

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>BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN</u>	1b Three-digit plan number (PN) ▶	<u>002</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>BUFFALO MEDICAL GROUP, P.C.</u> <u>85 HIGH STREET</u> <u>BUFFALO, NY 14203</u>	1c Effective date of plan <u>11/01/1972</u>	2b Employer Identification Number (EIN) <u>16-1000580</u>
	2c Plan Sponsor's telephone number <u>716-630-2500</u>	2d Business code (see instructions) <u>621111</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	DEBORAH L. BAUER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	DEBORAH BAUER
	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 1340
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) 875
a(2) Total number of active participants at the end of the plan year		6a(2) 895
b Retired or separated participants receiving benefits		6b 10
c Other retired or separated participants entitled to future benefits.....		6c 492
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 1397
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 1397
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 1397
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: 2R 2E 2F 2G 2J 2K 2T 2S		
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) ☒ 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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	B Three-digit plan number (PN)	002
BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
BUFFALO MEDICAL GROUP, P.C. 16-1000580		

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	313686	1	01/01/2022	12/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.	
(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).	
(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid	

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid			

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end.....	4	3661
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	15632

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶ RETIREMENT INVESTMENT ANNUITY

b	Balance at the end of the previous year	7b	4365
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c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	41	
	(4) Transferred from separate account	7c(4)		
	(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	41
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	4406
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	710	
	7e(2)	35	
	7e(3)		
	7e(4)		

(5) Total deductions	7e(5)	745
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	3661
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 BUFFALO MEDICAL GROUP, P.C.	D Employer Identification Number (EIN) 16-1000580	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	313687	1	01/01/2022	12/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.
--

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end.....	4	9460
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	33922

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.....**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
 (3) ☐ guaranteed investment (4) ☒ other ▶ RETIREMENT INVESTMENT ANNUITY

b Balance at the end of the previous year **7b** 11234**c** Additions: (1) Contributions deposited during the year**7c(1)**

(2) Dividends and credits.....

7c(2)

(3) Interest credited during the year.....

7c(3) 104

(4) Transferred from separate account.....

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions..... **7c(6)** 104**d** Total of balance and additions (add lines **7b** and **7c(6)**)..... **7d** 11338**e** Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1) 1814

(2) Administration charge made by carrier.....

7e(2) 64

(3) Transferred to separate account.....

7e(3)

(4) Other (specify below)

7e(4)

▶

(5) Total deductions..... **7e(5)** 1878**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 9460

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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	B Three-digit plan number (PN)	002
BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
BUFFALO MEDICAL GROUP, P.C.		
16-1000580		

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-1050034	93629	038446	1397	01/01/2022	12/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end.....	4	19995840
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	142136048

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GUARANTEED GENERAL ACCOUNT CONTRACT**

b	Balance at the end of the previous year	7b	20317550
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c	Additions: (1) Contributions deposited during the year	7c(1)	587233	
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	337258	
	(4) Transferred from separate account	7c(4)	2690072	
	(5) Other (specify below)	7c(5)	256545	

▶ **TRANSFERS IN MISCELLANEOUS IN**

(6) Total additions	7c(6)	3871108
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	24188658
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1412600	
(2) Administration charge made by carrier	7e(2)		
(3) Transferred to separate account	7e(3)	2544784	
(4) Other (specify below)	7e(4)	235434	

▶ **TRANSFERS OUT MISCELLANEOUS OUT FORFEITURES DEBITS**

(5) Total deductions	7e(5)	4192818
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	19995840
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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 BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 BUFFALO MEDICAL GROUP, P.C.	D Employer Identification Number (EIN) 16-1000580	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND
06-1050034

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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)

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(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?
13 15 50 64	NONE	28164	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

CADET, GRANT, & CO. INC

22-2361254

(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?
17	NONE	20000	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
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.	
PRUDENTIAL INVESTMENTS, LLC 22-3468527	22.000 BPS AND \$0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2022 TO 12/31/2022 PGIM GLOBAL TOTAL RET Z	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.	
PRUDENTIAL INVESTMENTS, LLC 22-3468527	22.000 BPS AND \$0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2022 TO 12/31/2022 PGIM QNT SOL MC VAL Z	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.	
PRUDENTIAL INVESTMENTS, LLC 22-3468527	22.000 BPS AND \$0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2022 TO 12/31/2022 PGIM QNT SOL SC VAL Z	

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 BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN	B Three-digit plan number (PN) ►	002
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 BUFFALO MEDICAL GROUP, P.C.	D Employer Identification Number (EIN) 16-1000580	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
--------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: CORE BD ENHANCED IDX/PGIM			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-036	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1994966	
a Name of MTIA, CCT, PSA, or 103-12 IE: DRYDEN S&P500 INDEX - ISP			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-123	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13861366	
a Name of MTIA, CCT, PSA, or 103-12 IE: EMRGMRKTEQ/PGIMQUANTSOL			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-030	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1875884	
a Name of MTIA, CCT, PSA, or 103-12 IE: INTL BLD/WELLINGTON			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-349	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9358520	
a Name of MTIA, CCT, PSA, or 103-12 IE: LCG/JP MORGAN INV MGMT			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-141	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12586934	
a Name of MTIA, CCT, PSA, or 103-12 IE: LCV/LSV ASSET MGMT			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-318	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12170726	
a Name of MTIA, CCT, PSA, or 103-12 IE: MCG/ARTISAN PARTNER			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-185	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5286285	

a Name of MTIA, CCT, PSA, or 103-12 IE: SCG/TIMESSQUARE		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-132	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3075856
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2015 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-678	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1770919
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2020 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-689	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5379930
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2025 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-690	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13146854
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2030 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-691	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7439666
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2035 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-692	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10302006
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2040 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-693	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9794272
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2045 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-694	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4968107
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2050 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-685	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4456149
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2055 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-696	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3028015

a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2060 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-700	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2009565
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE 2065 FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-838	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 195655
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE INCOME FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-697	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3561272
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU LONG CORP BOND - ISP		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-526	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9736492
a Name of MTIA, CCT, PSA, or 103-12 IE: PRUREALASSETSFD		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-789	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2610690
a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM QS IN DV MK ID - ISP		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-791	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1429534
a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM QS MID CAP IDX - ISP		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-833	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1203001
a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM QS SML CAP IDX - ISP		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-832	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 893384
a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LIQUID ASSET SEP ACCT-PRO		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-024	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13069
a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL LGCAP S&P 500 IDX SA-PRO		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-016	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36484

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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>BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BUFFALO MEDICAL GROUP, P.C.</u>	D Employer Identification Number (EIN) <u>16-1000580</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)	55771534912536
(2) Participant contributions.....		1b(2)	202219158084
(3) Other.....		1b(3)	
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)	3002022943
(6) Real estate (other than employer real property)		1c(6)	
(7) Loans (other than to participants).....		1c(7)	
(8) Participant loans.....		1c(8)	
(9) Value of interest in common/collective trusts.....		1c(9)	
(10) Value of interest in pooled separate accounts		1c(10)	161220161142185602
(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)	110841039843637
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	2031755019995840
(15) Other		1c(15)	34121443095478

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	201843350	180214120

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	201843350	180214120
---	-----------	-----------	-----------

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)	5559113	
(B) Participants	2a(1)(B)	6465192	
(C) Others (including rollovers)	2a(1)(C)	524594	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		12548899
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)		
(F) Other	2b(1)(F)	337258	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		337258
(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)	250823	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		250823
(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)	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)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-19034506
(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)		-9199255
c Other income	2c		6522
d Total income. Add all income amounts in column (b) and enter total	2d		-15090259
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6556561	
(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)		6556561
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	20000	
(2) Contract administrator fees	2i(2)	28270	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	-65860	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		-17590
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6538971
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-21629230
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **TRONCONI SEGARRA & ASSOCIATES LLP**

(2) EIN: **04-3728817**

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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 BUFFALO MEDICAL GROUP, P. C. 401K PROFIT SHARING AND PENSION PLAN		B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 BUFFALO MEDICAL GROUP, P.C.		D Employer Identification Number (EIN) 16-1000580
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 22-1211670		
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 _____

**Buffalo Medical Group, P.C.
401(k) Profit Sharing and
Pension Plan**

**Financial Statements and
Supplemental Information**

December 31, 2022 and 2021

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Financial Statements

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Independent Auditors' Report

To the Participants and Plan Administrator of the
Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Buffalo, New York

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

We have performed an audit of the accompanying financial statements of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension 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, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

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

Opinion

In our opinion, based on our audit 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 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 audit 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 Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management

Management is responsible for the preparation and fair presentation of these 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 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

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 auditing standards generally accepted in the United States of America 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 auditing standards generally accepted in the United States of America, we:

- Exercise professional judgement 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 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 judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our 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 Schedules 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the 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 the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. 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 DOL'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 DOL'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).

Tronconi Segura & Associates LLP

Williamsville, New York
October 2, 2023

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Investments</i>		
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value:		
Guaranteed Income Fund	19,995,840	20,317,550
Cash surrender value of life insurance contracts	<u>280,659</u>	<u>274,136</u>
Total investments	175,143,500	196,063,978
<i>Receivables</i>		
Participant contributions receivable	158,084	202,219
Sponsor contributions receivable	<u>4,912,536</u>	<u>5,577,153</u>
Total receivables	5,070,620	5,779,372
Net assets available for benefits	<u>\$ 180,214,120</u>	<u>\$ 201,843,350</u>

See independent auditors' reports and notes to financial statements.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Changes in Net Assets Available for Benefits
for the years ended December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Additions to Net Assets Attributed to:</i>		
Contributions:		
Sponsor	\$ 5,559,113	\$ 6,040,782
Participant	6,465,192	6,027,249
Rollovers	<u>524,594</u>	<u>148,083</u>
 Total contributions	 12,548,899	 12,216,114
Investment income:		
Interest and dividends	588,081	555,320
Net appreciation in fair of investments	<u>0</u>	<u>23,433,795</u>
 Net investment income	 588,081	 23,989,115
Increase in cash surrender value of life insurance contracts	<u>6,522</u>	<u>6,875</u>
 Total additions	 13,143,502	 36,212,104
 <i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	6,556,561	10,780,555
Net depreciation in fair of investments	28,233,761	0
Administrative expenses (credits)	<u>(17,590)</u>	<u>30,056</u>
 Total deductions	 34,772,732	 10,810,611
 Net increase (decrease)	 (21,629,230)	 25,401,493
 <i>Net Assets Available for Benefits:</i>		
Beginning of year	<u>201,843,350</u>	<u>176,441,857</u>
 End of year	 <u>\$ 180,214,120</u>	 <u>\$ 201,843,350</u>

See independent auditors' reports and notes to financial statements.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements

1. Description of Plan

The following description of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension Plan (the “Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan sponsored by Buffalo Medical Group, P.C. (the “Group” or “Plan Sponsor”). Employees are eligible to participate in the Plan solely for making pre-tax contributions and receiving employer matching contributions after completing 60 days of service and attaining age 21. Employees are eligible to participate in the discretionary contribution feature of the Plan after completing two years of eligible service and attaining age 21. A year of service is defined as 1,000 hours of service. Employees covered by a collective bargaining agreement, leased employees, per diem employees or independent contractors are excluded from eligibility.

The Plan was established effective November 1, 1972 and was most recently amended and restated effective January 1, 2016 to comply with statutory regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (the “Code”).

Contributions – The Plan allows each participant the option of making traditional or Roth contributions to the Plan between 0% and 80% of their compensation, subject to certain limits imposed by the Code. New employees are automatically enrolled in the Plan upon completion of the eligibility requirements at a contribution rate of 4% of annual compensation, as defined in the Plan document, subject to certain limitations of the Code, unless the employee elects to waive automatic enrollment prior to the effective date. The contribution rate will then automatically increase by 1%, up to a maximum of 10%, unless the Participant declines these automatic increases.

The Group will contribute a matching amount equal to 25% of the amount the participant elects to contribute for a payroll period; provided, however the matching contribution attributable to a payroll period shall not exceed 1% of the compensation paid to the participant during that payroll period, or up to a maximum of \$3,050 and \$2,900 for the years ended December 31, 2022 and 2021, respectively.

The Group also contributes to the Plan additional amounts equal to the sum of 5.5% of each participant’s gross pre-tax compensation, net of participant pre-tax 401(k) and welfare benefit contributions, up to \$73,500 and \$71,400 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively, and 9.8% of each participant’s compensation in excess of \$73,500 and \$71,400, respectively, of the Social Security Wage base net of participant pre-tax 401(k) and welfare benefit contributions, up to \$305,000 and \$290,000 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

The Plan allowed an additional contribution on behalf of those participants who were considered highly compensated employees for both years ended December 31, 2022 and 2021. This additional amount contributed by the Group totaled \$722,228 and \$1,148,040 for the years ended December 31, 2022 and 2021, respectively.

The Group may also make additional discretionary contributions to the Plan annually, based on a percentage of participant compensation for the Plan year. All amounts credited to participant accounts are invested based upon the direction of the participant. No such additional discretionary contributions were made during 2022 or 2021.

The maximum annual aggregate contribution for each participant to the Plan is limited in accordance with federal tax laws to the lesser of 100% of compensation or \$61,000 and \$58,000 for the years ended December 31, 2022 and 2021, respectively, plus an additional \$6,500 for participants age 50 or older for both years ended December 31, 2022 and 2021.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (i.e., rollovers). Rollover contributions totaled \$524,594 and \$148,083 for the years ended December 31, 2022 and 2021, respectively.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions, and the participant's share of Plan earnings. Participant accounts are decreased by participant distributions and the participant's share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based on the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in all contributions plus actual earnings thereon.

Payment of Benefits – Participants can elect a lump-sum amount, installment payments or an annuity, provided their account balance is greater than \$5,000. Participants with less than \$5,000 are required to receive their benefit as a lump-sum distribution. Hardship withdrawals, as defined by the Code, are available to participants from their elective deferral contributions account only.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

Tax Status – The Plan obtained its latest determination letter from the Internal Revenue Service (“IRS”) dated June 22, 2017 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code. Therefore, the Plan is qualified and the related trust is tax exempt. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will be entitled to the amount credited to their account plus a pro-rata share of any unallocated funds or assets of the Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared under the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan.

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires 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. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition – The Plan’s investments are stated at fair value, as determined by Prudential Retirement Insurance and Annuity Company (“Prudential Insurance”), Prudential Bank & Trust, F.S.B., (“Prudential”) and Principal Life Insurance Company (“Principal”) except for its fully benefit-responsive investment contract, which is valued at contract value (Note 4). 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. Shares of registered investment companies are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation in the fair value of its investments which consists of the realized gains and losses and the unrealized appreciation and depreciation of those investments. Realized gains (losses) on disposition of investments were based upon actual costs and selling prices.

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. Acquisition costs are included in the cost of investments purchased, and sales are recorded net of selling expenses.

Benefit Payments – Benefits are recorded when paid.

Plan Expenses – Accounting and administrative expenses, as well as expenses relating to investment activity are paid by the Plan. Effective January 1, 2011 and for each calendar year thereafter, \$70,000 will be funded by Prudential to a designated account to be used for plan administration expenses. If an excess remains at year-end, the amount will be allocated to the participants of the Plan as of the end of the Plan year in which the amounts were made available. In accordance with this arrangement, the Plan reallocated \$0 and \$48,000 to participants in the years ended December 31, 2022 and 2021, respectively, which was included in Plan Sponsor contributions receivable on the Net Assets Available for Benefits at December 31, 2022 and 2021, and considered a party-in-interest transaction.

Party-in-Interest Transactions – Plan investments in the guaranteed income fund, pooled separate accounts, mutual funds, participant-directed brokerage account and guaranteed interest contract are managed by Prudential Insurance, Prudential and Principal, the trustees and custodians of the Plan, and therefore qualify as party-in-interest transactions.

Risks and Uncertainties – Investments are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in risks in the values of investments 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.

Subsequent Events – The Plan has evaluated subsequent events, for recognition or disclosure, through October 2, 2023, the date the accompanying financial statements were available to be issued.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

3. Information Certified by the Trustees (Unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustees have certified that the following data included in the accompanying financial statements and supplemental information is complete and accurate:

	<u>2022</u>	<u>2021</u>
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value	<u>19,995,840</u>	<u>20,317,550</u>
	<u>\$ 174,862,841</u>	<u>\$ 195,789,842</u>

During 2022 and 2021, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the years) appreciated in value as follows:

	<u>2022</u>	<u>2021</u>
Investment income:		
Interest and dividends	\$ 588,081	\$ 555,320
Net appreciation (depreciation) in fair of investments	\$ (28,233,761)	\$ 23,433,795

4. Investment Contract with Insurance Company

The Plan has a fully benefit-responsive group annuity insurance contract with Prudential Insurance. Prudential Insurance maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the accompanying financial statements at contract value at December 31, 2022 and 2021. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

4. Investment Contract with Insurance Company (continued)

The guaranteed income fund does not allow the issuer to terminate the contract which would require the Plan to settle at an amount different than contract value. Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete and partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on completing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption under ERISA. The Plan administrator believes that any events that limit the Plan's ability to transact at contract value with participants are not probable of occurring.

5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure the 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 are described as follows:

- **Level 1 Inputs** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date.
- **Level 2 Inputs** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security. 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** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability.

The asset 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.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

Participant-Directed Brokerage Account: Account primarily consists of cash, common stock and mutual funds that are valued on the basis of readily determined market prices.

Mutual Funds: Shares of mutual funds are valued at quoted market prices which represent the net asset value ("NAV") of shares held by the Plan at year end.

Guaranteed Interest Contract: Account is a non-fully benefit responsive contract and represents the contract value adjusted to reflect current market interest rates only to the extent such market rates exceed contract crediting rates.

Life Insurance Contracts: Contracts are reported at cash surrender value, which approximated fair value.

Pooled Separate Accounts: The Plan has participant-directed investments held in pooled separate accounts of Prudential Retirement Insurance and Annuity Company and Principal Life Insurance Company. The fair value of these investments is based on inputs that are derived principally from or corroborated by observable market data by correlation or other means.

The underlying securities in pooled separate accounts are listed on national securities exchanges and valued on the basis on year-end closing prices. The Plan has concluded that the net asset value as adjusted (for mutual fund dividends, mutual fund splits and administrative maintenance charges and other items) and reported by the insurance companies approximates fair value of the investments. The investments are redeemable at the adjusted net asset value under agreements with the insurance companies.

It is possible that the redemption rights may be restricted or eliminated in the future. Due to the nature of the investments, changes in market conditions, liquidity requirements and the economic environment may significantly affect the net asset value of the pooled separate accounts and, consequently, the fair value of the Plan investments.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

<u>December 31, 2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 9,843,637	\$ 0	\$ 0	\$ 9,843,637
Participant directed brokerage account	2,824,640	0	0	2,824,640
Guaranteed interest account	0	0	13,121	13,121
Pooled separate accounts	<u>0</u>	<u>142,185,603</u>	<u>0</u>	<u>142,185,603</u>
Total investments, in the fair value hierarchy	\$ <u>12,668,277</u>	\$ <u>142,185,603</u>	\$ <u>13,121</u>	\$ <u>154,867,001</u>

<u>December 31, 2021</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 11,084,103	\$ 0	\$ 0	\$ 11,084,103
Participant directed brokerage account	3,152,305	0	0	3,152,305
Guaranteed interest account	0	0	15,723	15,723
Pooled separate accounts	<u>0</u>	<u>161,220,161</u>	<u>0</u>	<u>161,220,161</u>
Total investments, in the fair value hierarchy	\$ <u>14,236,408</u>	\$ <u>161,220,161</u>	\$ <u>15,723</u>	\$ <u>175,472,292</u>

Supplemental Information

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
December 31, 2022

EIN # 16-1000580

Plan # 002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
*	Prudential Retirement Insurance and Annuity Company	Guaranteed Income Fund	\$ 19,995,840
*	Pooled Separate Accounts Managed by Prudential Retirement Insurance and Annuity Company		
	Dryden S&P 500 Index Fund	Pooled separate account	13,861,366
	PGIM Mid Cap Index Fund	Pooled separate account	1,203,001
	PGIM Small Cap Index Fund	Pooled separate account	893,384
	PGIM Intl Dev Market Index	Pooled separate account	1,429,534
	Core BD Enhanced IDX/PGIM	Pooled separate account	1,994,966
	Emerging Market QMA Fund	Pooled separate account	1,875,884
	International Blend/Wellington	Pooled separate account	9,358,520
	Large Cap Growth/JP Morgan Fund	Pooled separate account	12,586,935
	Large Cap Value/LSV Asset Management Fund	Pooled separate account	12,170,726
	Mid Cap Growth/Artisan Partners	Pooled separate account	5,286,285
	Prudential Day One 2015 Fund	Pooled separate account	1,770,919
	Prudential Day One 2020 Fund	Pooled separate account	5,379,930
	Prudential Day One 2025 Fund	Pooled separate account	13,146,854
	Prudential Day One 2030 Fund	Pooled separate account	7,439,666
	Prudential Day One 2035 Fund	Pooled separate account	10,302,006
	Prudential Day One 2040 Fund	Pooled separate account	9,794,272
	Prudential Day One 2045 Fund	Pooled separate account	4,968,107
	Prudential Day One 2050 Fund	Pooled separate account	4,456,149
	Prudential Day One 2055 Fund	Pooled separate account	3,028,015
	Prudential Day One 2060 Fund	Pooled separate account	2,009,566
	Prudential Day One 2065 Fund	Pooled separate account	195,655
	Prudential Day One Income Fund	Pooled separate account	3,561,272
	Prudential Real Asset Fund	Pooled separate account	2,610,690
	Prudential Total Return Bond	Pooled separate account	9,736,492
	Small Cap Stock Growth/TimesSquare Fund	Pooled separate account	3,075,856
*	Prudential Mutual Funds		
	Prudential Global Total Return Z Fund	Mutual Fund	2,497,236
	Prudential Mid Cap Value Z Fund	Mutual Fund	3,357,713
	Prudential Small Cap Value	Mutual Fund	3,988,688
*	Prudential Bank & Trust, F.S.B.	Participant-directed brokerage account	2,824,640
*	Principal Life Insurance Company		
	Principal LargeCap S&P 500 Index Separate Account	Pooled separate account	36,484
	Principal Money Market Separate Account	Pooled separate account	13,069
	Principal Flexible Investment Annuity Group Contract	Guaranteed Investment Contract	13,121
	Northwestern Mutual Life Insurance Company	CSV - Life Insurance contracts	168,067
	The U.S. Life Insurance Company in the City of New York	CSV - Life Insurance contracts	112,592
	Total assets held for investment		\$ 175,143,500
*	Party-in-interest		

See independent auditors' report.

**Buffalo Medical Group, P.C.
401(k) Profit Sharing and
Pension Plan**

**Financial Statements and
Supplemental Information**

December 31, 2022 and 2021

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Financial Statements

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Independent Auditors' Report

To the Participants and Plan Administrator of the
Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Buffalo, New York

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

We have performed an audit of the accompanying financial statements of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension 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, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

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

Opinion

In our opinion, based on our audit 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 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 audit 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 Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management

Management is responsible for the preparation and fair presentation of these 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 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

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 auditing standards generally accepted in the United States of America 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 auditing standards generally accepted in the United States of America, we:

- Exercise professional judgement 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 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 judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our 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 Schedules 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the 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 the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. 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 DOL'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 DOL'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).

Tronconi Segana & Associates LLP

Williamsville, New York
October 2, 2023

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Investments</i>		
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value:		
Guaranteed Income Fund	19,995,840	20,317,550
Cash surrender value of life insurance contracts	<u>280,659</u>	<u>274,136</u>
Total investments	175,143,500	196,063,978
<i>Receivables</i>		
Participant contributions receivable	158,084	202,219
Sponsor contributions receivable	<u>4,912,536</u>	<u>5,577,153</u>
Total receivables	5,070,620	5,779,372
Net assets available for benefits	<u>\$ 180,214,120</u>	<u>\$ 201,843,350</u>

See independent auditors' reports and notes to financial statements.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Changes in Net Assets Available for Benefits
for the years ended December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Additions to Net Assets Attributed to:</i>		
Contributions:		
Sponsor	\$ 5,559,113	\$ 6,040,782
Participant	6,465,192	6,027,249
Rollovers	<u>524,594</u>	<u>148,083</u>
 Total contributions	 12,548,899	 12,216,114
Investment income:		
Interest and dividends	588,081	555,320
Net appreciation in fair of investments	<u>0</u>	<u>23,433,795</u>
 Net investment income	 588,081	 23,989,115
Increase in cash surrender value of life insurance contracts	<u>6,522</u>	<u>6,875</u>
 Total additions	 13,143,502	 36,212,104
 <i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	6,556,561	10,780,555
Net depreciation in fair of investments	28,233,761	0
Administrative expenses (credits)	<u>(17,590)</u>	<u>30,056</u>
 Total deductions	 34,772,732	 10,810,611
 Net increase (decrease)	 (21,629,230)	 25,401,493
 <i>Net Assets Available for Benefits:</i>		
Beginning of year	<u>201,843,350</u>	<u>176,441,857</u>
 End of year	 <u>\$ 180,214,120</u>	 <u>\$ 201,843,350</u>

See independent auditors' reports and notes to financial statements.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements

1. Description of Plan

The following description of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension Plan (the “Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan sponsored by Buffalo Medical Group, P.C. (the “Group” or “Plan Sponsor”). Employees are eligible to participate in the Plan solely for making pre-tax contributions and receiving employer matching contributions after completing 60 days of service and attaining age 21. Employees are eligible to participate in the discretionary contribution feature of the Plan after completing two years of eligible service and attaining age 21. A year of service is defined as 1,000 hours of service. Employees covered by a collective bargaining agreement, leased employees, per diem employees or independent contractors are excluded from eligibility.

The Plan was established effective November 1, 1972 and was most recently amended and restated effective January 1, 2016 to comply with statutory regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (the “Code”).

Contributions – The Plan allows each participant the option of making traditional or Roth contributions to the Plan between 0% and 80% of their compensation, subject to certain limits imposed by the Code. New employees are automatically enrolled in the Plan upon completion of the eligibility requirements at a contribution rate of 4% of annual compensation, as defined in the Plan document, subject to certain limitations of the Code, unless the employee elects to waive automatic enrollment prior to the effective date. The contribution rate will then automatically increase by 1%, up to a maximum of 10%, unless the Participant declines these automatic increases.

The Group will contribute a matching amount equal to 25% of the amount the participant elects to contribute for a payroll period; provided, however the matching contribution attributable to a payroll period shall not exceed 1% of the compensation paid to the participant during that payroll period, or up to a maximum of \$3,050 and \$2,900 for the years ended December 31, 2022 and 2021, respectively.

The Group also contributes to the Plan additional amounts equal to the sum of 5.5% of each participant’s gross pre-tax compensation, net of participant pre-tax 401(k) and welfare benefit contributions, up to \$73,500 and \$71,400 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively, and 9.8% of each participant’s compensation in excess of \$73,500 and \$71,400, respectively, of the Social Security Wage base net of participant pre-tax 401(k) and welfare benefit contributions, up to \$305,000 and \$290,000 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

The Plan allowed an additional contribution on behalf of those participants who were considered highly compensated employees for both years ended December 31, 2022 and 2021. This additional amount contributed by the Group totaled \$722,228 and \$1,148,040 for the years ended December 31, 2022 and 2021, respectively.

The Group may also make additional discretionary contributions to the Plan annually, based on a percentage of participant compensation for the Plan year. All amounts credited to participant accounts are invested based upon the direction of the participant. No such additional discretionary contributions were made during 2022 or 2021.

The maximum annual aggregate contribution for each participant to the Plan is limited in accordance with federal tax laws to the lesser of 100% of compensation or \$61,000 and \$58,000 for the years ended December 31, 2022 and 2021, respectively, plus an additional \$6,500 for participants age 50 or older for both years ended December 31, 2022 and 2021.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (i.e., rollovers). Rollover contributions totaled \$524,594 and \$148,083 for the years ended December 31, 2022 and 2021, respectively.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions, and the participant's share of Plan earnings. Participant accounts are decreased by participant distributions and the participant's share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based on the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in all contributions plus actual earnings thereon.

Payment of Benefits – Participants can elect a lump-sum amount, installment payments or an annuity, provided their account balance is greater than \$5,000. Participants with less than \$5,000 are required to receive their benefit as a lump-sum distribution. Hardship withdrawals, as defined by the Code, are available to participants from their elective deferral contributions account only.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

Tax Status – The Plan obtained its latest determination letter from the Internal Revenue Service (“IRS”) dated June 22, 2017 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code. Therefore, the Plan is qualified and the related trust is tax exempt. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will be entitled to the amount credited to their account plus a pro-rata share of any unallocated funds or assets of the Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared under the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan.

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires 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. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition – The Plan’s investments are stated at fair value, as determined by Prudential Retirement Insurance and Annuity Company (“Prudential Insurance”), Prudential Bank & Trust, F.S.B., (“Prudential”) and Principal Life Insurance Company (“Principal”) except for its fully benefit-responsive investment contract, which is valued at contract value (Note 4). 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. Shares of registered investment companies are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation in the fair value of its investments which consists of the realized gains and losses and the unrealized appreciation and depreciation of those investments. Realized gains (losses) on disposition of investments were based upon actual costs and selling prices.

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. Acquisition costs are included in the cost of investments purchased, and sales are recorded net of selling expenses.

Benefit Payments – Benefits are recorded when paid.

Plan Expenses – Accounting and administrative expenses, as well as expenses relating to investment activity are paid by the Plan. Effective January 1, 2011 and for each calendar year thereafter, \$70,000 will be funded by Prudential to a designated account to be used for plan administration expenses. If an excess remains at year-end, the amount will be allocated to the participants of the Plan as of the end of the Plan year in which the amounts were made available. In accordance with this arrangement, the Plan reallocated \$0 and \$48,000 to participants in the years ended December 31, 2022 and 2021, respectively, which was included in Plan Sponsor contributions receivable on the Net Assets Available for Benefits at December 31, 2022 and 2021, and considered a party-in-interest transaction.

Party-in-Interest Transactions – Plan investments in the guaranteed income fund, pooled separate accounts, mutual funds, participant-directed brokerage account and guaranteed interest contract are managed by Prudential Insurance, Prudential and Principal, the trustees and custodians of the Plan, and therefore qualify as party-in-interest transactions.

Risks and Uncertainties – Investments are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in risks in the values of investments 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.

Subsequent Events – The Plan has evaluated subsequent events, for recognition or disclosure, through October 2, 2023, the date the accompanying financial statements were available to be issued.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

3. Information Certified by the Trustees (Unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustees have certified that the following data included in the accompanying financial statements and supplemental information is complete and accurate:

	<u>2022</u>	<u>2021</u>
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value	<u>19,995,840</u>	<u>20,317,550</u>
	<u>\$ 174,862,841</u>	<u>\$ 195,789,842</u>

During 2022 and 2021, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the years) appreciated in value as follows:

	<u>2022</u>	<u>2021</u>
Investment income:		
Interest and dividends	\$ 588,081	\$ 555,320
Net appreciation (depreciation) in fair of investments	\$ (28,233,761)	\$ 23,433,795

4. Investment Contract with Insurance Company

The Plan has a fully benefit-responsive group annuity insurance contract with Prudential Insurance. Prudential Insurance maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the accompanying financial statements at contract value at December 31, 2022 and 2021. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

4. Investment Contract with Insurance Company (continued)

The guaranteed income fund does not allow the issuer to terminate the contract which would require the Plan to settle at an amount different than contract value. Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete and partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on completing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption under ERISA. The Plan administrator believes that any events that limit the Plan's ability to transact at contract value with participants are not probable of occurring.

5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure the 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 are described as follows:

- **Level 1 Inputs** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date.
- **Level 2 Inputs** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security. 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** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability.

The asset 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.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

Participant-Directed Brokerage Account: Account primarily consists of cash, common stock and mutual funds that are valued on the basis of readily determined market prices.

Mutual Funds: Shares of mutual funds are valued at quoted market prices which represent the net asset value (“NAV”) of shares held by the Plan at year end.

Guaranteed Interest Contract: Account is a non-fully benefit responsive contract and represents the contract value adjusted to reflect current market interest rates only to the extent such market rates exceed contract crediting rates.

Life Insurance Contracts: Contracts are reported at cash surrender value, which approximated fair value.

Pooled Separate Accounts: The Plan has participant-directed investments held in pooled separate accounts of Prudential Retirement Insurance and Annuity Company and Principal Life Insurance Company. The fair value of these investments is based on inputs that are derived principally from or corroborated by observable market data by correlation or other means.

The underlying securities in pooled separate accounts are listed on national securities exchanges and valued on the basis on year-end closing prices. The Plan has concluded that the net asset value as adjusted (for mutual fund dividends, mutual fund splits and administrative maintenance charges and other items) and reported by the insurance companies approximates fair value of the investments. The investments are redeemable at the adjusted net asset value under agreements with the insurance companies.

It is possible that the redemption rights may be restricted or eliminated in the future. Due to the nature of the investments, changes in market conditions, liquidity requirements and the economic environment may significantly affect the net asset value of the pooled separate accounts and, consequently, the fair value of the Plan investments.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

<u>December 31, 2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 9,843,637	\$ 0	\$ 0	\$ 9,843,637
Participant directed brokerage account	2,824,640	0	0	2,824,640
Guaranteed interest account	0	0	13,121	13,121
Pooled separate accounts	<u>0</u>	<u>142,185,603</u>	<u>0</u>	<u>142,185,603</u>
Total investments, in the fair value hierarchy	\$ <u>12,668,277</u>	\$ <u>142,185,603</u>	\$ <u>13,121</u>	\$ <u>154,867,001</u>

<u>December 31, 2021</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 11,084,103	\$ 0	\$ 0	\$ 11,084,103
Participant directed brokerage account	3,152,305	0	0	3,152,305
Guaranteed interest account	0	0	15,723	15,723
Pooled separate accounts	<u>0</u>	<u>161,220,161</u>	<u>0</u>	<u>161,220,161</u>
Total investments, in the fair value hierarchy	\$ <u>14,236,408</u>	\$ <u>161,220,161</u>	\$ <u>15,723</u>	\$ <u>175,472,292</u>

Supplemental Information

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
December 31, 2022

EIN # 16-1000580

Plan # 002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
*	Prudential Retirement Insurance and Annuity Company	Guaranteed Income Fund	\$ 19,995,840
*	Pooled Separate Accounts Managed by Prudential Retirement Insurance and Annuity Company		
	Dryden S&P 500 Index Fund	Pooled separate account	13,861,366
	PGIM Mid Cap Index Fund	Pooled separate account	1,203,001
	PGIM Small Cap Index Fund	Pooled separate account	893,384
	PGIM Intl Dev Market Index	Pooled separate account	1,429,534
	Core BD Enhanced IDX/PGIM	Pooled separate account	1,994,966
	Emerging Market QMA Fund	Pooled separate account	1,875,884
	International Blend/Wellington	Pooled separate account	9,358,520
	Large Cap Growth/JP Morgan Fund	Pooled separate account	12,586,935
	Large Cap Value/LSV Asset Management Fund	Pooled separate account	12,170,726
	Mid Cap Growth/Artisan Partners	Pooled separate account	5,286,285
	Prudential Day One 2015 Fund	Pooled separate account	1,770,919
	Prudential Day One 2020 Fund	Pooled separate account	5,379,930
	Prudential Day One 2025 Fund	Pooled separate account	13,146,854
	Prudential Day One 2030 Fund	Pooled separate account	7,439,666
	Prudential Day One 2035 Fund	Pooled separate account	10,302,006
	Prudential Day One 2040 Fund	Pooled separate account	9,794,272
	Prudential Day One 2045 Fund	Pooled separate account	4,968,107
	Prudential Day One 2050 Fund	Pooled separate account	4,456,149
	Prudential Day One 2055 Fund	Pooled separate account	3,028,015
	Prudential Day One 2060 Fund	Pooled separate account	2,009,566
	Prudential Day One 2065 Fund	Pooled separate account	195,655
	Prudential Day One Income Fund	Pooled separate account	3,561,272
	Prudential Real Asset Fund	Pooled separate account	2,610,690
	Prudential Total Return Bond	Pooled separate account	9,736,492
	Small Cap Stock Growth/TimesSquare Fund	Pooled separate account	3,075,856
*	Prudential Mutual Funds		
	Prudential Global Total Return Z Fund	Mutual Fund	2,497,236
	Prudential Mid Cap Value Z Fund	Mutual Fund	3,357,713
	Prudential Small Cap Value	Mutual Fund	3,988,688
*	Prudential Bank & Trust, F.S.B.	Participant-directed brokerage account	2,824,640
*	Principal Life Insurance Company		
	Principal LargeCap S&P 500 Index Separate Account	Pooled separate account	36,484
	Principal Money Market Separate Account	Pooled separate account	13,069
	Principal Flexible Investment Annuity Group Contract	Guaranteed Investment Contract	13,121
	Northwestern Mutual Life Insurance Company	CSV - Life Insurance contracts	168,067
	The U.S. Life Insurance Company in the City of New York	CSV - Life Insurance contracts	112,592
	Total assets held for investment		\$ 175,143,500
*	Party-in-interest		

See independent auditors' report.

**Buffalo Medical Group, P.C.
401(k) Profit Sharing and
Pension Plan**

**Financial Statements and
Supplemental Information**

December 31, 2022 and 2021

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Financial Statements

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Independent Auditors' Report

To the Participants and Plan Administrator of the
Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Buffalo, New York

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

We have performed an audit of the accompanying financial statements of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension 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, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

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

Opinion

In our opinion, based on our audit 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 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 audit 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 Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management

Management is responsible for the preparation and fair presentation of these 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 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

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 auditing standards generally accepted in the United States of America 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 auditing standards generally accepted in the United States of America, we:

- Exercise professional judgement 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 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 judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our 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 Schedules 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the 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 the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. 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 DOL'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 DOL'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).

Tronconi Segana & Associates LLP

Williamsville, New York
October 2, 2023

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Investments</i>		
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value:		
Guaranteed Income Fund	19,995,840	20,317,550
Cash surrender value of life insurance contracts	<u>280,659</u>	<u>274,136</u>
Total investments	175,143,500	196,063,978
<i>Receivables</i>		
Participant contributions receivable	158,084	202,219
Sponsor contributions receivable	<u>4,912,536</u>	<u>5,577,153</u>
Total receivables	5,070,620	5,779,372
Net assets available for benefits	<u>\$ 180,214,120</u>	<u>\$ 201,843,350</u>

See independent auditors' reports and notes to financial statements.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Statements of Changes in Net Assets Available for Benefits
for the years ended December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
<i>Additions to Net Assets Attributed to:</i>		
Contributions:		
Sponsor	\$ 5,559,113	\$ 6,040,782
Participant	6,465,192	6,027,249
Rollovers	<u>524,594</u>	<u>148,083</u>
 Total contributions	 12,548,899	 12,216,114
Investment income:		
Interest and dividends	588,081	555,320
Net appreciation in fair of investments	<u>0</u>	<u>23,433,795</u>
 Net investment income	 588,081	 23,989,115
Increase in cash surrender value of life insurance contracts	<u>6,522</u>	<u>6,875</u>
 Total additions	 13,143,502	 36,212,104
 <i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	6,556,561	10,780,555
Net depreciation in fair of investments	28,233,761	0
Administrative expenses (credits)	<u>(17,590)</u>	<u>30,056</u>
 Total deductions	 34,772,732	 10,810,611
 Net increase (decrease)	 (21,629,230)	 25,401,493
 <i>Net Assets Available for Benefits:</i>		
Beginning of year	<u>201,843,350</u>	<u>176,441,857</u>
 End of year	 <u>\$ 180,214,120</u>	 <u>\$ 201,843,350</u>

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Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements

1. Description of Plan

The following description of the Buffalo Medical Group, P.C. 401(k) Profit Sharing and Pension Plan (the “Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan sponsored by Buffalo Medical Group, P.C. (the “Group” or “Plan Sponsor”). Employees are eligible to participate in the Plan solely for making pre-tax contributions and receiving employer matching contributions after completing 60 days of service and attaining age 21. Employees are eligible to participate in the discretionary contribution feature of the Plan after completing two years of eligible service and attaining age 21. A year of service is defined as 1,000 hours of service. Employees covered by a collective bargaining agreement, leased employees, per diem employees or independent contractors are excluded from eligibility.

The Plan was established effective November 1, 1972 and was most recently amended and restated effective January 1, 2016 to comply with statutory regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (the “Code”).

Contributions – The Plan allows each participant the option of making traditional or Roth contributions to the Plan between 0% and 80% of their compensation, subject to certain limits imposed by the Code. New employees are automatically enrolled in the Plan upon completion of the eligibility requirements at a contribution rate of 4% of annual compensation, as defined in the Plan document, subject to certain limitations of the Code, unless the employee elects to waive automatic enrollment prior to the effective date. The contribution rate will then automatically increase by 1%, up to a maximum of 10%, unless the Participant declines these automatic increases.

The Group will contribute a matching amount equal to 25% of the amount the participant elects to contribute for a payroll period; provided, however the matching contribution attributable to a payroll period shall not exceed 1% of the compensation paid to the participant during that payroll period, or up to a maximum of \$3,050 and \$2,900 for the years ended December 31, 2022 and 2021, respectively.

The Group also contributes to the Plan additional amounts equal to the sum of 5.5% of each participant’s gross pre-tax compensation, net of participant pre-tax 401(k) and welfare benefit contributions, up to \$73,500 and \$71,400 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively, and 9.8% of each participant’s compensation in excess of \$73,500 and \$71,400, respectively, of the Social Security Wage base net of participant pre-tax 401(k) and welfare benefit contributions, up to \$305,000 and \$290,000 of the Social Security wage base for the years ended December 31, 2022 and 2021, respectively.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

The Plan allowed an additional contribution on behalf of those participants who were considered highly compensated employees for both years ended December 31, 2022 and 2021. This additional amount contributed by the Group totaled \$722,228 and \$1,148,040 for the years ended December 31, 2022 and 2021, respectively.

The Group may also make additional discretionary contributions to the Plan annually, based on a percentage of participant compensation for the Plan year. All amounts credited to participant accounts are invested based upon the direction of the participant. No such additional discretionary contributions were made during 2022 or 2021.

The maximum annual aggregate contribution for each participant to the Plan is limited in accordance with federal tax laws to the lesser of 100% of compensation or \$61,000 and \$58,000 for the years ended December 31, 2022 and 2021, respectively, plus an additional \$6,500 for participants age 50 or older for both years ended December 31, 2022 and 2021.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (i.e., rollovers). Rollover contributions totaled \$524,594 and \$148,083 for the years ended December 31, 2022 and 2021, respectively.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions, and the participant's share of Plan earnings. Participant accounts are decreased by participant distributions and the participant's share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based on the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in all contributions plus actual earnings thereon.

Payment of Benefits – Participants can elect a lump-sum amount, installment payments or an annuity, provided their account balance is greater than \$5,000. Participants with less than \$5,000 are required to receive their benefit as a lump-sum distribution. Hardship withdrawals, as defined by the Code, are available to participants from their elective deferral contributions account only.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

1. Description of Plan (continued)

Tax Status – The Plan obtained its latest determination letter from the Internal Revenue Service (“IRS”) dated June 22, 2017 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code. Therefore, the Plan is qualified and the related trust is tax exempt. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will be entitled to the amount credited to their account plus a pro-rata share of any unallocated funds or assets of the Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared under the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan.

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires 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. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition – The Plan’s investments are stated at fair value, as determined by Prudential Retirement Insurance and Annuity Company (“Prudential Insurance”), Prudential Bank & Trust, F.S.B., (“Prudential”) and Principal Life Insurance Company (“Principal”) except for its fully benefit-responsive investment contract, which is valued at contract value (Note 4). 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. Shares of registered investment companies are valued at quoted market prices which represent the net asset value of shares held by the Plan at year end.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation in the fair value of its investments which consists of the realized gains and losses and the unrealized appreciation and depreciation of those investments. Realized gains (losses) on disposition of investments were based upon actual costs and selling prices.

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. Acquisition costs are included in the cost of investments purchased, and sales are recorded net of selling expenses.

Benefit Payments – Benefits are recorded when paid.

Plan Expenses – Accounting and administrative expenses, as well as expenses relating to investment activity are paid by the Plan. Effective January 1, 2011 and for each calendar year thereafter, \$70,000 will be funded by Prudential to a designated account to be used for plan administration expenses. If an excess remains at year-end, the amount will be allocated to the participants of the Plan as of the end of the Plan year in which the amounts were made available. In accordance with this arrangement, the Plan reallocated \$0 and \$48,000 to participants in the years ended December 31, 2022 and 2021, respectively, which was included in Plan Sponsor contributions receivable on the Net Assets Available for Benefits at December 31, 2022 and 2021, and considered a party-in-interest transaction.

Party-in-Interest Transactions – Plan investments in the guaranteed income fund, pooled separate accounts, mutual funds, participant-directed brokerage account and guaranteed interest contract are managed by Prudential Insurance, Prudential and Principal, the trustees and custodians of the Plan, and therefore qualify as party-in-interest transactions.

Risks and Uncertainties – Investments are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in risks in the values of investments 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.

Subsequent Events – The Plan has evaluated subsequent events, for recognition or disclosure, through October 2, 2023, the date the accompanying financial statements were available to be issued.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

3. Information Certified by the Trustees (Unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustees have certified that the following data included in the accompanying financial statements and supplemental information is complete and accurate:

	<u>2022</u>	<u>2021</u>
Investments, at fair value	\$ 154,867,001	\$ 175,472,292
Investments, at contract value	<u>19,995,840</u>	<u>20,317,550</u>
	<u>\$ 174,862,841</u>	<u>\$ 195,789,842</u>

During 2022 and 2021, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the years) appreciated in value as follows:

	<u>2022</u>	<u>2021</u>
Investment income:		
Interest and dividends	\$ 588,081	\$ 555,320
Net appreciation (depreciation) in fair of investments	\$ (28,233,761)	\$ 23,433,795

4. Investment Contract with Insurance Company

The Plan has a fully benefit-responsive group annuity insurance contract with Prudential Insurance. Prudential Insurance maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the accompanying financial statements at contract value at December 31, 2022 and 2021. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

4. Investment Contract with Insurance Company (continued)

The guaranteed income fund does not allow the issuer to terminate the contract which would require the Plan to settle at an amount different than contract value. Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete and partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on completing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption under ERISA. The Plan administrator believes that any events that limit the Plan's ability to transact at contract value with participants are not probable of occurring.

5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure the 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 are described as follows:

- **Level 1 Inputs** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date.
- **Level 2 Inputs** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security. 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** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability.

The asset 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.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

Participant-Directed Brokerage Account: Account primarily consists of cash, common stock and mutual funds that are valued on the basis of readily determined market prices.

Mutual Funds: Shares of mutual funds are valued at quoted market prices which represent the net asset value ("NAV") of shares held by the Plan at year end.

Guaranteed Interest Contract: Account is a non-fully benefit responsive contract and represents the contract value adjusted to reflect current market interest rates only to the extent such market rates exceed contract crediting rates.

Life Insurance Contracts: Contracts are reported at cash surrender value, which approximated fair value.

Pooled Separate Accounts: The Plan has participant-directed investments held in pooled separate accounts of Prudential Retirement Insurance and Annuity Company and Principal Life Insurance Company. The fair value of these investments is based on inputs that are derived principally from or corroborated by observable market data by correlation or other means.

The underlying securities in pooled separate accounts are listed on national securities exchanges and valued on the basis on year-end closing prices. The Plan has concluded that the net asset value as adjusted (for mutual fund dividends, mutual fund splits and administrative maintenance charges and other items) and reported by the insurance companies approximates fair value of the investments. The investments are redeemable at the adjusted net asset value under agreements with the insurance companies.

It is possible that the redemption rights may be restricted or eliminated in the future. Due to the nature of the investments, changes in market conditions, liquidity requirements and the economic environment may significantly affect the net asset value of the pooled separate accounts and, consequently, the fair value of the Plan investments.

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

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

<u>December 31, 2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 9,843,637	\$ 0	\$ 0	\$ 9,843,637
Participant directed brokerage account	2,824,640	0	0	2,824,640
Guaranteed interest account	0	0	13,121	13,121
Pooled separate accounts	<u>0</u>	<u>142,185,603</u>	<u>0</u>	<u>142,185,603</u>
Total investments, in the fair value hierarchy	\$ <u>12,668,277</u>	\$ <u>142,185,603</u>	\$ <u>13,121</u>	\$ <u>154,867,001</u>

<u>December 31, 2021</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 11,084,103	\$ 0	\$ 0	\$ 11,084,103
Participant directed brokerage account	3,152,305	0	0	3,152,305
Guaranteed interest account	0	0	15,723	15,723
Pooled separate accounts	<u>0</u>	<u>161,220,161</u>	<u>0</u>	<u>161,220,161</u>
Total investments, in the fair value hierarchy	\$ <u>14,236,408</u>	\$ <u>161,220,161</u>	\$ <u>15,723</u>	\$ <u>175,472,292</u>

Supplemental Information

Buffalo Medical Group, P.C.
401(k) Profit Sharing and Pension Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
December 31, 2022
EIN # 16-1000580
Plan # 002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
*	Prudential Retirement Insurance and Annuity Company	Guaranteed Income Fund	\$ 19,995,840
*	Pooled Separate Accounts Managed by Prudential Retirement Insurance and Annuity Company		
	Dryden S&P 500 Index Fund	Pooled separate account	13,861,366
	PGIM Mid Cap Index Fund	Pooled separate account	1,203,001
	PGIM Small Cap Index Fund	Pooled separate account	893,384
	PGIM Intl Dev Market Index	Pooled separate account	1,429,534
	Core BD Enhanced IDX/PGIM	Pooled separate account	1,994,966
	Emerging Market QMA Fund	Pooled separate account	1,875,884
	International Blend/Wellington	Pooled separate account	9,358,520
	Large Cap Growth/JP Morgan Fund	Pooled separate account	12,586,935
	Large Cap Value/LSV Asset Management Fund	Pooled separate account	12,170,726
	Mid Cap Growth/Artisan Partners	Pooled separate account	5,286,285
	Prudential Day One 2015 Fund	Pooled separate account	1,770,919
	Prudential Day One 2020 Fund	Pooled separate account	5,379,930
	Prudential Day One 2025 Fund	Pooled separate account	13,146,854
	Prudential Day One 2030 Fund	Pooled separate account	7,439,666
	Prudential Day One 2035 Fund	Pooled separate account	10,302,006
	Prudential Day One 2040 Fund	Pooled separate account	9,794,272
	Prudential Day One 2045 Fund	Pooled separate account	4,968,107
	Prudential Day One 2050 Fund	Pooled separate account	4,456,149
	Prudential Day One 2055 Fund	Pooled separate account	3,028,015
	Prudential Day One 2060 Fund	Pooled separate account	2,009,566
	Prudential Day One 2065 Fund	Pooled separate account	195,655
	Prudential Day One Income Fund	Pooled separate account	3,561,272
	Prudential Real Asset Fund	Pooled separate account	2,610,690
	Prudential Total Return Bond	Pooled separate account	9,736,492
	Small Cap Stock Growth/TimesSquare Fund	Pooled separate account	3,075,856
*	Prudential Mutual Funds		
	Prudential Global Total Return Z Fund	Mutual Fund	2,497,236
	Prudential Mid Cap Value Z Fund	Mutual Fund	3,357,713
	Prudential Small Cap Value	Mutual Fund	3,988,688
*	Prudential Bank & Trust, F.S.B.	Participant-directed brokerage account	2,824,640
*	Principal Life Insurance Company		
	Principal LargeCap S&P 500 Index Separate Account	Pooled separate account	36,484
	Principal Money Market Separate Account	Pooled separate account	13,069
	Principal Flexible Investment Annuity Group Contract	Guaranteed Investment Contract	13,121
	Northwestern Mutual Life Insurance Company	CSV - Life Insurance contracts	168,067
	The U.S. Life Insurance Company in the City of New York	CSV - Life Insurance contracts	112,592
	Total assets held for investment		\$ 175,143,500
*	Party-in-interest		

See independent auditors' report.