

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 <u>01/01/2022</u> and ending <u>12/31/2022</u>	
A This return/report is for:	☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II Basic Plan Information —enter all requested information		
1a Name of plan <u>CARDINAL SERVICES, INC. 401K PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>CARDINAL SERVICES, INC.</u> <u>110 ACKERMAN AVENUE</u> <u>COOS BAY, OR 97420</u>	1c	Effective date of plan <u>07/01/1997</u>
	2b	Employer Identification Number (EIN) <u>93-0985752</u>
	2c	Plan Sponsor's telephone number <u>541-888-9799</u>
	2d	Business code (see instructions) <u>561300</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2023	MICHAEL FREEMAN
	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 1653
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year		6a(1) 1139
a(2) Total number of active participants at the end of the plan year		6a(2) 1052
b Retired or separated participants receiving benefits		6b 555
c Other retired or separated participants entitled to future benefits.....		6c 0
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 1607
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 1607
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 995
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		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: 2E 2F 2G 2J 2K 2T 3D		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 CARDINAL SERVICES, INC. 401K PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CARDINAL SERVICES, INC.	D Employer Identification Number (EIN) 93-0985752	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(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?
15 37 38 50	TPA	120122	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CARDINAL SERVICES, INC.

93-0985752

(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?
14	PLAN ADMINISTRATOR	25391	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SLAVIC MUTUAL FUND MANAGEMENT CORP

59-2749576

(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?
28 51	INVESTMENT MANAGEMENT	7056	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

a Name:	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 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>CARDINAL SERVICES, INC. 401K PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> B Three-digit plan number (PN) ► </td> <td style="width: 20%; padding: 5px; text-align: center;"> 001 </td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>		B Three-digit plan number (PN) ►	001		
B Three-digit plan number (PN) ►	001					
C Plan sponsor's name as shown on line 2a of Form 5500 <u>CARDINAL SERVICES, INC.</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> D Employer Identification Number (EIN) <u>93-0985752</u> </td> <td style="width: 20%;"></td> </tr> </table>		D Employer Identification Number (EIN) <u>93-0985752</u>			
D Employer Identification Number (EIN) <u>93-0985752</u>						

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....		1a	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....		1b(1)	30763142277
(2) Participant contributions.....		1b(2)	102266139243
(3) Other.....		1b(3)	24601887
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....		1c(1)	
(2) U.S. Government securities		1c(2)	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A)	
(B) All other		1c(3)(B)	
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A)	
(B) Common.....		1c(4)(B)	
(5) Partnership/joint venture interests		1c(5)	
(6) Real estate (other than employer real property)		1c(6)	
(7) Loans (other than to participants).....		1c(7)	
(8) Participant loans.....		1c(8)	181085191836
(9) Value of interest in common/collective trusts.....		1c(9)	
(10) Value of interest in pooled separate accounts		1c(10)	
(11) Value of interest in master trust investment accounts.....		1c(11)	
(12) Value of interest in 103-12 investment entities		1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds).....		1c(13)	1427820713057090
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	
(15) Other		1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	14594781	13532333

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	14594781	13532333
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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)	685647	
(B) Participants	2a(1)(B)	1711702	
(C) Others (including rollovers)	2a(1)(C)	20870	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2418219
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	8838	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		8838
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	369139	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		369139
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(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)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-2673959
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		122237
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1284966	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		1284966
f Corrective distributions (see instructions)	2f		323
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	145513	
(3) Investment advisory and management fees	2i(3)	8122	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		153635
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1438924
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-1316687
l Transfers of assets:			
(1) To this plan	2l(1)		260625
(2) From this plan	2l(2)		6386

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: EIDE BAILLY, LLP

(2) EIN: 45-0250958

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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)
CENTRAL OREGON BUILDING MTC. INC. 401(K) PLAN	82-4351174	001

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 CARDINAL SERVICES, INC. 401K PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 CARDINAL SERVICES, INC.		D Employer Identification Number (EIN) 93-0985752
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): 65-0708495		
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:	14a		
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).....		14b	
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)			14c
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)			
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:	15a		
a The corresponding number for the plan year immediately preceding the current plan year.....		15b	
b The corresponding number for the second preceding plan year.....			
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:	16a		
a Enter the number of employers who withdrew during the preceding plan year		16b	
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.....			
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐			

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

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

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

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____



Financial Statements

December 31, 2022 and 2021

Cardinal Services, Inc. 401(k) Plan

Cardinal Services, Inc. 401(k) Plan

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December 31, 2022 and 2021

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Independent Auditor's Report

The Board of Trustees
Cardinal Services, Inc. 401(k) Plan
Coos Bay, Oregon

Opinion

We have audited the financial statements of Cardinal Services, Inc. 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and 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.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Cardinal Services, Inc. 401(k) Plan as of December 31, 2022 and 2021, and the changes in its net assets available for benefits for the year ended December 31, 2022, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

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 Cardinal Services, Inc. 401(k) Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Cardinal Services, 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 Cardinal Services, Inc. 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule H, line 4i-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 (DOL) 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 has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

A handwritten signature in cursive script that reads "Eide Bailly LLP".

Tustin, California
October 11, 2023

Cardinal Services, Inc. 401(k) Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
Assets		
Investments, at fair value	\$ 13,057,090	\$ 14,278,207
Notes receivable from participants	191,836	181,085
Contributions receivable		
Employer	142,277	30,763
Participant	139,243	102,266
Other receivables	<u>1,887</u>	<u>2,460</u>
Net Assets Available for Benefits	<u>\$ 13,532,333</u>	<u>\$ 14,594,781</u>

Cardinal Services, Inc. 401(k) Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2022

	<u>2022</u>
Investment Income (Losses)	
Net depreciation in fair value of investments	\$ (2,673,959)
Dividends	<u>369,139</u>
	(2,304,820)
Interest income on notes receivable from participants	8,838
Contributions	
Employer	685,647
Participant	1,711,702
Rollovers	<u>20,870</u>
	<u>122,237</u>
Deductions	
Benefits paid to participants	1,285,289
Administrative expenses	<u>153,635</u>
Total deductions	<u>1,438,924</u>
Net Decrease Prior to Transfer of Assets	(1,316,687)
Transfer of Assets into the Plan	260,625
Transfer of Assets out of the Plan	<u>(6,386)</u>
Net Decrease in Assets	(1,062,448)
Net Assets Available for Benefits	
Beginning of year	<u>14,594,781</u>
End of year	<u><u>\$ 13,532,333</u></u>

Note 1 - Description of Plan

The following brief description of the Cardinal Services, Inc. 401(k) Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

Cardinal Services, Inc. is a Professional Employer Organization (PEO). The PEO provides a multiple-employer defined contribution plan for all of the participating employers utilizing its services. The Plan is subject to provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

The Investment Committee determines the appropriateness of the Plan's investment offerings and monitors investment performance.

Eligibility

Participating employers under the PEO have the option to adopt the following eligibility requirements: Active employees with no age requirement up to 21 years of age and upon completion of three consecutive months up to one year of service and 1000 hours. Employees covered by a collective bargaining agreement and non-resident aliens are excluded from participating in the Plan.

Entry Date

Employees may enter the Plan upon the first day of the month after satisfying the Plan's eligibility requirements.

Contributions

Each year, the participants may contribute up to 100% of their pretax annual compensation, as defined in the Plan. Contributions are subject to certain Internal Revenue Code (IRC) limitations. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan allows participants to designate contributions as Roth contributions. Participants may also contribute amounts representing distributions from other qualified plans (rollover).

The adoption agreement allows participating employers the following contribution types:

Elective Deferrals Only

There are no employer contributions. The plan allows pre-tax and Roth 401(k) contributions.

Discretionary Matching Contributions

The matching contribution is equal to a pre-determined percentage of the participant's elective deferral up to a pre-determined percentage of the participant's compensation during each pay period.

Employers may select whole percentages between 1% and 100%. The match is funded each payroll.

Employers can also select a maximum amount of contributions to be funded each year.

Non-Elective Profit-Sharing Contribution

Discretionary profit sharing is determined by the board of directors each year. Employees are required to be employed on the last day of the year.

Safe Harbor Elections

Safe Harbor Matching Contribution

The employer is required to contribute to each active participant in an amount equal to 100% of the participant's elective deferrals which range from 2% to 6% of the participant's compensation for each payroll period.

Safe Harbor Non-Elective Contribution

The employer is required to contribute to each active participant in an amount equal to 3% of the participant's compensation for the plan year.

Safe Harbor Matching Contribution (Basic)

The employer is required to make a matching contribution to each active participant in an amount equal to 100% of the participant's elective deferrals up to 2% of the participant's compensation and 50% of the next 2% of the participant's compensation for each payroll period.

During the year ended December 31, 2022, employer matching contributions were \$402,532 and profit sharing contributions were \$283,115.

The Plan includes an auto-enrollment provision whereby certain participating employers allow for employees to be automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 5% of eligible compensation and their contributions invested in a designated age-weighted target date fund until changed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions and employer's contributions made on behalf of the participant, as well as allocations of the Plan's earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant's earnings and losses, account balances or specific participant transactions, as defined by the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options

Upon enrollment to the Plan, a participant may direct deferrals and employer contributions in any of the funds offered by the Plan. Participants may change their investment options daily. For the adopting agreements with an auto-enrollment feature, if no investment is made by the participant, the automatic contributions will be invested into the applicable Vanguard Target Retirement Fund.

Vesting

Participants are vested immediately in their contributions, safe harbor matching and safe harbor non-elective employer contributions plus actual earnings thereon. Vesting in the employer's discretionary matching contribution and non-elective profit-sharing contributions plus actual earnings thereon, is based on years of continuous service. A participant becomes 100% vested after six years of credited service, upon attainment of normal retirement age, early retirement age, retirement due to disability, death, or termination of the Plan.

Forfeitures

At December 31, 2022 and 2021, forfeited non-vested accounts totaled \$4,058 and \$5,611, respectively. These accounts will be used to reduce future employer contributions and/or offset plan expenses. During the year ended December 31, 2022, employer contributions were reduced by \$98 from forfeited non-vested accounts and \$1,651 of forfeitures were included with transfers of plan assets into the plan.

Notes Receivable from Participants

Participants may borrow from their fund accounts, a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The notes are secured by the balance in the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined quarterly by the Plan administrator. Principal and interest is paid ratably through payroll deductions over a period not to exceed five years, unless the proceeds of the note were used to acquire the participant's residence, in which case the loan terms can range up to 15 years. A participant may have no more than two outstanding notes at any one time.

Payment of Benefits

Participants may elect to receive a lump-sum amount equal to the value of their vested interest or annual installments as defined in the Plan document upon retirement, termination of service, death or disability. Participants may also elect to take distributions from their deferred contribution account to the extent necessary to meet a financial hardship, in accordance with the regulation and ruling of the IRC.

Plan Termination

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

Note 2 - Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of the financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Actual results may differ from those estimates.

Investment Valuation and Income Recognition

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

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net depreciation includes the Plan's gains and losses on investments bought and sold as well as those held during the year.

The classification of investment earnings reported in the statement of changes in net assets available for benefits may differ from the classification of earnings on Form 5500 due to different reporting requirements on Form 5500.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Delinquent notes receivable are recorded as distributions based upon the terms of the Plan document.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Expenses

The Plan's expenses are paid by either the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statement of changes in net asset available for benefits. In addition, certain investment related expenses are included in net depreciation in fair value of investments presented in the accompanying statement of changes in net assets available for benefits.

Note 3 - Fair Value Measurements

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

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 used 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. There have been no changes in the methodologies used at December 31, 2022 and 2021.

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

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022 and 2021:

		2022			
		Level 1	Level 2	Level 3	Total
Mutual funds		\$ 13,057,090	\$ -	\$ -	\$ 13,057,090
Investments at fair value		<u>\$ 13,057,090</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 13,057,090</u>
		2021			
		Level 1	Level 2	Level 3	Total
Mutual funds		\$ 14,278,207	\$ -	\$ -	\$ 14,278,207
Investments at fair value		<u>\$ 14,278,207</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 14,278,207</u>

Note 4 - Tax Status

The Plan uses a pre-approved plan document sponsored by Slavic Integrated Administration Inc, DBA Slavic. Effective April 1, 2022, the Plan was restated as required by government regulations every six years. The Plan received an opinion letter from the Internal Revenue Service ("IRS") dated June 30, 2020, stating that the pre-approved document satisfies the applicable provisions of the IRC. The Plan's management believes that the Plan is currently designed and being operating in compliance with the applicable requirements of the IRC.

Prior to April 1, 2022, the Plan used a pre-approved plan document sponsored by Slavic Integrated Administration Inc, DBA Slavic, which received an advisory letter from the IRS, dated March 31, 2014, stating that the pre-approved document satisfies the applicable provisions of the IRC. The Plan's management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

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

Note 5 - Related Party and Party-in-Interest Transactions

Certain Plan investments consist of mutual funds as managed by Fidelity Investments, the custodian as defined by the Plan. As described in Note 2, the Plan paid certain expenses related to Plan operations and investment activity to various service providers. These transactions are exempt party-in-interest transactions under ERISA.

The PEO provides certain administrative services to the participating employers pursuant to a service agreement between the Plan and the employers. The PEO receives compensation for its services. During the year ended December 31, 2022, direct compensation amounted to \$25,391.

Note 6 - Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or global conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 7 - Transfer of Assets

As a participating employer joins the PEO, the plan assets from the participating employer's previous plan can be transferred into/out of the Plan. For the year ended December 31, 2022, \$260,625 was transferred into the Plan from various participating employers. For the year ended December 31, 2022, \$6,386 was transferred out of the Plan from various participating employers.

Note 8 - Subsequent Events

Subsequent to year end, the Plan engaged Kestra Advisory Services, LLC dba NFP as an investment advisor and consultant.

The Plan sponsor has evaluated subsequent events through October 11, 2023, the date which the financial statements were available to be issued.



Supplementary Information
December 31, 2022

Cardinal Services, Inc. 401(k) Plan

Cardinal Services, Inc. 401(k) Plan
Schedule H, Line 4i – Schedule of Assets Held at the End of Year
December 31, 2022
Plan: 001

EIN: 93-0985752

(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
	VANGUARD TARGET RETI 2025 FD INVSTR CL	Mutual Funds	**	\$ 1,911,950
	VANGUARD TOTAL STOCK MARKET INDEX ADMIRAL	Mutual Funds	**	1,636,982
	VANGUARD TARGET RETI 2035 FD INVSTR CL	Mutual Funds	**	1,175,864
	VANGUARD 500 INDEX ADMIRAL	Mutual Funds	**	1,031,528
	VANGUARD TARGET RETI 2045 FD INVSTR CL	Mutual Funds	**	830,920
	VANGUARD INT-TERM BOND INDEX ADMIRAL	Mutual Funds	**	673,247
	VANGUARD FED RESERVE NNKT INVESTOR CL	Mutual Funds	**	565,339
	VANGUARD TARGET RETI 2040 INVSTR	Mutual Funds	**	543,376
	VANGUARD TARGET RETI 2055 FD INVSTR	Mutual Funds	**	518,879
	VANGUARD TARGET RETI 2050 INVSTR	Mutual Funds	**	476,686
	VANGUARD TARGET RETI 2030 INVSTR	Mutual Funds	**	460,948
	ISHARES MSCI EAFE INTERNATNL INDEX K	Mutual Funds	**	430,281
	VANGUARD TARGET RETI 2020 INVSTR	Mutual Funds	**	264,439
	VANGUARD CONSUMER STAPLES INDEX ADMIRAL CL	Mutual Funds	**	245,550
	VANGUARD MID-CAP VALUE INDEX ADMIRAL	Mutual Funds	**	227,562
	NEW PERSPECTIVE FUND CL R6	Mutual Funds	**	192,672
	VANGUARD SMALL-CAP GROWTH INDEX ADMIRAL	Mutual Funds	**	192,441
	VANGUARD US GROWTH ADMIRAL	Mutual Funds	**	188,517
	VANGUARD ENERGY INDEX ADMIRAL CL	Mutual Funds	**	187,885
*	FIDELITY US BOND INDEX FUND	Mutual Funds	**	185,403
	VANGUARD INFORMATION TECH IND ADMIR SHS	Mutual Funds	**	176,406
	VANGUARD TARGET RETI 2060 FD INVSTR	Mutual Funds	**	172,524
	VANGUARD SMALL CAP INDEX ADMIRAL SHS	Mutual Funds	**	123,071
	VANGUARD SHOR TERM FEDERAL ADMIRAL	Mutual Funds	**	114,376
	VANGUARD MID CAP INDEX ADMIRAL SHS	Mutual Funds	**	98,753
	VANGUARD VALUE INDEX ADMIRAL	Mutual Funds	**	76,173
	VANGUARD SHORT TERM BOND INDEX ADMIRAL	Mutual Funds	**	71,971
	VANGUARD TARGET RETI 2065 INVSTR	Mutual Funds	**	57,773
	AMERICAN FUNDS EURO PACIFIC GROWTH CL R6	Mutual Funds	**	53,253
	DFA REAL ESTATE SEC PRFT INSTL	Mutual Funds	**	51,620
	VANGUARD MID-CAP GROWTH INDEX ADMIRAL	Mutual Funds	**	42,431
	VANGUARD SHORT TERM INFLTN PROT SEC ADMR	Mutual Funds	**	17,120
	VANGUARD TARGET RET INC FD INV	Mutual Funds	**	16,710
	INVESCO GOLD & SPEC MINERALS R6	Mutual Funds	**	15,804
	DFA EMERGING MRKTS CORE EQU PORTF	Mutual Funds	**	14,723
	JPMORGAN CORE PLUS BOND FUND CLASS R6	Mutual Funds	**	7,031
	VANGUARD SMALL-CAP VALUE INDEX ADMIRAL	Mutual Funds	**	2,871
	PRINCIPAL HIGH YIELD INSTL	Mutual Funds	**	2,318
	VANGUARD INFLATION PROCTED SEC ADM CL	Mutual Funds	**	1,675
	VANGUARD TARGET RETI 2070 FD INVSTR	Mutual Funds	**	18
				<u>\$ 13,057,090</u>
*	Notes receivable from participants	Maturing 2023-2031 at interest rates of 3.00-7.25%		<u>191,836</u>
	Total			<u><u>\$ 13,248,926</u></u>

* A party in-interest as defined by ERISA

** Not applicable for a participant-directed plan.

Multiple-Employer Plan Participating Employer Information

CARDINAL SERVICES, INC. 401K PLAN		PLAN # 001	EIN #	93-0985752
(a) Name of participating employer	(b) EIN	(c) Balance at the end of the year	(d) Percent of total contributions	
A Better Bar LLC DBA Rye Restaurant	27-1159664	7,440	0.23%	
A Quality Construction Co LLC	47-3800272	25,108	0.35%	
Abiding Joy, LLC	83-2829882	844	0.00%	
Advanced Property Management	26-1228556	12,178	0.19%	
Alliance Counseling Center	20-4438598	200,460	3.70%	
Alternative Youth Activities	93-0735343	12,187	0.55%	
American Painting (The Conard Company)	93-1238457	10,900	0.00%	
Anna Marie Moran OD	51-7749100	3,780	0.11%	
Armadillo Roofing, Inc	93-1241105	-	0.00%	
Ascensions Child Development Program, LLC	81-4830786	1,082	0.00%	
At Your Service Construction, LLC	47-3855232	227	0.01%	
Autowerks Exclusive LLC	20-8967659	3,348	0.05%	
Bassett-Hyland Energy Company	93-0764831	2,656,964	5.01%	
Bayshore Auto Repair	46-0516275	15,875	0.39%	
Belisle's Dentures by Design	54-4153812	-	0.00%	
Betty Kwan Chinn Homeless Foundation	46-1413135	1,841	0.08%	
Books by the Bay	90-0255639	2,689	0.05%	
Bradford Place, LLC	91-1863982	3,627	0.06%	
Brown Livestock LLC	91-1811860	1,448	0.00%	
Bully Garden Supply LLC	45-4954648	7,673	0.11%	
Cafe Dejeuner	54-4606900	995	0.00%	
Canterberry Roofing LLC	83-1310581	18,787	0.30%	
Cardinal Services SUSPENSE PLAN	22-5112256	124,836	0.00%	
Cardinal Services, Inc.	93-0985752	1,680,098	12.93%	
Central Oregon Building Maintenance	82-4351174	-	0.06%	
Central Oregon Evaluation & Related Company	27-4043050	11,311	0.31%	
Central Oregon Shooting Sports Association	94-3713926	-	0.00%	
Central Window Washing & Janitorial	93-1299913	15,005	0.24%	
CFE LLC	26-0711985	10,235	0.26%	
Charlie Tree Service	46-1403406	2,262	0.04%	
Checkerberry's Flowers and Gifts	93-1213188	4,158	0.12%	
Christian Logging LLC	82-4853126	182,744	2.74%	
Cleanline Painting, LLC	83-3869787	1,248	0.00%	
Coburg Road Car Wash, Inc	45-3818437	21,272	0.00%	
Colbee, LLC	20-0800746	3,777	0.07%	
Combined Communications, Inc.	93-0993152	543,893	4.30%	
Comfort Construction, LLC	27-2236147	21,262	0.42%	
Cooperative Management, Inc.	85-1695831	10,103	0.46%	
Coos Bay Downtown Association	93-0824903	8,916	0.17%	
Coos Bay Properties R.E. LLC	46-4650687	59,804	1.47%	
Coos Bay/North Bend Visitors Convention Bureau	93-1241434	40,548	0.49%	
Corellian Software, Inc	47-1372895	302,420	2.51%	
Dale C. Johnson, Lawyer	93-1239650	4,143	0.03%	
Dale Luoma Painting & Design, Inc	93-1243789	18,237	0.06%	
Dane E. Smith	93-1277194	-	0.00%	
Darling's Lawn Service	27-2660862	1,405	0.02%	
Deer Haven Construction, Inc.	26-4097316	4,326	0.06%	
Deschutes Dental Center	93-1199296	1,781	0.00%	
DHFFITNESS LLC	81-4122147	5,295	0.07%	
Diamond Lake Mini Storage LLC	26-1636183	5,224	0.07%	
Dirty Dog Grooming LLC	82-5061876	5,884	0.18%	
Double R Builders Corporation	45-5435212	3,284	0.00%	
Dr. Michelle K. Jackson	46-0501145	493	0.02%	
Eagle Ridge Construction, LLC	46-1104699	8,873	0.15%	
Edstar, Inc. DBA Terry's Diner	93-1091974	21,063	0.51%	
Egyptian Theatre Preservation Association	68-0624507	16,368	0.34%	
Electric Hospital	93-0799648	8,626	0.18%	
Elite Forklift Services, LLC	27-1955379	9,023	0.72%	
Eric M Cadwell DDS PLLC dba PureCare Dental of Bend	27-2905707	698,713	5.56%	
Estreet Oregon Inc DBA Senior Helpers Portland	87-4029827	2,053	0.05%	
Eugene Pallet Enterprises, Inc	46-3776672	35,076	0.66%	
Falken Construction LLC	47-4992934	2,997	0.06%	
Feige & Associates, Inc.	46-0484870	11,804	0.33%	
Flowerland Nursery	47-4417449	1,805	0.04%	
Fred Hodecker Inc dba Mid-State Fertilizer	93-0569384	871,804	1.42%	
Gardencraft	14-2486606	604	0.03%	
Glenwood Mobile Home Park	85-6132140	-	0.00%	
Gold Beach Wood Floors & Construction	93-1297644	312	0.00%	
Gold Coast Swim Team	42-1641386	219	0.01%	
Golder Co. Inc	93-0684930	14,172	0.27%	

CARDINAL SERVICES, INC. 401K PLAN PLAN # 001
EIN #
93-0985752

(a) Name of participating employer	(b) EIN	(c) Balance at the end of the year	(d) Percent of total contributions
Gooneys Sports Bar	93-1168548	702	0.00%
Great Northern Trailer Works, Inc & Co-adopting Companies	30-0299070	1,912	0.00%
Greek Apron Catering LLC	81-2908132	6,867	0.12%
Hagen Construction LLC	83-2286279	7,342	0.14%
Hallowed Construction	81-5155153	3,397	0.06%
Hans Johnson	54-1029628	2,709	0.03%
Harbor Storage LLC	46-0683029	114	0.01%
Harvest Store	54-1845135	-	0.00%
Health Insurance Strategies LLC	71-1027208	295,330	1.15%
Hess Ventures, LLC	84-4174096	2,915	0.07%
Highway Deli Mart	20-2262832	8,055	0.00%
Hilton Fuel and Supply Company & Co-Adopting Companies	93-0743417	233,797	4.33%
HWM Equipment Repair	54-3068016	223	0.01%
Illinois Valley Watershed Council	26-4448321	539	0.02%
Immortal Threads, Inc ABN Fibers and Stitches	37-1694681	5,398	0.10%
Integral Youth Services	93-0981933	12,111	0.19%
J & R Custom Canopy	93-1294355	155,026	0.00%
Jay Morris Construction	54-3881375	11,773	0.25%
Jerry's Outdoor Power & Outerwear	93-1160858	352	0.04%
Joseph Arpaia, M.D.	93-1300974	1,205	0.02%
Joseph Brown Woodworking	54-3064595	4,116	0.07%
JP Coast Investments Inc	91-1754527	31,875	1.43%
Just Bucket Excavation, Inc.	93-1297540	97,687	1.67%
Koos Bay Mixer	43-2107519	324,073	0.00%
Kronsberg Construction, Inc.	91-1849631	3	0.00%
KSI Agency Inc. dba Farmers Insurance	47-4956482	-	0.00%
Kunert Electric, LLC	93-1235309	4,392	0.03%
L B Engineering	91-1786228	83,398	0.29%
LD Financial LLC	52-1760137	1,314	0.01%
Let's Talk Diversity Coalition, Inc.	81-3530015	5,539	0.00%
Luminare Press	45-2450128	13,097	0.29%
Mark Hanrahan Construction	54-4667344	13,395	0.19%
Mark Hosmer Painting	56-1900074	6,646	0.09%
Martin' Plumbing & Electric Supply, Co. DBA Perrys Supply	27-4420381	110,359	1.93%
Mel's Marine Service, Inc	93-1163136	36,002	0.55%
Michael Simmons Construction	56-6082376	1,406	0.04%
Mingus Park Pool	93-0729779	2,287	0.06%
Moe's Super Lube Inc.	93-1170904	384	0.03%
Moles Veterinary Clinic, INC	46-4734934	244,026	0.00%
Morrell Logging, LLC	20-2231310	197,541	3.11%
Mother's Natural Grocery Sheri McGrath	47-1655047	588	0.01%
Mountain View Imports	81-0566196	92,559	0.49%
Mulberry Court LLC	36-7675848	9,576	0.11%
Nancy Devereux Center, Inc.	93-0822406	19,128	0.37%
Nathan Perry Heating & Air Conditioning	46-1869165	49,754	0.90%
Natural Felt, Inc. & Co-adopting Companies	81-1155022	11,881	0.30%
NEB, Inc	80-0773276	3,716	0.13%
North Bend Lanes	93-0463122	398,285	0.92%
North Bend Senior Center	93-0773478	145	0.01%
Norton Mini Storage	55-5648188	-	0.00%
Noster Kitchen, LLC	82-0642155	843	0.00%
NW Industrial Hydraulics, Inc	74-3093572	200,406	0.14%
Nye Beach Caf��	68-0572406	-	0.00%
O'Brien Construction & Design, LLC	30-0782419	4,115	0.05%
OHM Equity Partners LLC	56-2561927	1,542	0.03%
Oregon Bay Properties, LLC	80-0507637	144	0.00%
Oregon Resources Corporation	93-1010006	10,228	0.00%
Osprey Cafe	47-1287661	11,198	0.27%
Outback Wildfire, LLC	83-3579958	1,004	0.00%
Pacific Village Mobile Home Park	86-0958567	-	0.00%
Paladin Data Corporation	93-0927111	-	0.00%
Paradise Golf LLC DBA Senior Helpers Portland West	83-0701706	6,457	0.02%
Phil Bernhardt & Sons General Contractors LLC	57-1228652	2,585	0.06%
Philomath Towne Pump	27-0474086	70,441	1.12%
Pho The Good Times LLC	45-5145902	7,189	0.19%
Plummers Plumbing	90-0131869	10,591	0.18%
ProVend Services LLC	20-2586445	1,254	0.00%
R&R Roofing, LLC	36-4900557	1,454	0.02%
R3 Homes, LLC	84-4656631	8,506	0.28%
Radius Design, LLC	81-0970249	4,127	0.15%
Ramshack Enterprises, Inc	20-3488206	11,433	0.27%
REACH Redmond	47-1465358	20,017	0.17%

CARDINAL SERVICES, INC. 401K PLAN PLAN # 001**EIN #****93-0985752**

(a) Name of participating employer	(b) EIN	(c) Balance at the end of the year	(d) Percent of total contributions
Resort Spas & Billiards	32-0113508	74,951	0.00%
Reynolds Consultation, Inc. ABA Senior Helpers of Salem	26-3339495	9,476	0.00%
Richard Weaver Construction	57-4601745	534	0.00%
River Edge Construction & Landscapes LLC	81-4390880	339	0.02%
Rodeo Steakhouse & Grill	27-2349585	-	0.00%
Rogue Rock Gym LLC	20-2638117	4,241	0.10%
Ronald L DeLuca Revocable Trust	52-2669521	-	0.00%
Rosewood Homeowners Cooperative	36-4947669	1,592	0.04%
Roy A. Ott General Contractor	54-5862017	2,725	0.04%
Run! Day Camp For Dogs, LLC	87-0812765	36,328	0.58%
Russell Dean Anderson dba Russell Anderson Contracting	51-8885297	407,251	2.68%
S & L Enterprises DBA Chubb's and related companies	27-1244674	24,897	0.31%
Sand to Hand, Inc.	86-1337335	-	0.00%
Scott's Fast Market Inc. & Related Company	38-3675578	24,044	0.49%
Seafood Enterprises LLC	27-1438667	10,602	0.18%
Shock Construction, LLC	82-1210414	-	0.00%
Sidney's Indoor Garden and Lighting Corp	47-4629332	2,607	0.06%
Signature Imports Inc	93-1047985	0	0.00%
Single Tree Electric & Consultants, LLC	93-1221730	15,965	0.23%
Siuslaw Watershed Council	93-1234456	40,886	0.74%
Skogman Flooring	83-3944168	2,952	0.11%
Skylight Homebuilders Inc.	47-2071785	14,463	0.27%
Smith's Bayway Market	80-0773393	-	0.00%
Smokin' Friday BBQ	46-0698491	0	0.00%
Solo Cafe	55-3592317	2,492	0.04%
South Coast Construction	93-1151926	15,823	0.25%
South Coast Family Harbor	46-3458457	759	0.00%
Southern Oregon Fine Meats	83-2864288	5,711	0.10%
Southwest Rehabilitation	93-1269641	19,116	0.31%
Southwestern Oregon Workforce Investment Board	47-3873798	288,261	4.06%
Sporks a la Cart, LLC	46-2453749	716	0.02%
Stonehaven Masonry	83-2128135	1,246	0.02%
Storage 2U, LLC	81-4438262	324,564	7.53%
Sunset Bay Golf Course	93-0831903	1,425	0.02%
Sweet Creek, Inc	20-4103952	1,105	0.00%
The Butcher Shop, Inc.	90-0226540	5,134	0.13%
The deNovo Initiative	87-3930773	95,495	4.43%
The Great Outdoors Grill	27-2993224	4,939	0.07%
The Retirement Planning Group	93-1066440	13,258	0.26%
The Steel Outlet, Inc. & Co-adopting Companies	36-4704195	22,391	0.36%
The Vault Taphouse	46-3752939	5,752	0.15%
Three Sisters Landscaping	54-1860981	12,750	0.08%
TNT Market	93-0918469	103,637	0.37%
Travel Southern Oregon Coast	82-1190062	37,210	1.02%
Triune In-Home Care, LLC & Co-adopting Companies	82-1146183	273,741	3.08%
Tropical Beach Tanning and Wellness, LLC	81-3193603	241	0.01%
Umpqua Landscape Maintenance LLC	27-3382617	202	0.00%
Uncle Jim's Ala Cart	93-0911731	1,427	0.00%
Waibel Ranches LLC/Waibel Ranches Texas LLC	26-1793503	440,049	0.00%
Western Water Development Corp.	93-1080296	18,085	0.44%
Whales Tail Candy & Gifts	80-0544016	232	0.00%
Wheel Fun Rentals	55-0827739	5,834	0.06%
Whit Industries	52-8592728	3,042	0.07%
White Cloud Enterprises	54-3219935	6,031	0.10%
Williams Machine and Fabrication	93-1042300	-	0.00%
Wingspread Mobile Home Park	68-0447175	1,124	0.01%
Zimmerman Construction Inc	93-1235506	42	0.00%

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT THE END OF THE YEAR).

CARDINAL SERVICES, INC. 401K PLAN

PLAN # 001

EIN # 93-0985752

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	BlackRock	BTMKX - iShares MSCI EAFE International Index Fund Class K		430,280
	Dimensional Fund Advisors	DFCEX - DFA Emerging Markets Core Equity Portfolio Institutional Class		14,723
	Dimensional Fund Advisors	DFREX - DFA Real Estate Securities Portfolio Institutional Class		51,620
	Fidelity	FXNAX - Fidelity US Bond Index Fund		185,403
	JPMorgan	JCPUX - JPMorgan Core Plus Bond Fund R6		7,031
	Oppenheimer Funds	OGMIX - Oppenheimer Gold & Special Minerals I		15,804
	Principal	PHYTX - Principal Investors High Yield II		2,318
	American Funds	RERGX - American Funds EuroPacific Growth Fund Class R6		53,253
	American Funds	RNPGX - American Funds New Perspective R6		192,672
	Vanguard	VAIPX - Vanguard Inflation-Protected Securities Fund Admiral Shares		1,675
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Fund Admiral Shares		673,247
	Vanguard	VBIRX - Vanguard Short-Term Bond Index Fund Admiral Shares		71,971
	Vanguard	VCSAX - Vanguard Consumer Staples Index		245,550
	Vanguard	VENAX - Vanguard Energy Index Admiral		187,885
	Vanguard	VFFVX - Vanguard Target Retirement 2055		518,879
	Vanguard	VFIAX - Vanguard 500 Index Admiral		1,031,527
	Vanguard	VFIFX - Vanguard Target Retirement 2050		476,686
	Vanguard	VFORX - Vanguard Target Retirement 2040		543,376
	Vanguard	VIMAX - Vanguard Mid-Cap Index Fund Admiral Shares		98,753
	Vanguard	VITAX - Vanguard Information Technology Index Fund Admiral Shares		176,406
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		57,773
	Vanguard	VMFXX - Vanguard Federal Money Market Fund Investor Shares		565,339
	Vanguard	VMGMX - Vanguard Mid-Cap Growth Index Fund Admiral Shares		42,431
	Vanguard	VMRXX - Vanguard Cash Reserves Federal Adm		0
	Vanguard	VMVAX - Vanguard Mid Cap Value Index Admiral		227,563
	Vanguard	VSGAX - Vanguard Small-Cap Growth Index Fund Admiral Shares		192,441
	Vanguard	VSGDX - Vanguard Short-Term Federal Fund Admiral Shares		114,376
	Vanguard	VSIAX - Vanguard Small Cap Value Index Fund Admiral Shares		2,871
	Vanguard	VSMAX - Vanguard Small-Cap Index Fund Admiral Shares		123,071
	Vanguard	VSVNX - Vanguard Target Retirement 2070		18
	Vanguard	VTAPX - Vanguard Short-Term Inflation-Protected Securities Index Fund Admiral Shares		17,120
	Vanguard	VTHRXX - Vanguard Target Retirement 2030		460,948
	Vanguard	VTINX - Vanguard Target Retirement Income		16,710
	Vanguard	VTIVX - Vanguard Target Retirement 2045		830,919
	Vanguard	VTSAAX - Vanguard Total Stock Market Index Fund Admiral Shares		1,636,982
	Vanguard	VTTHX - Vanguard Target Retirement 2035		1,175,864
	Vanguard	VTTSX - Vanguard Target Retirement 2060		172,524
	Vanguard	VTTVX - Vanguard Target Retirement 2025		1,911,950
	Vanguard	VTWNX - Vanguard Target Retirement 2020		264,439
	Vanguard	VVIAX - Vanguard Value Index Fund Admiral Shares		76,173
	Vanguard	VWUAX - Vanguard Us Growth Admiral		188,517
	Participant Loans	3.00% - 7.25%		191,836