

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information —enter all requested information
1a Name of plan FRENCH CAMP ACADEMY 403(B) PLAN	1b Three-digit plan number (PN) ▶ 003
	1c Effective date of plan 01/01/1994
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, and ZIP or foreign postal code (if foreign, see instructions) FRENCH CAMP ACADEMY ONE FINE PLACE FRENCH CAMP, MS 39745	2b Employer Identification Number (EIN) 64-0321520 2c Plan Sponsor's telephone number 662-547-6482 2d Business code (see instructions) 611000

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	STEPHEN ULERICH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 144
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) 117
a(2) Total number of active participants at the end of the plan year		6a(2) 106
b Retired or separated participants receiving benefits		6b 6
c Other retired or separated participants entitled to future benefits.....		6c 28
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 140
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 4
f Total. Add lines 6d and 6e		6f 144
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 113
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 1
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: 2M 2F 2G 3H 2T		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ 0 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan FRENCH CAMP ACADEMY 403(B) PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 FRENCH CAMP ACADEMY	D Employer Identification Number (EIN) 64-0321520	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

MASSACHUSETTS MUTUAL LIFE INS. CO.

04-1590850

(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?
50 52 64 72	NONE	41092	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

REGIONS BANK

63-0371391

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISORY SERV	0	Yes ☒ No ☐	Yes ☐ No ☒	21691	Yes ☐ No ☒

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

EMPOWER ANNUITY INS. CO. OF AMERICA

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

84-0467907

(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?
50 52 64 72	NONE	7788	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>FRENCH CAMP ACADEMY 403(B) PLAN</u>	B Three-digit plan number (PN) ►	<u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FRENCH CAMP ACADEMY</u>	D Employer Identification Number (EIN) <u>64-0321520</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)
(2) Participant contributions.....	1b(2)
(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)
(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)
(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)
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)
(15) Other	1c(15)

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	6255809	5087394

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	6255809	5087394
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	47613	
(B) Participants	2a(1)(B)	138043	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		185656
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)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(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)	235160	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		235160
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-1373679
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-952863
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	166718	
(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)		166718
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)		
(2) Contract administrator fees	2i(2)	360	
(3) Investment advisory and management fees	2i(3)	40732	
(4) Other	2i(4)	7742	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		48834
j Total expenses. Add all expense amounts in column (b) and enter total	2j		215552
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-1168415
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: HADDOZ, REID, EUBANKS, BETTS, LLC.

(2) EIN: 64-0414329

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		800000
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.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
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 FRENCH CAMP ACADEMY 403(B) PLAN		B Three-digit plan number (PN) ► 003
C Plan sponsor's name as shown on line 2a of Form 5500 FRENCH CAMP ACADEMY		D Employer Identification Number (EIN) 64-0321520
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): 04-1590850 84-1455663		
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 _____

FRENCH CAMP ACADEMY 403(B) PLAN
FINANCIAL STATEMENTS
AND
INDEPENDENT AUDITOR'S REPORT
YEARS ENDED DECEMBER 31, 2022 AND 2021

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1020 Highland Colony Parkway, Suite 600
Ridgeland, MS 39157

Ph: 601-948-2924 ■ Fx: 601-960-9154 ■ www.HaddoxReid.com

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BETTS PLLC

CPAs & Advisors

INDEPENDENT AUDITOR'S REPORT

French Camp Academy, Plan Administrator
French Camp Academy 403(b) Plan

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

We have performed audits of the accompanying financial statements of French Camp Academy 403(b) Plan (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) (an 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 (financial statements).

Management, having determined it is permissible in the circumstances, has elected to have the audits of French Camp Academy 403(b) 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 Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2022 and 2021, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's 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.

Opinion - continued:

- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of French Camp Academy 403(b) Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 French Camp Academy 403(b) 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.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the

Auditor's Responsibilities for the Audit of the Financial Statements - continued:

override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of French Camp Academy 403(b) Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about French Camp Academy 403(b) 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 certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Supplemental Schedule Required by ERISA

The supplemental schedule of assets held at end of year as of December 31, 2022, is presented for purposes of additional analysis and is not a required part of the financial statements but

Supplemental Schedule Required by ERISA - continued:

is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion -

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

Haddox Reid Embank Belts, PLLC

Ridgeland, Mississippi
October 16, 2023

FRENCH CAMP ACADEMY 403(B) PLAN

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2022 AND 2021**

	<u>2022</u>	<u>2021</u>
INVESTMENTS, at fair value:		
Registered investment companies	\$ <u>5,074,101</u>	<u>6,255,810</u>
Total investments	<u>5,074,101</u>	<u>6,255,810</u>
RECEIVABLES:		
Employee contributions	9,718	-
Employer contributions	<u>3,575</u>	<u>-</u>
Total receivables	<u>13,293</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	\$ <u><u>5,087,394</u></u>	<u><u>6,255,810</u></u>

The accompanying notes are an integral part of these statements.

FRENCH CAMP ACADEMY 403(B) PLAN

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2022 AND 2021**

	<u>2022</u>	<u>2021</u>
ADDITIONS (DEDUCTIONS) TO NET ASSETS		
ATTRIBUTED TO:		
Investment income (loss):		
Net appreciation (depreciation) in fair value of investments	\$ (1,373,679)	342,974
Dividend income	<u>235,160</u>	<u>452,880</u>
Total investment income (loss)	<u>(1,138,519)</u>	<u>795,854</u>
Contributions:		
Employee contributions	138,043	143,082
Employer contributions	<u>47,613</u>	<u>50,075</u>
Total contributions	<u>185,656</u>	<u>193,157</u>
Total additions (deductions)	<u>(952,863)</u>	<u>989,011</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	166,718	136,916
Administrative expenses	<u>48,835</u>	<u>53,310</u>
Total deductions	<u>215,553</u>	<u>190,226</u>
NET INCREASE (DECREASE)	(1,168,416)	798,785
NET ASSETS AVAILABLE FOR BENEFITS AT BEGINNING OF YEAR	<u>6,255,810</u>	<u>5,457,025</u>
NET ASSETS AVAILABLE FOR BENEFITS AT END OF YEAR	\$ <u>5,087,394</u>	<u>6,255,810</u>

The accompanying notes are an integral part of these statements.

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 1 - DESCRIPTION OF PLAN

The following description of the French Camp Academy 403(b) Plan (Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was established on January 1, 1994, and was amended and restated effective January 10, 2017. The Plan is a defined contribution 403(b) plan covering all employees of French Camp Academy and French Camp Radio (collectively the Employer), except employees who are students performing services under Internal Revenue Code (IRC) Section 3121(b)(10) and employees who normally work less than 20 hours per week. Employees are eligible to participate in the elective deferral portion of the Plan immediately upon hire. Participants become eligible to receive a matching contribution upon attainment of age 21 and completion of one year of service. The Board of Trustees of French Camp Academy are responsible for oversight of the Plan and for determining the appropriateness of the Plan's investment offerings and monitoring investment performance. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, participants may contribute up to 100% of compensation, as defined by the Plan document and subject to certain Internal Revenue Service (IRS) limitations. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants are not eligible to receive a matching contribution on catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Employer contributes a matching contribution of \$0.50 for each \$1.00 of deferrals up to \$75 per month. Contributions are subject to certain Internal Revenue Service limitations.

Participant Accounts

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

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 1 - DESCRIPTION OF PLAN - CONTINUED:

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Employer matching portion of their accounts is based on years of continuous service. A participant is 100% vested after three years of credited service.

Forfeitures

Forfeitures of non-vested participant accounts are used to reduce employer contributions. For the years ended December 31, 2022 and 2021, participants forfeited \$723 and \$1,654, respectively. The Plan held \$3,089 and \$2,349 in a suspense account at December 31, 2022 and 2021, respectively, for the purpose of reducing future employer contributions. For the years ended December 31, 2022 and 2021, forfeitures of \$-0- and \$1,564 were used to reduce Employer contributions, respectively.

Notes Receivable from Participants

Participants who meet the requirements for a safe harbor hardship withdrawal may apply for a plan loan. All loans will be limited to the lesser of 50% of the participant's vested account balance or \$50,000. The minimum loan amount is \$1,000. Only one loan per participant may be outstanding at any time. There were no participant loans outstanding at December 31, 2022 and 2021.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump sum or installment payments. Participants may also receive an in-service distribution upon attainment of age 59 ½.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED:

Use of Estimates

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

Investment Valuation and Income Recognition

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

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

Valuation of Receivables

The carrying amounts of the various receivables are a reasonable estimate of their fair value because of the short maturity of these instruments.

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. There were no participant loans outstanding at December 31, 2022 and 2021.

Payment of Benefits

Benefits are recorded when paid to participants.

Expenses

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

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 3 - FAIR VALUE MEASUREMENTS

Authoritative guidance establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value.

The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in methodologies used at December 31, 2022 and 2021.

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

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 3 - FAIR VALUE MEASUREMENTS - CONTINUED:

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

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

		Assets at Fair Value as of December 31, 2022			
		Level 1	Level 2	Level 3	Total
Registered investment companies	\$	5,074,101	-	-	5,074,101
Investments at fair value	\$	5,074,101	-	-	5,074,101
		Assets at Fair Value as of December 31, 2021			
		Level 1	Level 2	Level 3	Total
Registered investment companies	\$	6,255,810	-	-	6,255,810
Investments at fair value	\$	6,255,810	-	-	6,255,810

Gains and losses included in the statement of changes in net assets available for benefits for the years ended December 31, 2022 and 2021, are reported in net appreciation (depreciation) in fair value of investments.

The Plan's policy is to recognize transfers between Levels 1 and 2 and into and out of Level 3 as of the date of the event or change in circumstances that caused the transfer. For the years ended December 31, 2022 and 2021, all investments were Level 1 assets, and, accordingly, there were no transfers between Levels 1 and 2 and no transfers into or out of Level 3.

NOTE 4 - INFORMATION CERTIFIED BY CUSTODIAN

Empower Annuity Insurance Company (Empower) is the stated custodian of the Plan. The following information included in the financial statements was certified by the custodian for 2022 and 2021, as follows:

FRENCH CAMP ACADEMY 403(B) PLAN

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 4 - INFORMATION CERTIFIED BY CUSTODIAN - CONTINUED:

	<u>2022</u>	<u>2021</u>
INVESTMENTS, at fair value:		
Registered investment companies	\$ <u>5,074,101</u>	<u>6,255,810</u>
INVESTMENT INCOME (LOSS):		
Net appreciation (depreciation) in fair value of investments	\$ (1,373,679)	342,974
Dividends	<u>235,160</u>	<u>452,880</u>
	\$ <u>(1,138,519)</u>	<u>795,854</u>

NOTE 5 - PLAN TERMINATION

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

NOTE 6 - TERMINATED PARTICIPANTS

As of December 31, 2022 and 2021, net assets of the Plan include \$587,302 and \$734,049 payable to terminated participants, respectively.

NOTE 7 - TAX STATUS

The Plan has been designed to qualify under Section 403(b) of the Internal Revenue Code (Code). The terms of the Plan have been prepared to conform to the sample language provided by the Internal Revenue Service (IRS) in Revenue Procedure 2007-71. The Plan administrator intends to apply for a determination letter on the Plan. Effective July 1, 2023, the IRS created a program for issuing determination letters for 403(b) plans. The Plan is required to operate in conformity with the Code to maintain the tax-exempt status for Plan participants under Section 403(b).

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Department of Labor. The Plan administrator has analyzed the tax positions taken by the Plan,

FRENCH CAMP ACADEMY 403(B) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

NOTE 7 - TAX STATUS - CONTINUED:

and has concluded that as of December 31, 2022 and 2021, there were no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 8 - RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

Empower serves as the third-party administrator of the Plan. Fees incurred by the Plan for investment management services are included in net appreciation (depreciation) in fair value of the investment, as they are paid through revenue sharing, rather than a direct payment. Fees paid by the Plan for record keeping services amounted to \$48,835 and \$53,310 for the years ended December 31, 2022 and 2021, respectively.

NOTE 9 - RISKS AND UNCERTAINTIES

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

NOTE 10 - SUBSEQUENT EVENTS

The Plan had no subsequent events of a material nature requiring adjustment to or disclosure in the financial statements through October XX, 2023, the date the financial statements were approved by the Plan's management and thereby available to be issued.

SUPPLEMENTAL INFORMATION

FRENCH CAMP ACADEMY 403(B) PLAN

**SCHEDULE OF ASSETS HELD AT END OF YEAR
DECEMBER 31, 2022
FORM 5500, SCHEDULE H, PART IV, ITEM 4i
EIN 64-0321520, PLAN 003**

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value	
AB Small Cap Growth Fund	7,178 shares in registered investment company	\$ **	377,264	
Dodge & Cox Income Fund	43,634 shares in registered investment company	**	531,897	
Eaton Vance Atlanta SMID-Cap Fund	9,740 shares in registered investment company	**	332,721	
Fidelity Government MM Fund	332,650 shares in registered investment company	**	335,739	
Fidelity International Index Fund	9,417 shares in registered investment company	**	387,880	
JP Morgan Large Cap Growth Fund	21,493 shares in registered investment company	**	1,008,451	
MFS Mid Cap Value Fund	2,632 shares in registered investment company	**	74,013	
MFS Value Fund	13,450 shares in registered investment company	**	638,199	
Pioneer Classic Balanced Fund	3,469 shares in registered investment company	**	31,743	
T. Rowe Price Retirement 2020 Fund	23,036 shares in registered investment company	**	385,625	
T. Rowe Price Retirement 2025 Fund	550 shares in registered investment company	**	8,041	
T. Rowe Price Retirement 2030 Fund	788 shares in registered investment company	**	17,221	
T. Rowe Price Retirement 2035 Fund	52 shares in registered investment company	**	888	
T. Rowe Price Retirement 2040 Fund	23,985 shares in registered investment company	**	585,718	
T. Rowe Price Retirement 2045 Fund	1,945 shares in registered investment company	**	33,597	
T. Rowe Price Retirement 2050 Fund	356 shares in registered investment company	**	5,200	

FRENCH CAMP ACADEMY 403(B) PLAN

SCHEDULE OF ASSETS HELD AT END OF YEAR - CONTINUED:

DECEMBER 31, 2022

FORM 5500, SCHEDULE H, PART IV, ITEM 4i

EIN 64-0321520, PLAN 003

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	T. Rowe Price Retirement 2055 Fund	3,138 shares in registered investment company	\$ **	47,796
	T. Rowe Price Retirement 2060 Fund	305 shares in registered investment company	**	8,076
	T. Rowe Price Retirement Balanced Fund	6,151 shares in registered investment company	**	73,499
	Vanguard 500 Index Fund	427 shares in registered investment company	**	151,087
	Vanguard Extended Market Index Fund	150 shares in registered investment company	**	15,143
	Vanguard Small Cap Index Fund	175 shares in registered investment company	**	15,368
	Vanguard Small Cap Value Index Fund	131 shares in registered investment company	**	<u>8,935</u>
			\$	<u>5,074,101</u>

** Not required for participant-directed investments

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
2MKSXX	0.02	0.020000	2	(0.01)	(0.010000)	1	(0.01)	SERIES
3FZCXX	2,609.42	2,609.424511	7	(7.42)	(7.420000)	3	(7.42)	SERIES
4FZCXX	488.86	488.860908	6	(1.64)	(1.640000)	3	(1.64)	SERIES
1TRRIX	78,753.37	6,159.042259	89	(111.08)	(8.462895)	18	(108.66)	SERIES
1TRRBX	426,850.91	23,231.908980	88	(3,761.18)	(195.792871)	44	(3,635.90)	SERIES
1TRRHX	8,802.21	550.680703	12	(11.44)	(0.682518)	4	(11.00)	SERIES
1TRRCX	18,739.96	788.797764	22	(25.40)	(1.016068)	8	(24.34)	SERIES
1TRRJX	949.07	52.081275	8	(1.38)	(0.071982)	4	(1.31)	SERIES
1TRRDY	624,477.48	24,088.434153	114	(2,785.42)	(103.237290)	54	(2,688.30)	SERIES
1TRRKX	35,429.54	1,948.005889	56	(49.94)	(2.609834)	24	(47.58)	SERIES
1TRRMX	5,486.24	356.153177	18	(7.56)	(0.466797)	8	(7.20)	SERIES
1TRRNX	52,167.11	3,273.642608	52	(2,123.52)	(135.386481)	24	(2,156.36)	SERIES
1TRRLX	8,387.45	640.212032	32	(11.09)	(0.807300)	12	(10.57)	SERIES
1FSPSX	366,020.10	9,551.849357	513	(5,579.60)	(134.997035)	292	(5,169.81)	SERIES
1QUAZX	394,031.15	7,231.409321	271	(2,867.92)	(53.632972)	277	(2,922.53)	SERIES
1VSMAX	15,764.99	175.026843	62	(25.45)	(0.276410)	44	(24.95)	SERIES
1VSIAX	9,046.78	131.124328	67	(15.00)	(0.211566)	46	(14.61)	SERIES
1EISMX	359,369.93	9,842.242110	370	(3,516.43)	(102.178006)	285	(3,732.85)	SERIES
1MVCKX	76,952.70	2,635.916895	142	(114.34)	(3.871084)	64	(113.09)	SERIES
1VEXAX	15,780.98	150.371567	83	(23.63)	(0.220729)	46	(23.21)	SERIES
1JLGMX	1,087,290.51	21,704.924913	564	(10,175.16)	(211.922272)	288	(10,619.13)	SERIES
1MEIKX	667,748.73	13,641.010500	674	(9,114.16)	(191.090919)	310	(9,357.54)	SERIES
1VFIAX	153,929.13	427.297786	90	(233.88)	(0.631036)	48	(227.31)	SERIES
1AYBLX	31,829.98	3,474.264311	29	(47.77)	(5.075342)	14	(46.50)	SERIES
1DODIX	530,804.18	44,657.356782	379	(12,649.23)	(1,023.445627)	274	(12,160.24)	SERIES
1FZCXX	335,402.70	335,402.741761	789	(2,752.79)	(2,752.790000)	213	(2,752.79)	SERIES

5% TRANSACTIONS

3FZCXX	1,906.55	1,906.554511	1	0.00	0.000000	0	0.00	28-OCT-22
4FZCXX	483.91	483.910908	1	0.00	0.000000	0	0.00	28-OCT-22
1TRRIX	71,832.29	5,594.414410	9	0.00	0.000000	0	0.00	28-OCT-22
1TRRBX	380,840.04	20,508.349704	20	0.00	0.000000	0	0.00	28-OCT-22
1TRRHX	7,295.77	452.591509	2	0.00	0.000000	0	0.00	28-OCT-22
1TRRCX	16,286.55	679.738964	4	0.00	0.000000	0	0.00	28-OCT-22
1TRRJX	870.67	47.525783	2	0.00	0.000000	0	0.00	28-OCT-22
1TRRDY	574,136.21	22,048.240869	24	0.00	0.000000	0	0.00	28-OCT-22
1TRRKX	32,087.93	1,759.207059	12	0.00	0.000000	0	0.00	28-OCT-22
1TRRMX	4,809.47	311.494190	4	0.00	0.000000	0	0.00	28-OCT-22
1TRRNX	47,684.20	2,985.861284	11	0.00	0.000000	0	0.00	28-OCT-22
1TRRLX	6,898.25	526.985881	6	0.00	0.000000	0	0.00	28-OCT-22
1FSPSX	352,213.64	9,217.841264	130	0.00	0.000000	0	0.00	28-OCT-22
1QUAZX	392,275.33	7,199.033046	135	0.00	0.000000	0	0.00	28-OCT-22
1VSMAX	15,559.06	172.724956	20	0.00	0.000000	0	0.00	28-OCT-22
1VSIAX	8,911.15	129.165966	20	0.00	0.000000	0	0.00	28-OCT-22
1EISMX	326,093.58	8,897.505215	126	0.00	0.000000	0	0.00	28-OCT-22
1MVCKX	73,015.63	2,497.968582	29	0.00	0.000000	0	0.00	28-OCT-22
1VEXAX	15,561.27	148.244900	24	0.00	0.000000	0	0.00	28-OCT-22
1JLGMX	1,049,373.48	20,933.044066	140	0.00	0.000000	0	0.00	28-OCT-22
1MEIKX	626,373.25	12,772.701731	138	0.00	0.000000	0	0.00	28-OCT-22
1VFIAX	151,847.01	421.481166	25	0.00	0.000000	0	0.00	28-OCT-22
1AYBLX	30,938.34	3,377.547629	7	0.00	0.000000	0	0.00	28-OCT-22
1DODIX	521,748.42	43,918.215587	129	0.00	0.000000	0	0.00	28-OCT-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

GA

French Camp Academy 403(b) Plan

29-OCT-22 to 31-DEC-22

28-JAN-23 08:52:08

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1FZCXX	330,867.05	330,867.091761	101	0.00	0.000000	0	0.00	28-OCT-22
2MKSXX	0.02	0.020000	2	(0.01)	(0.010000)	1	(0.01)	31-OCT-22
3FZCXX	8.19	8.190000	3	(3.95)	(3.950000)	1	(3.95)	31-OCT-22
4FZCXX	2.08	2.080000	3	(1.00)	(1.000000)	1	(1.00)	31-OCT-22
1TRRIX	67.24	5.253124	36	0.00	0.000000	0	0.00	31-OCT-22
1FZCXX	736.27	736.270000	387	0.00	0.000000	0	0.00	31-OCT-22
1TRRIX	168.75	13.287402	4	0.00	0.000000	0	0.00	02-NOV-22
1TRRBX	299.25	16.343528	4	0.00	0.000000	0	0.00	02-NOV-22
1TRRHX	300.00	18.915511	2	0.00	0.000000	0	0.00	02-NOV-22
1TRRCX	412.50	17.545725	4	0.00	0.000000	0	0.00	02-NOV-22
1TRRDY	1,175.00	46.223446	9	0.00	0.000000	0	0.00	02-NOV-22
1TRRKX	450.00	25.295110	4	0.00	0.000000	0	0.00	02-NOV-22
1TRRMX	150.00	9.966777	1	0.00	0.000000	0	0.00	02-NOV-22
1TRRNK	787.50	50.578035	8	0.00	0.000000	0	0.00	02-NOV-22
1TRRLX	525.00	41.144201	4	0.00	0.000000	0	0.00	02-NOV-22
1FSPSX	1,841.05	48.860138	63	0.00	0.000000	0	0.00	02-NOV-22
1QUAZX	884.05	16.835846	61	0.00	0.000000	0	0.00	02-NOV-22
1VSMAX	51.75	0.591834	8	0.00	0.000000	0	0.00	02-NOV-22
1VSIAX	36.00	0.534522	10	0.00	0.000000	0	0.00	02-NOV-22
1EISMV	836.50	23.287863	59	0.00	0.000000	0	0.00	02-NOV-22
1MVCKX	56.25	1.977848	10	0.00	0.000000	0	0.00	02-NOV-22
1VEXAX	60.75	0.598405	10	0.00	0.000000	0	0.00	02-NOV-22
1JLGMX	1,730.60	35.986690	63	0.00	0.000000	0	0.00	02-NOV-22
1MEIKX	1,790.25	37.273583	61	0.00	0.000000	0	0.00	02-NOV-22
1VFIAX	652.50	1.879157	12	0.00	0.000000	0	0.00	02-NOV-22
1AYBLX	112.50	12.555803	4	0.00	0.000000	0	0.00	02-NOV-22
1DODIX	2,313.25	195.046373	56	0.00	0.000000	0	0.00	02-NOV-22
1FZCXX	909.75	909.750000	44	0.00	0.000000	0	0.00	02-NOV-22
3FZCXX	679.89	679.890000	1	0.00	0.000000	0	0.00	09-NOV-22
1TRRNK	0.00	0.000000	0	(2,052.20)	(131.130981)	6	(2,088.39)	09-NOV-22
3FZCXX	0.00	0.000000	0	(1.52)	(1.520000)	1	(1.52)	11-NOV-22
4FZCXX	0.00	0.000000	0	(0.28)	(0.280000)	1	(0.28)	11-NOV-22
1TRRIX	0.00	0.000000	0	(53.51)	(4.081617)	9	(52.39)	11-NOV-22
1TRRBX	0.00	0.000000	0	(284.35)	(14.918678)	20	(277.04)	11-NOV-22
1TRRHX	0.00	0.000000	0	(5.45)	(0.328709)	2	(5.29)	11-NOV-22
1TRRCX	0.00	0.000000	0	(12.16)	(0.491711)	4	(11.77)	11-NOV-22
1TRRJX	0.00	0.000000	0	(0.66)	(0.034773)	2	(0.63)	11-NOV-22
1TRRDY	0.00	0.000000	0	(428.96)	(15.863904)	24	(413.08)	11-NOV-22
1TRRKX	0.00	0.000000	0	(23.93)	(1.261466)	12	(22.99)	11-NOV-22
1TRRMX	0.00	0.000000	0	(3.59)	(0.223537)	4	(3.44)	11-NOV-22
1TRRNK	0.00	0.000000	0	(34.19)	(2.057158)	9	(32.84)	11-NOV-22
1TRRLX	0.00	0.000000	0	(5.14)	(0.377386)	6	(4.93)	11-NOV-22
1FSPSX	0.00	0.000000	0	(278.51)	(6.666113)	129	(254.70)	11-NOV-22
1QUAZX	0.00	0.000000	0	(292.64)	(5.214535)	133	(284.15)	11-NOV-22
1VSMAX	0.00	0.000000	0	(11.61)	(0.124694)	19	(11.24)	11-NOV-22
1VSIAX	0.00	0.000000	0	(6.70)	(0.093562)	20	(6.46)	11-NOV-22
1EISMV	0.00	0.000000	0	(243.19)	(6.435299)	126	(235.84)	11-NOV-22
1MVCKX	0.00	0.000000	0	(54.82)	(1.811033)	29	(52.94)	11-NOV-22
1VEXAX	0.00	0.000000	0	(11.66)	(0.107773)	23	(11.34)	11-NOV-22
1JLGMX	0.00	0.000000	0	(770.66)	(15.212397)	139	(762.61)	11-NOV-22
1MEIKX	0.00	0.000000	0	(468.24)	(9.235503)	137	(452.91)	11-NOV-22
1VFIAX	0.00	0.000000	0	(113.48)	(0.307528)	24	(110.76)	11-NOV-22
1AYBLX	0.00	0.000000	0	(22.87)	(2.445988)	7	(22.41)	11-NOV-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

GA

French Camp Academy 403(b) Plan

29-OCT-22 to 31-DEC-22

28-JAN-23 08:52:08

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1DODIX	0.00	0.000000	0	(385.38)	(31.902317)	128	(379.07)	11-NOV-22
1FZCXX	0.00	0.000000	0	(246.49)	(246.490000)	102	(246.49)	11-NOV-22
1AYBLX	446.16	48.233514	7	0.00	0.000000	0	0.00	21-NOV-22
1FSPSX	0.00	0.000000	0	(227.58)	(5.400570)	2	(206.35)	29-NOV-22
1QUAZX	0.00	0.000000	0	(105.81)	(1.954017)	2	(106.48)	29-NOV-22
1EISMX	0.00	0.000000	0	(137.22)	(3.580897)	2	(131.24)	29-NOV-22
1JLGMX	0.00	0.000000	0	(464.29)	(9.250647)	2	(463.73)	29-NOV-22
1MEIKX	0.00	0.000000	0	(350.73)	(6.868977)	2	(336.86)	29-NOV-22
1DODIX	0.00	0.000000	0	(444.33)	(36.271836)	2	(430.91)	29-NOV-22
1FZCXX	0.00	0.000000	0	(60.30)	(60.300000)	2	(60.30)	29-NOV-22
3FZCXX	6.59	6.590000	1	0.00	0.000000	0	0.00	30-NOV-22
4FZCXX	1.33	1.330000	1	0.00	0.000000	0	0.00	30-NOV-22
1TRRIX	1,120.24	85.124621	9	0.00	0.000000	0	0.00	30-NOV-22
1FZCXX	914.40	914.400000	102	0.00	0.000000	0	0.00	30-NOV-22
1TRRIX	168.75	12.764750	4	0.00	0.000000	0	0.00	01-DEC-22
1TRRBX	299.25	15.314739	4	0.00	0.000000	0	0.00	01-DEC-22
1TRRHX	300.00	17.636684	2	0.00	0.000000	0	0.00	01-DEC-22
1TRRCX	187.50	7.381890	2	0.00	0.000000	0	0.00	01-DEC-22
1TRRDY	1,175.00	42.311846	9	0.00	0.000000	0	0.00	01-DEC-22
1TRRKX	450.00	23.100616	4	0.00	0.000000	0	0.00	01-DEC-22
1TRRMX	150.00	9.096422	1	0.00	0.000000	0	0.00	01-DEC-22
1TRRNX	562.50	32.971865	6	0.00	0.000000	0	0.00	01-DEC-22
1TRRLX	525.00	37.553649	4	0.00	0.000000	0	0.00	01-DEC-22
1FSPSX	1,775.05	40.918619	61	0.00	0.000000	0	0.00	01-DEC-22
1QUAZX	860.05	15.314286	59	0.00	0.000000	0	0.00	01-DEC-22
1VSMAX	51.75	0.550709	8	0.00	0.000000	0	0.00	01-DEC-22
1VSIAX	36.00	0.495663	10	0.00	0.000000	0	0.00	01-DEC-22
1EISMX	809.50	20.556121	57	0.00	0.000000	0	0.00	01-DEC-22
1MVCKX	56.25	1.821567	10	0.00	0.000000	0	0.00	01-DEC-22
1VEXAX	60.75	0.559391	10	0.00	0.000000	0	0.00	01-DEC-22
1JLGMX	1,682.60	32.470094	61	0.00	0.000000	0	0.00	01-DEC-22
1MEIKX	1,730.25	33.248475	59	0.00	0.000000	0	0.00	01-DEC-22
1VFIAX	652.50	1.729393	12	0.00	0.000000	0	0.00	01-DEC-22
1AYBLX	112.50	11.804827	4	0.00	0.000000	0	0.00	01-DEC-22
1DODIX	2,238.25	179.923634	54	0.00	0.000000	0	0.00	01-DEC-22
1FZCXX	909.75	909.750000	44	0.00	0.000000	0	0.00	01-DEC-22
1MVCKX	3,824.09	134.131530	87	0.00	0.000000	0	0.00	08-DEC-22
1FSPSX	10,002.09	239.628410	132	0.00	0.000000	0	0.00	09-DEC-22
3FZCXX	0.00	0.000000	0	(1.95)	(1.950000)	1	(1.95)	13-DEC-22
4FZCXX	0.00	0.000000	0	(0.36)	(0.360000)	1	(0.36)	13-DEC-22
1TRRIX	0.00	0.000000	0	(57.57)	(4.381278)	9	(56.27)	13-DEC-22
1TRRBX	0.00	0.000000	0	(302.79)	(15.559610)	20	(288.97)	13-DEC-22
1TRRHX	0.00	0.000000	0	(5.99)	(0.353809)	2	(5.71)	13-DEC-22
1TRRCX	0.00	0.000000	0	(13.24)	(0.524357)	4	(12.57)	13-DEC-22
1TRRJX	0.00	0.000000	0	(0.72)	(0.037209)	2	(0.68)	13-DEC-22
1TRRDY	0.00	0.000000	0	(459.68)	(16.703490)	24	(434.97)	13-DEC-22
1TRRKX	0.00	0.000000	0	(26.01)	(1.348368)	12	(24.59)	13-DEC-22
1TRRMX	0.00	0.000000	0	(3.97)	(0.243260)	4	(3.76)	13-DEC-22
1TRRNX	0.00	0.000000	0	(37.13)	(2.198342)	9	(35.13)	13-DEC-22
1TRRLX	0.00	0.000000	0	(5.95)	(0.429914)	6	(5.64)	13-DEC-22
1FSPSX	0.00	0.000000	0	(308.27)	(7.267090)	129	(278.45)	13-DEC-22
1QUAZX	0.00	0.000000	0	(303.16)	(5.514004)	134	(300.52)	13-DEC-22
1VSMAX	0.00	0.000000	0	(12.00)	(0.130734)	19	(11.81)	13-DEC-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

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French Camp Academy 403(b) Plan

29-OCT-22 to 31-DEC-22

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1VSIAX	0.00	0.000000	0	(6.93)	(0.098007)	20	(6.77)	13-DEC-22
1EISMX	31,630.35	900.892911	128	(240.09)	(6.838229)	126	(250.61)	13-DEC-22
1MVCKX	0.00	0.000000	0	(58.13)	(2.010726)	29	(58.70)	13-DEC-22
1VEXAX	0.00	0.000000	0	(11.97)	(0.112956)	23	(11.87)	13-DEC-22
1JLGMX	28,326.99	572.031303	142	(797.62)	(16.107031)	139	(807.39)	13-DEC-22
1MEIKX	0.00	0.000000	0	(506.32)	(9.774520)	137	(479.46)	13-DEC-22
1VFIAX	0.00	0.000000	0	(120.40)	(0.323508)	24	(116.55)	13-DEC-22
1AYBLX	0.00	0.000000	0	(24.90)	(2.629354)	7	(24.09)	13-DEC-22
1DODIX	0.00	0.000000	0	(421.27)	(33.567334)	129	(398.86)	13-DEC-22
1FZCXX	0.00	0.000000	0	(250.95)	(250.950000)	102	(250.95)	13-DEC-22
1TRRBX	0.00	0.000000	0	(3,174.04)	(165.314583)	4	(3,069.89)	15-DEC-22
1TRRDY	0.00	0.000000	0	(1,896.78)	(70.669896)	6	(1,840.25)	15-DEC-22
1QUAZX	0.00	0.000000	0	(196.09)	(3.683133)	2	(200.69)	15-DEC-22
1JLGMX	0.00	0.000000	0	(545.89)	(11.365605)	2	(569.57)	15-DEC-22
1MEIKX	37,854.98	797.786711	416	(764.69)	(16.115700)	2	(790.31)	15-DEC-22
1DODIX	0.00	0.000000	0	(359.53)	(28.579491)	2	(339.52)	15-DEC-22
1FZCXX	0.00	0.000000	0	(633.13)	(633.130000)	5	(633.13)	15-DEC-22
1FSPSX	0.00	0.000000	0	(1,909.43)	(46.742474)	16	(1,790.48)	19-DEC-22
1QUAZX	10.34	0.199538	7	(496.76)	(9.586260)	2	(522.35)	19-DEC-22
1VSMAX	18.39	0.210920	7	0.00	0.000000	0	0.00	19-DEC-22
1VSIAX	1.08	0.015969	7	0.00	0.000000	0	0.00	19-DEC-22
1EISMX	0.00	0.000000	0	(1,097.80)	(32.731068)	15	(1,195.05)	19-DEC-22
1MVCKX	0.48	0.017368	6	0.00	0.000000	0	0.00	19-DEC-22
1VEXAX	18.60	0.185833	7	0.00	0.000000	0	0.00	19-DEC-22
1JLGMX	31.36	0.663844	7	(3,281.13)	(69.456605)	2	(3,480.71)	19-DEC-22
1MEIKX	0.00	0.000000	0	(3,596.39)	(76.977526)	16	(3,767.98)	19-DEC-22
1VFIAX	767.11	2.179720	32	0.00	0.000000	0	0.00	19-DEC-22
1DODIX	4,460.46	360.586901	131	(8,192.33)	(662.274049)	9	(7,868.47)	19-DEC-22
1FZCXX	0.00	0.000000	0	(1,561.92)	(1,561.920000)	2	(1,561.92)	19-DEC-22
1JLGMX	6,128.68	130.369711	142	0.00	0.000000	0	0.00	20-DEC-22
1TRRIX	4,836.20	401.344397	18	0.00	0.000000	0	0.00	21-DEC-22
1TRRBX	45,412.37	2,691.901009	60	0.00	0.000000	0	0.00	21-DEC-22
1TRRHX	906.44	61.536999	6	0.00	0.000000	0	0.00	21-DEC-22
1TRRCX	1,853.41	84.131185	12	0.00	0.000000	0	0.00	21-DEC-22
1TRRJX	78.40	4.555492	6	0.00	0.000000	0	0.00	21-DEC-22
1TRRDY	47,991.27	1,951.657992	72	0.00	0.000000	0	0.00	21-DEC-22
1TRRKX	2,441.61	140.403104	36	0.00	0.000000	0	0.00	21-DEC-22
1TRRMX	376.77	25.595788	12	0.00	0.000000	0	0.00	21-DEC-22
1TRRNX	3,132.91	204.231424	27	0.00	0.000000	0	0.00	21-DEC-22
1TRRLX	439.20	34.528301	18	0.00	0.000000	0	0.00	21-DEC-22
1FSPSX	0.00	0.000000	0	(2,799.02)	(67.544062)	4	(2,586.85)	21-DEC-22
1QUAZX	0.00	0.000000	0	(1,473.46)	(27.681023)	4	(1,508.34)	21-DEC-22
1VSMAX	84.04	0.948424	19	0.00	0.000000	0	0.00	21-DEC-22
1VSIAX	62.55	0.912208	20	0.00	0.000000	0	0.00	21-DEC-22
1EISMX	0.00	0.000000	0	(1,790.10)	(52.357578)	4	(1,911.51)	21-DEC-22
1VEXAX	76.85	0.755429	23	0.00	0.000000	0	0.00	21-DEC-22
1JLGMX	0.00	0.000000	0	(4,315.57)	(90.529987)	4	(4,535.12)	21-DEC-22
1MEIKX	0.00	0.000000	0	(3,409.15)	(71.726190)	4	(3,510.77)	21-DEC-22
1DODIX	0.00	0.000000	0	(2,846.39)	(230.850600)	4	(2,743.41)	21-DEC-22
1FSPSX	0.00	0.000000	0	(56.79)	(1.376726)	12	(52.98)	27-DEC-22
1QUAZX	1.38	0.026605	9	0.00	0.000000	0	0.00	27-DEC-22
1VSMAX	0.00	0.000000	0	(1.84)	(0.020982)	6	(1.90)	27-DEC-22
1VSIAX	0.00	0.000000	0	(1.37)	(0.019997)	6	(1.38)	27-DEC-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

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French Camp Academy 403(b) Plan

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1EISMX	0.00	0.000000	0	(8.03)	(0.234935)	12	(8.60)	27-DEC-22
1MVCKX	0.00	0.000000	0	(1.39)	(0.049325)	6	(1.45)	27-DEC-22
1VEXAX	2.76	0.027609	9	0.00	0.000000	0	0.00	27-DEC-22
1JLGMX	16.80	0.359205	9	0.00	0.000000	0	0.00	27-DEC-22
1MEIKX	0.00	0.000000	0	(18.64)	(0.392503)	12	(19.25)	27-DEC-22
1VFIAX	10.01	0.028350	9	0.00	0.000000	0	0.00	27-DEC-22
1AYBLX	220.48	24.122538	7	0.00	0.000000	0	0.00	27-DEC-22
1DODIX	43.80	3.584287	9	0.00	0.000000	0	0.00	27-DEC-22
1FZCXX	13.31	13.310000	9	0.00	0.000000	0	0.00	27-DEC-22
1FSPSX	188.27	4.600926	127	0.00	0.000000	0	0.00	28-DEC-22
3FZCXX	8.20	8.200000	1	0.00	0.000000	0	0.00	30-DEC-22
4FZCXX	1.54	1.540000	1	0.00	0.000000	0	0.00	30-DEC-22
1TRRIX	559.90	46.853555	9	0.00	0.000000	0	0.00	30-DEC-22
1FZCXX	1,052.17	1,052.170000	102	0.00	0.000000	0	0.00	30-DEC-22

LEGEND

INVESTMENT OPTION:

2MKSXX MassMutual US Government Mny Mkt Fd
 4FZCXX Fidelity(R) Government MMkt Prm
 1TRRBX T. Rowe Price Retirement 2020 Fund
 1TRRCX T. Rowe Price Retirement 2030 Fund
 1TRRDY T. Rowe Price Retirement 2040 Fund
 1TRRMX T. Rowe Price Retirement 2050 Fund
 1TRRLX T. Rowe Price Retirement 2060 Fund
 1QUAZX AB Small Cap Growth Z
 1VSIAX Vanguard Small Cap Value Index Admiral
 1MVCKX MFS Mid Cap Value R6
 1JLGMX JPMorgan Large Cap Growth R6
 1VFIAX Vanguard 500 Index Admiral
 1DODIX Dodge & Cox Income - I

3FZCXX Fidelity(R) Government MMkt Prm
 1TRRIX T. Rowe Price Retirement Balanced Fund
 1TRRHX T. Rowe Price Retirement 2025 Fund
 1TRRJX T. Rowe Price Retirement 2035 Fund
 1TRRKX T. Rowe Price Retirement 2045 Fund
 1TRRNX T. Rowe Price Retirement 2055 Fund
 1FSPSX Fidelity International Index
 1VSMAX Vanguard Small Cap Index Adm
 1EISMX Eaton Vance Atlanta Capital SMID-Cap I
 1VEXAX Vanguard Extended Market Idx Adm
 1MEIKX MFS Value R6
 1AYBLX Pioneer Classic Balanced ESG Y
 1FZCXX Fidelity(R) Government MMkt Prm

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

French Camp Academy 403(b) Plan

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INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
1TRRIX			78,644.69	73,499.43
1TRRBX			423,215.05	385,624.57
1TRRHX			8,791.21	8,040.97
1TRRCX			18,715.62	17,220.90
1TRRJX			947.75	888.32
1TRRDY			621,789.17	585,718.50
1TRRKX			35,381.94	33,596.98
1TRRMX			5,479.03	5,200.14
1TRRNX			50,010.78	47,795.65
1TRRLX			8,376.88	8,075.69
1FSPSX			360,850.26	387,880.19
1QUAZX			391,108.70	377,263.95
1VSMAX			15,740.10	15,367.55
1VSIAX			9,032.17	8,934.80
1EISMX			355,637.08	332,720.61
1MVCKX			76,839.63	74,013.13
1VEXAX			15,757.79	15,142.71
1JLGMX			1,076,671.49	1,008,451.69
1MEIKX			658,391.30	638,198.64
1VFIAX			153,701.78	151,086.96
1AYBLX			31,783.49	31,743.07
1DODIX			518,644.06	531,897.32
1FZCXX			332,649.91	332,649.91
			5,248,159.88	5,071,011.68
FORFEITURES			3,089.23	3,089.23

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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French Camp Academy 403(b) Plan

29-OCT-22 to 31-DEC-22

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INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
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LEGEND

INVESTMENT OPTION:

1TRRIX T. Rowe Price Retirement Balanced Fund
 1TRRHX T. Rowe Price Retirement 2025 Fund
 1TRRJX T. Rowe Price Retirement 2035 Fund
 1TRRKX T. Rowe Price Retirement 2045 Fund
 1TRRNX T. Rowe Price Retirement 2055 Fund
 1FSPSX Fidelity International Index
 1VSMAX Vanguard Small Cap Index Adm
 1EISMX Eaton Vance Atlanta Capital SMID-Cap I
 1VEXAX Vanguard Extended Market Idx Adm
 1MEIKX MFS Value R6
 1AYBLX Pioneer Classic Balanced ESG Y
 1FZCXX Fidelity(R) Government MMkt Prm

1TRRBX T. Rowe Price Retirement 2020 Fund
 1TRRCX T. Rowe Price Retirement 2030 Fund
 1TRRDY T. Rowe Price Retirement 2040 Fund
 1TRRMX T. Rowe Price Retirement 2050 Fund
 1TRRLX T. Rowe Price Retirement 2060 Fund
 1QUAZX AB Small Cap Growth Z
 1VSIAX Vanguard Small Cap Value Index Admiral
 1MVCKX MFS Mid Cap Value R6
 1JLGMX JPMorgan Large Cap Growth R6
 1VFIAX Vanguard 500 Index Admiral
 1DODIX Dodge & Cox Income - I

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year

CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year