Class R6	Interest in registered investment companies	xx	218,423
	Invesco Developing Markets Fund Class A	Interest in registered investment companies	xx	466,469
	Janus Henderson Enterprise Fund Class I	Interest in registered investment companies	xx	697,501
	JP Morgan US Value Fund Class R6	Interest in registered investment companies	xx	3,798,727
	Loomis Sayles Inflation Protected Securities Fund Class Institutional	Interest in registered investment companies	xx	1,061,402
	PIMCO International Bond Fund	Interest in registered investment companies	xx	390,452
	PIMCO Real Estate Real Return Fund Institutional Class	Interest in registered investment companies	xx	436,874
	Vanguard Developed Markets Index Fund Admiral Shares	Interest in registered investment companies	xx	1,025,456
	Victory Sycamore Established Value Fund Class R6	Interest in registered investment companies	xx	375,008
	Western Asset Core Bond Fund	Interest in registered investment companies	xx	2,826,737
				<u>28,369,024</u>
*	Participant Loans	Interest rates range from 4.25% - 8.00%; maturing through July 2033	\$ -	1,144,900

* Denotes a party-in-interest, as defined by ERISA

xx Not required as investment is participant-directed

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

**Financial Statements
Together with Independent Auditors' Report**

**As of December 31, 2022 and 2021 and
For the Year Ended December 31, 2022**



INDEPENDENT AUDITORS' REPORT

To the Administrator of Versant Health HoldCo, Inc. 401(k) Plan:

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

We have performed audits of the accompanying financial statements of the Versant Health HoldCo, Inc. 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022 stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section—

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Versant Health HoldCo, Inc. 401(k) Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. 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 accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Versant Health HoldCo, Inc. 401(k) Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Versant Health HoldCo, Inc. 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

Our audits 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 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

SC & H Attest Services, P.C.

September 25, 2023

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Statements of Net Assets Available for Benefits

<i>As of December 31,</i>	<i>2022</i>	<i>2021</i>
Assets		
Investments, at Fair Value	\$ 59,677,109	\$ 71,377,455
Receivables		
Notes receivable from participants	1,266,888	1,222,164
Company contributions	132,807	-
Other Company contributions	-	540,343
Total Assets	61,076,804	73,139,962
Liabilities	-	-
Net Assets Available for Benefits	\$ 61,076,804	\$ 73,139,962

The accompanying notes are an integral part of these financial statements.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Statement of Changes in Net Assets Available for Benefits For the Year Ended December 31, 2022

Changes in Net Assets Available for Benefits Attributable to:

Contributions	
Company	\$ 1,978,653
Participants	4,151,608
Rollovers	1,837,129
Total Contributions	7,967,390
Investment Income (Loss)	
Interest and dividends	761,491
Net depreciation in fair value of investments	(11,468,143)
Total Investment Loss	(10,706,652)
Interest Income on Notes Receivable from Participants	59,000
Transfer to MetLife 401(k) Plan (Note 1)	(2,661,893)
Benefits Paid to Participants	(6,574,886)
Administrative Expenses	(146,117)
Net Decrease in Net Assets Available for Benefits	(12,063,158)
Net Assets Available for Benefits:	
Beginning of Year	73,139,962
End of Year	\$ 61,076,804

The accompanying notes are an integral part of this financial statement.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN

The following description of Versant Health HoldCo, Inc. 401(k) Plan (the Plan) provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan established by Versant Health HoldCo, Inc. (the Company) and covers employees of the Company's subsidiaries and other corporate entities that have adopted the Plan. The Plan does not cover leased employees, those covered by a collective bargaining agreement, and nonresident aliens. The Plan became effective on January 14, 2002 and was subsequently amended and restated January 1, 2016. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Effective January 1, 2019, the Plan was amended and restated through adoption of the Fidelity Basic Plan Document No. 17, which is a volume submitter plan. Effective March 26, 2021, the Plan was amended and restated to reflect required regulatory changes. Effective January 1, 2023, the Plan was amended to adopt an automatic enrollment provision.

On December 30, 2020, the Company was acquired by MetLife, Inc. Pursuant to the acquisition, certain employees of the Company were transferred to MetLife, Inc. As a result of the change in job classification, these participants had the option to transfer their account balances to the MetLife 401(k) Plan. Related transfers to the MetLife 401(k) Plan on June 30, 2022 totaled \$2,661,893.

Eligibility

Employees who have reached age 18 are eligible to participate in the Plan. Effective January 1, 2022, the Plan was amended to allow eligible participants to participate in the Plan after completion of three months of eligible service. Prior to January 1, 2022, participants were eligible to participate in the Plan after six months of eligible service.

Participant Contributions

Participants may make pre-tax or after-tax (Roth) contributions to the Plan up to 100% of compensation, as defined by the Plan, not to exceed the maximum allowable contribution under the Internal Revenue Code (the Code), which totaled \$20,500 for the year ended December 31, 2022. Participants who have attained or are expected to attain the age of 50 before the end of the Plan year are eligible to make additional catch-up contributions subject to limitations imposed by the Code, which totaled \$6,500 for the year ended December 31, 2022. Participants may roll over amounts, to the Plan, representing distributions from other qualified retirement plans.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Company Contributions

The Company makes safe harbor contributions equal to 100% of the first 3% and 50% of the next 2% of participants' elective deferrals of compensation on a Plan year basis. For the year ended December 31, 2022, the Company made safe harbor contributions totaling \$1,978,653.

The Company may also make annual non-elective discretionary contributions to the Plan. The amount of the non-elective discretionary contribution is determined by the Company each year. Contributions are calculated on an annual basis. There were no non-elective discretionary contributions for the year ended December 31, 2022.

Participant Accounts

Each participant's account is participant-directed and is credited with the participant's contributions and Company contributions in accordance with the investment options selected by each participant. Any earnings, losses, and administrative expenses are allocated to a participant's account based upon the balance in each account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately 100% vested in their salary deferred compensation, the Company safe harbor matching contributions, and any rollover contributions, plus actual earnings thereon. Non-elective discretionary contributions and earnings thereon shall be subject to the following vesting schedule:

<u>Years of Service</u>	<u>Percentage Vested</u>
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5	100%

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Vesting – cont'd.

All years of service are credited to determine a participant's vesting service. The method for crediting vesting service is based on years of service calculated as the aggregate number of periods beginning with the employee's employment commencement Date and each anniversary thereof that an employee is an eligible employee and ending on his subsequent severance date. Fractional periods of a year are expressed in terms of days. Upon death or disability, participants become fully vested in their account balances.

Payment of Benefits

Upon termination of service, death, disability, retirement (age 65), or the attainment of age 59 ½, a participant (or their beneficiary, in the event of death) is entitled to a lump-sum distribution of their vested account balance, as defined by the Plan. If a participant's account balance upon termination is less than or equal to \$5,000 but greater than \$1,000, the balance can be distributed to an individual retirement account or annuity without participant consent. If a participant's account balance upon termination is less than or equal to \$1,000 and no distribution election is made by the participant, the balance can be distributed at any time without participant consent. Distributions are subject to the applicable provisions of the Plan agreement. Certain income tax penalties may apply to withdrawals or distributions prior to age 59 ½.

Hardship distributions to employees are permitted from the participant's elective deferrals and the earnings attributable thereto and the vested portion of the participant's employer contribution account.

As of December 31, 2022 and 2021, there were no net assets of the Plan allocated to participants who had elected to withdraw from the Plan but had not been paid by year-end.

Notes Receivable from Participants

Participants may borrow up to 50% of their vested account balance, not to exceed \$50,000, without regard to the intended use of the funds. The minimum note amount is \$1,000 and a participant may hold two outstanding notes at any given time provided the notes have a term of less than five years. Only one note with an initial term greater than five years may be outstanding at any time. The notes are collateralized by the participant's vested account balance. Note repayments are to be made each pay period through payroll deductions. The interest rate on the loan will be determined by the Plan administrator based on the prevailing interest rates charged by persons in the business of lending money for loans. Notes for reasons other than the purchase of a primary residence are to be repaid within five years. Notes for the purchase of a primary residence are to be repaid within 30 years from the original date of the loan.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

1. DESCRIPTION OF THE PLAN – cont'd.

Forfeitures

Forfeitures may be used to reduce employer contributions, or pay plan expenses. At December 31, 2022 and 2021, the balance of forfeited non-vested accounts totaled \$0 and \$12,505, respectively. Forfeitures totaling \$3,327, were used to pay Plan expenses during the year ended December 31, 2022. Forfeitures totaling \$9,688 were transferred out of the Plan during the year ended December 31, 2022. There were no forfeitures used to reduce employer contributions during the year ended December 31, 2022.

Plan Expenses

The Plan's administrative expenses are paid by either the Plan or the Company as provided by the Plan. Certain administrative functions are performed by employees of the Company. No such employee receives compensation from the Plan. Expenses relating to specific participant transactions (loans and distributions) are charged directly to the participant's account. Investment related expenses are included in net depreciation in fair value of investments.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements are prepared under the accrual method of accounting whereby income is recognized when earned and expenses are recognized when incurred.

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to 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 value 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.

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires the Plan's management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

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

Fair Value Measurement

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, defines fair value and establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under ASC 820 are described below:

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

Level 2 Inputs to the valuation methodology include:

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

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value.

Interests in registered investment companies: Valued at the closing price of shares held by the Plan at year-end. Shares are traded on an active market.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

Fair Value Measurement – cont'd.

Interests in common/collective trusts: Valued at the net asset value (NAV) as determined by the issuer.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain instruments could result in a different fair value measurement at the reporting date. There have been no changes in the methodologies used as of December 31, 2022 and 2021.

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2022:

	Level 1	Level 2	Level 3	Total
Interests in registered investment companies	\$ 28,369,024	\$ -	\$ -	\$ 28,369,024
Total assets in the fair value hierarchy	28,369,024	-	-	28,369,024
Interests in common/collective trusts (a)	n/a	n/a	n/a	31,308,085
Total investments, at fair value	\$ 28,369,024	\$ -	\$ -	\$ 59,677,109

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2021:

	Level 1	Level 2	Level 3	Total
Interests in registered investment companies	\$ 36,415,769	\$ -	\$ -	\$ 36,415,769
Total assets in the fair value hierarchy	36,415,769	-	-	36,415,769
Interests in common/collective trusts (a)	n/a	n/a	n/a	34,961,686
Total investments, at fair value	\$ 36,415,769	\$ -	\$ -	\$ 71,377,455

- (a) In accordance with ASC 820-10, certain investments that are measured at net asset value per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – cont'd.

Fair Value Measurement – cont'd.

In accordance with the fair value measurements and disclosure guidance, the following table presents the category, fair value, redemption frequency, and redemption notice period for Plan investments, the fair value of which are estimated using the net asset value per share as a practical expedient, as of December 31,:

	2022	2021	Redemption Frequency	Redemption Notice Period	Unfunded Commitments
Interest in common/collective trusts (b)	\$31,308,085	\$34,961,686	Daily	Daily	N/A

- (b) Funds in this category invest in shares of guaranteed investment contracts, bank investment contracts, synthetic investment contracts, the underlying funds and separate account contracts. Other funds in this category are target date funds. These funds adjust asset mixes to become more conservative as the target retirement date approaches contain a mix of U.S. common stocks, international stocks, Treasury Inflation Protected Securities, U.S. issued bonds and cash.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. No allowance for credit losses has been recorded as of December 31, 2022 and 2021. No allowance for doubtful accounts has been recorded as of December 31, 2022 and 2021. Delinquent notes are treated as distributions based on the terms of the Plan agreement.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan evaluated for disclosure any subsequent events through September 25, 2023, the date the financial statements were available to be issued, and determined there were no material events that warrant disclosure, except as disclosed in Note 1.

3. INVESTMENTS

All investment information disclosed in the accompanying financial statements and supplemental schedule, including assets held at December 31, 2022 and 2021, and interest and dividend income and net depreciation in fair value of investments for the year ended December 31, 2022, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the Trustee of the Plan, FMTC.

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

4. PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Fidelity Investments Institutional Operations, Inc. (FIIOC). FIIOC is related to the Plan's Trustee. The Company provides certain accounting and administrative services to the Plan for which no fees are charged. The Plan allows participants to borrow against their vested account balances. All such transactions qualify as party-in-interest transactions that are exempt from the prohibited transaction rules.

5. INCOME TAX STATUS

Effective March 26, 2021, the Plan adopted a volume submitter profit sharing plan, which received an opinion letter from the Internal Revenue Service dated June 30, 2020. The opinion letter states that the Plan document is acceptable and may be relied on by an adopting employer with respect to the qualification of the Plan under Section 401(a) of the Code. Prior to March 26, 2021, the Plan adopted a volume submitter profit sharing plan which received a favorable opinion letter from the IRS dated March 31, 2014. Although the Plan has been amended since receiving the latest opinion letter, the Plan administrator believes that the Plan is designed, and currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes the Plan continues to be qualified, and the related trust tax-exempt.

ASC 740, *Income Taxes*, prescribes a recognition threshold and a measurement attribute for the financial statement recognition and measurement of tax positions taken or expected to be taken in a tax return as well as guidance on de-recognition, classification, interest and penalties and financial statement reporting disclosures. For these benefits to be recognized, a tax position must be more-likely-than-not to be sustained upon examination by taxing authorities. Given the Plan is tax exempt and has no unrelated business income, the provisions of ASC 740 do not have an impact on the Plan's financial statements. The Plan recognizes interest and penalties accrued on any unrecognized tax exposures as a component of income tax expense. The Plan does not have any amounts accrued relating to interest and penalties as of December 31, 2022 and 2021.

The Plan is subject to routine audits by the IRS and Department of Labor; however, there are currently no audits for any periods in progress.

6. PLAN TERMINATION

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

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN

Notes to the Financial Statements As of December 31, 2022 and 2021 and For the Year Ended December 31, 2022

7. OTHER COMPANY CONTRIBUTIONS

In the course of the audit of the Plan for the 2021 Plan year, the Company became aware of certain operational issues that occurred during certain past Plan years. Certain participants did not receive true up contributions while other participants received excess Company contributions as required by the Plan. The Company self-corrected identified matters based on IRS guidance. The estimated cumulative true up for these years, exclusive of investment earnings, totaled \$540,343, and was recorded as Other Company contribution receivable on the accompanying statement of net assets available for benefits as of December 31, 2021. The funds were received by the Plan during the year ended December 31, 2022.

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits as reported on the financial statements to the Form 5500 (Annual Return/Report of Employee Benefit Plan) as of December 31,:

	2022	2021
Net assets available for benefits reported		
on the financial statements	\$ 61,076,804	\$73,139,962
Notes receivable from participants deemed distributed	(121,988)	(102,994)
Company contributions receivable	(132,807)	-
Other Company contribution receivable	-	(540,343)
Net assets available for benefits reported		
on the Form 5500	\$ 60,822,009	\$72,496,625

The following is a reconciliation of the decrease in net assets available for benefits as reported on the financial statements to the Form 5500 for the year ended December 31, 2022:

Net decrease in net assets available for	
benefits reported on the financial statements	\$ (12,063,158)
Change in deemed distributions	(18,994)
Change in Company contributions receivable	(132,807)
Change in other Company contribution receivable	540,343
Net decrease in net assets available for	
benefits reported on the Form 5500	\$ (11,674,616)

SUPPLEMENTAL SCHEDULE PROVIDED
PURSUANT TO THE DEPARTMENT OF LABOR'S
RULES AND REGULATIONS

VERSANT HEALTH HOLDCO, INC. 401(k) PLAN
Plan Sponsor EIN: 81-0711451
Plan Number: 001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
As of December 31, 2022

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment (including Maturity Date, Rate of Interest Collateral, Par or Maturity Value)	Cost	Current Value
	Galliard Stable Return Fund C	Interest in common/collective trust	xx	\$2,111,628
	Prudential Day One Income Institutional Class	Interest in common/collective trust	xx	2,985,523
	Prudential Day One 2015 Institutional Class	Interest in common/collective trust	xx	383,731
	Prudential Day One 2020 Institutional Class	Interest in common/collective trust	xx	1,628,301
	Prudential Day One 2025 Institutional Class	Interest in common/collective trust	xx	2,927,176
	Prudential Day One 2030 Institutional Class	Interest in common/collective trust	xx	6,288,305
	Prudential Day One 2035 Institutional Class	Interest in common/collective trust	xx	4,485,017
	Prudential Day One 2040 Institutional Class	Interest in common/collective trust	xx	5,231,793
	Prudential Day One 2045 Institutional Class	Interest in common/collective trust	xx	2,149,324
	Prudential Day One 2050 Institutional Class	Interest in common/collective trust	xx	1,958,329
	Prudential Day One 2055 Institutional Class	Interest in common/collective trust	xx	811,498
	Prudential Day One 2060 Institutional Class	Interest in common/collective trust	xx	347,460
				<u>31,308,085</u>
	AB Large Cap Growth Fund Class Z	Interest in registered investment companies	xx	6,262,537
	Columbia Mid Cap Index Fund Class A	Interest in registered investment companies	xx	1,215,640
*	Fidelity 500 Index Fund	Interest in registered investment companies	xx	5,857,974
*	Fidelity Government Money Market Fund	Interest in registered investment companies	xx	680
*	Fidelity International Enhanced Index Fund	Interest in registered investment companies	xx	978,233
*	Fidelity Small Cap Growth Fund	Interest in registered investment companies	xx	1,830,410
*	Fidelity Small Cap Index Fund	Interest in registered investment companies	xx	926,501
	Goldman Sachs Small Cap Value Insights Fund Class R6	Interest in registered investment companies	xx	218,423
	Invesco Developing Markets Fund Class A	Interest in registered investment companies	xx	466,469
	Janus Henderson Enterprise Fund Class I	Interest in registered investment companies	xx	697,501
	JP Morgan US Value Fund Class R6	Interest in registered investment companies	xx	3,798,727
	Loomis Sayles Inflation Protected Securities Fund Class Institutional	Interest in registered investment companies	xx	1,061,402
	PIMCO International Bond Fund	Interest in registered investment companies	xx	390,452
	PIMCO Real Estate Real Return Fund Institutional Class	Interest in registered investment companies	xx	436,874
	Vanguard Developed Markets Index Fund Admiral Shares	Interest in registered investment companies	xx	1,025,456
	Victory Sycamore Established Value Fund Class R6	Interest in registered investment companies	xx	375,008
	Western Asset Core Bond Fund	Interest in registered investment companies	xx	2,826,737
				<u>28,369,024</u>
*	Participant Loans	Interest rates range from 4.25% - 8.00%; maturing through July 2033	\$ -	1,144,900

* Denotes a party-in-interest, as defined by ERISA

xx Not required as investment is participant-directed