

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 SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF RURAL MEDICAL SERVICES, INC.	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 10/01/1994
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, country, and ZIP or foreign postal code (if foreign, see instructions) RURAL MEDICAL SERVICES, INC. 207 MURRAY DR NEWPORT, TN 37821-3631	2b	Employer Identification Number (EIN) 62-1102683
		2c	Plan Sponsor's telephone number 423-613-3300
		2d	Business code (see instructions) 621111

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.	11/27/2023	AMY BRADSHAW
	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

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 RURAL MEDICAL SERVICES, INC. c Plan Name 403(B) THRIFT PLAN OF RURAL MEDICAL SERVICES, INC		4b EIN 62-1102683 4d PN 001
5 Total number of participants at the beginning of the plan year		5 155
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)..... h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6a(1) 89 6a(2) 113 6b 1 6c 71 6d 185 6e 0 6f 185 6g 175 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: 2G 3D 2L 2S 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) ☒ 1 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 SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF RURAL MEDICAL SERVICES, INC.	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 RURAL MEDICAL SERVICES, INC.	D Employer Identification Number (EIN) 62-1102683

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 MUTUAL OF AMERICA SEC. CORP LLC
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(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
13-1614399	88668	061607	185	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.
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(a) Total amount of commissions paid 0	(b) Total amount of fees paid 2123
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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 NASHVILLE 555 MARRIOTT DRIVE SUITE 510 NASHVILLE, TN 37214-5108
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	2123	INCENTIVE COMPENSATION	3

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

(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	1006912
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	6897722

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 ▶

b	Balance at the end of the previous year	7b	647692
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c	Additions: (1) Contributions deposited during the year	7c(1)	33562
	(2) Dividends and credits	7c(2)	0
	(3) Interest credited during the year	7c(3)	2357
	(4) Transferred from separate account	7c(4)	376441
	(5) Other (specify below)	7c(5)	0

(6) Total additions	7c(6)	412360
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1060052
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	44232
(2) Administration charge made by carrier	7e(2)	40
(3) Transferred to separate account	7e(3)	8868
(4) Other (specify below)	7e(4)	0

(5) Total deductions	7e(5)	53140
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1006912
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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)	0
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)	0
(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)	0
(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 SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF RURAL MEDICAL SERVICES, INC.	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 RURAL MEDICAL SERVICES, INC.	D Employer Identification Number (EIN) 62-1102683	

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	
DWS	210 WEST 10TH STREET KANSAS CITY, MO 64105

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
FIDELITY INVESTMENTS	82 DEVONSHIRE STREET BOSTON, MA 02109

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
GOLDMAN SACHS	200 WEST STREET NEW YORK, NY 10282

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
MUTUAL OF AMERICA	320 PARK AVE NEW YORK, NY 10022

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

NEUBERGER BERMAN

1290 AVENUE OF THE AMERICAS
NEW YORK, NY 10104

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

INVESCO

11 GREENWAY PLAZA
STE. 2500
HOUSTON, TX 77046

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

T. ROWE PRICE

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

VANGUARD

100 VANGUARD BOULEVARD
MALVERN, PA 19355

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

AMERICAN CENTURY INVESTMENTS

P.O. BOX 419200
4500 MAIN STREET
KANSAS CITY, MO 64141

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

MFS

111 HUNTINGTON AVENUE
BOSTON, MA 02199

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

DELAWARE FUNDS BY MACQUARIE

PO BOX 9876
PROVIDENCE, RI 02940

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

VICTORY CAPITAL MANAGEMENT INC.

15935 LA CANTERA PARKWAY
BUILDING TWO
SAN ANTONIO, TX 78256

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

PIMCO

840 NEWPORT CENTER DRIVE
SUITE 100
NEWPORT BEACH, CA 92660

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

AMERICAN FUNDS

333 SOUTH HOPE STREET
LOS ANGELES, CA 90071-1406

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

CALVERT RESEARCH AND MANAGEMENT

1825 CONNECTICUT AVENUE NW
SUITE 400
WASHINGTON, DC 20009

(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

(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

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)

MUTUAL OF AMERICA INVESTMENT CORP

320 PARK AVENUE
NEW YORK, NY 10022

(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?
12 15 37 65	INSURANCE CARRIER	623	Yes ☒ No ☐	Yes ☒ No ☐	0	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 ☐

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

A Name of plan SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF RURAL MEDICAL SERVICES, INC.		B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 RURAL MEDICAL SERVICES, INC.		D Employer Identification Number (EIN) 62-1102683	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT NUMBER SA2			
b Name of sponsor of entity listed in (a): MUTUAL OF AMERICA			
c EIN-PN 13-1614399-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6897722	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

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

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>SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF RURAL MEDICAL SERVICES, INC.</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>RURAL MEDICAL SERVICES, INC.</u>	D Employer Identification Number (EIN) <u>62-1102683</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)	1101025799
(2) Participant contributions.....		1b(2)	103939363
(3) Other.....		1b(3)	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....		1c(1)	00
(2) U.S. Government securities		1c(2)	00
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A)	00
(B) All other		1c(3)(B)	00
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A)	00
(B) Common.....		1c(4)(B)	00
(5) Partnership/joint venture interests		1c(5)	00
(6) Real estate (other than employer real property)		1c(6)	00
(7) Loans (other than to participants).....		1c(7)	00
(8) Participant loans.....		1c(8)	4038819098
(9) Value of interest in common/collective trusts.....		1c(9)	00
(10) Value of interest in pooled separate accounts		1c(10)	82984056897722
(11) Value of interest in master trust investment accounts.....		1c(11)	00
(12) Value of interest in 103-12 investment entities		1c(12)	00
(13) Value of interest in registered investment companies (e.g., mutual funds).....		1c(13)	00
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	607304987814
(15) Other		1c(15)	00

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	8967500	7939796

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	8967500	7939796
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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)	304312	
(B) Participants	2a(1)(B)	300937	
(C) Others (including rollovers)	2a(1)(C)	39670	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		644919
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	2357	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2357
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(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)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-1382965
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		-735689
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	291392	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		291392
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	623	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		623
j Total expenses. Add all expense amounts in column (b) and enter total	2j		292015
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-1027704
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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: TERRY HORNE, CPA

(2) EIN: 62-1867889

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

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

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

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

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

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 _____.

**SAFE-HARBOR 403(B) THRIFT
PLAN FOR EMPLOYEES OF
RURAL MEDICAL SERVICES, INC.**

FINANCIAL STATEMENTS

December 31, 2022

**SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF
RURAL MEDICAL SERVICES, INC.**

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TERRY L. HORNE, CPA

732 West Main Street
Lebanon, TN 37087
Office (615) 444-7293
FAX (615) 443-5189

Independent Auditor's Report

To the Administrative Committee of
Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

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

We have performed audits of the financial statements of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc., 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 statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 subjected to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 5 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 accompanying financial statements, 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 accompanying financial statements 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 (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of 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 Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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.

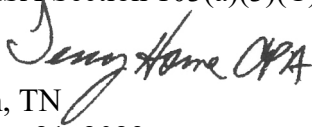
Other Matter-Supplemental Schedule Required by ERISA

The supplemental schedule of Schedule of Assets (Held at End of Year) is presented for purpose of additional analysis and is not a required part of the financial statements, but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. 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, are 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 qualified institutions agrees to, or is derived from, in all materials respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).


Lebanon, TN
November 21, 2023

**SAFE-HARBOR 403(b) THRIFT PLAN FOR EMPLOYEES
OF RURAL MEDICAL SERVICES, INC.
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2022 and 2021**

	December 31,	
	2022	2021
Assets		
Investments, at fair value	\$ 6,897,722	\$ 8,298,405
Investments, at contract value	987,814	607,304
Receivables		
Employer contribution	25,799	11,010
Employee contribution	9,363	10,393
Notes receivable from participants	19,098	40,388
Total receivables	54,260	61,791
Total Assets	\$ 7,939,796	\$ 8,967,500
Liabilities	\$ 0	\$ 0
Total Liabilities	0	0
Net assets available for benefits	\$ 7,939,796	\$ 8,967,500

**SAFE-HARBOR 403(b) THRIFT PLAN FOR EMPLOYEES
OF RURAL MEDICAL SERVICES, INC.
STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR PLAN BENEFITS
For the Year Ended December 31, 2022**

Additions (Reductions)

Additions (Reductions) to net assets attributed to:

Investment income (loss):

Net appreciation (depreciation) in fair value of investments	\$ (1,382,965)
Interest	2,357
Total investment income (loss)	<u>(1,380,608)</u>

Contributions:

Employer	304,312
Participants	300,937
Rollover	39,670
Total contributions	<u>644,919</u>

Total additions (reductions)	<u>(735,689)</u>
------------------------------	------------------

Deductions

Deductions from net assets attributed to:

Benefits paid to participants	291,392
Administrative expense	623

Total deductions	<u>292,015</u>
------------------	----------------

Net increase (decrease) in net assets available for benefits	(1,027,704)
---	-------------

Net assets available for benefits

Beginning of year	<u>8,967,500</u>
End of year	<u><u>\$ 7,939,796</u></u>

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 1 - Description of Plan

The following description of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc. ("Plan") sponsored by Rural Medical Services, Inc. ("Company") 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, established by Rural Medical Services, Inc. ("Company") effective October 1, 1994 for the benefit of its employees. It is subject to the provisions of the *Employee Retirement Income Security Act of 1974* (ERISA).

The Plan was amended effective November 1, 2018 to change the plan name from "Rural Medical Services Employer Sponsored 403(b) Plan" to "403(b) Thrift Plan of Rural Medical Services, Inc." The amendment was also made to adopt an automatic contribution agreement whereby all individuals who became employed on or after November 1, 2018 have been deemed to have directed the Company to make salary reduction contributions of 1% of compensation on his/her behalf after thirty days of employment. Subsequent to November 1, 2018, participant loans are permitted by the Plan.

The plan was amended effective January 1, 2022 to change the plan name from "403(b) Thrift Plan of Rural Medical Services, Inc." to "Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc." The amendment was also adopted to provide a safe-harbor provision, replaced the thirty-day employer contribution requirement with the first day of the month following hire date, and updated the definition of Plan Compensation to include all wages.

Contributions

Participants may contribute to the Plan via pre-tax or Roth salary deferrals and may change their contribution percentage at their discretion. The maximum annual contribution allowed in a calendar year for each participant is prescribed by federal statutes (\$20,500 in 2022 and \$19,500 in 2021). Additional catch-up contributions are permitted for participants who are age 50 or older by the end of the calendar year in which the catch-up contributions are made.

The Company makes an "employer base contribution" for eligible employees, as defined by the plan document. The Company contributes a safe-harbor fixed percentage equal to 5% of the employee's compensation, as defined in the Plan agreement.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Participant Account

Each participant's account is credited with the participant's contribution, the Company's contributions, and investment earnings. Each participant's account is charged with an allocable portion of the administrative expenses paid by the Plan. Allocations of contributions are based on participant compensation, and allocations of earnings are based on each participant's account balance. Upon retirement or termination, a participant is entitled to the balance in his/her account. A participant may elect to direct the investment allocation of his/her account or to allow an investment manager to direct the investments.

Vesting

Participants are immediately vested in all contributions plus actual earnings thereon. Accordingly, there were no forfeitures during the plan year ended December 31, 2022, and no forfeitures were utilized or outstanding.

Administrative Expenses

Certain expenses incurred in the administration of the Plan are paid directly by the Company.

Investment options

Investments are participant-directed among various mutual funds offered by the Plan.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive an amount equal to the value of the participant's interest in his or her account in either a lump-sum amount or under a specified payments option which provides for a series of monthly withdrawals from the participant's account. Other withdrawals from participants' accounts balances may be made under certain circumstances, as defined in the Plan document.

Contributions receivable

Contributions receivable are recorded when determined contributions of the employer and employees are not received by the investment custodian until a subsequent reporting period. An allowance is provided when necessary to recognize potentially uncollectible receivables and amounts deemed worthless are written off. There were contributions receivable of \$35,162 and \$21,403 at December 31, 2022 and 2021, respectively. There was no allowance for uncollectible receivables deemed necessary at these reporting dates.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser value of \$50,000 or 50% of their account balance. The loans are to be secured only by the balance in the participant's account, and each participant is limited to two loans outstanding at one time. The term of the loan must not exceed five years, and it will bear interest at a rate determined by the custodian. Principal and interest on these loans are paid ratably through payroll deductions. At December 31, 2022 and 2021, the Plan had loans receivable from participants of \$19,098 and \$40,388, respectively.

Note 2 – Summary of Significant Accounting Policies

Basis of accounting

The accompanying financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") using the accrual method of accounting. U.S. GAAP is embodied in the Financial Accounting Standards Board *Accounting Standards Codification* ("FASB ASC"), which is the authoritative source of U.S. accounting and reporting standards for nongovernmental entities.

Use of estimates

The preparation of financial statements in conformity 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 and changes in net assets and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates, and such differences could be material. Significant estimates used in preparing these financial statements include those used to establish the fair values of investments.

Valuation of investments

The investments in the funds are presented at fair value. Shares of registered investment companies are valued based on quoted market prices, which represent the net asset value of shares held by the Plan at year-end.

The Plan provides fixed income accounts as investment options available to Plan participants. These investments are fixed income options (i.e., a deposit administration contract) that provide a more stable asset value with a guaranteed rate of return. These investments are valued at contract value.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

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. Unrealized gains and losses are recorded for changes in the fair value of mutual fund investments during the year. Realized gains and losses are recorded when investments are sold. Realized and unrealized gains and losses for each reporting period are combined and presented as net appreciation (depreciation) in fair value of investments in the accompanying statement of changes in net assets available for benefits.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance.

Note 3 – Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participant accounts would continue to be held by the Plan's trustee until all vested benefits are distributed to the participants.

Note 4- Benefits payable to former participants

The portion of net assets which had been processed for payment to persons who requested withdrawals but had not yet been paid by the Plan was \$0 at both December 31, 2022 and 2021.

Note 5 – Description of Information Certified by the Plan Trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

The following was provided and certified by Mutual of America Life Insurance Company, the Plan's trustee/custodian:

	<u>2022</u>	<u>2021</u>
Investments, at fair value	\$ 6,897,722	\$ 8,298,405
Investments, at contract value	987,814	607,304
Notes receivable from participants	19,098	40,388
Investment income (loss)	\$(1,380,608)	

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 6 – Investment in Insurance Company General Account

The Plan has included the “Mutual of America Interest Accumulation” account (Interest Accumulation account) as an investment option available to Plan participants. This investment represents a fixed income option (i.e., a deposit administration contract) that typically provides a more stable valuation, combined with a guaranteed rate of return. Investments are held in the general obligation account of Mutual of America, which provides the cash flow for all of the insurance company’s general obligations and contractual commitments.

Amounts placed in the Interest Accumulation account are credited with interest at a rate determined by Mutual of America, and Mutual of America reserves the right to change the interest rates applicable to amounts held in the Interest Accumulation account at its discretion.

It is possible that certain types of events could permit the insurance company to terminate the contract and limit the Plan’s ability to process transactions at contract value, including an amendment to the Plan document to terminate the Plan. The Plan administrator does not believe these events are probable of occurring.

The fixed income contract meets the criteria to be considered a fully benefit-responsive investment contract. Accordingly, the amount participants would receive upon withdrawal is limited to contract value. This measurement is utilized for reporting the investment in the accompanying statements of net assets available for benefits. The Plan administrator does not consider an allowance for potential loss of contract value necessary at December 31, 2022 or 2021.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 7 – Fair Value Measurements

The Plan adopted the Fair Value Measurement and Disclosure topic of the FASB ASC, which establishes a framework for measuring 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 below:

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

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets 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 the observable market data by correlation or other means.

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

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

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

The investments in the registered investment companies are based on quoted market prices. There have been no changes in the methodologies used during the years ended December 31, 2022 and 2021.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

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

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

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
December 31, 2022				
Pooled				
Separate Accounts	\$ 6,897,722	\$ 0	\$ 0	\$ 6,897,722
Total	\$ 6,897,722	\$ 0	\$ 0	\$ 6,897,722
December 31, 2021				
Pooled				
Separate Accounts	\$ 8,298,405	\$ 0	\$ 0	\$ 8,298,405
Total	\$ 8,298,405	\$ 0	\$ 0	\$ 8,298,405

Note 8 – Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of differences between the financial statements at December 31, 2022 and 2021 to Schedule H of Form 5500:

	<u>2022</u>	<u>2021</u>
Net assets available for benefits per the financial statements	\$ 7,939,796	\$ 8,967,500
Net assets available for benefits per Schedule H of Form 5500	\$ 7,939,796	\$ 8,967,500

Note 9 – Income Tax Status

The Plan is a prototype plan that qualifies for tax-exempt status; however it has not received a favorable determination letter issued by the Internal Revenue Service. The plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the plan has been amended since inception, the plan administrator and the plan's tax counsel believe that the plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the plan is qualified and the related trust is tax-exempt.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

The Plan adheres to guidance issued by the Codification with respect to accounting for uncertainty in income taxes. This guidance clarifies the accounting for uncertainty in income taxes recognized in an enterprise's financial statements and prescribes a comprehensive model for recognizing, measuring, presenting, and disclosing in the financial statements tax positions taken or expected to be taken on a tax return including positions that the organization is exempt from income taxes or not subject to income taxes or unrelated business income. With few exceptions, the Plan is no longer subject to income tax examinations by federal, state, or local tax authorities for years prior to the current and two most recent tax years.

Note 10 – Related Party Transactions

Certain plan investments are shares of mutual funds and annuities managed by Mutual of America Financial Group, who is the trustee/custodian as defined by the Plan. These transactions qualify as exempt party-in-interest transactions.

Note 11 – 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 12 – Corrective Employer Base Contributions

The Plan administrator determined that, during the year ended December 31, 2021, certain compensation was inappropriately included while other eligible compensation was excluded from the calculation of employee salary reduction contributions. The Plan administrator finalized the calculation of the correction in November 2023 and made a corrective contribution of \$3,738. This correction does not include a provision for lost earnings.

The Plan administrator also determined that, during the year ended December 31, 2022, certain compensation was inappropriately excluded from the calculation of employee salary reduction contributions. The Plan administrator finalized the calculation of the correction in November 2023 and made a corrective contribution of \$11,319. This correction does not include a provision for lost earnings.

Accordingly, receivables for the corrective contributions have been included in the accompanying financial statements.

**Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.**

Notes to Financial Statements

December 31, 2022

Note 13 – Subsequent Events

In addition to ongoing supply chain issues as a result of the COVID-19 pandemic, certain geopolitical risks abroad are causing inflationary pressures and energy price increases. Together these risks may cause significant market volatility, which may affect the Plan's investments. No adjustments have been made to these financial statements as a result of these uncertainties.

The Plan has evaluated subsequent events through November 21, 2023, the date the financial statements were available to be issued, for potential recognition or disclosure in the financial statements. Management has not identified any additional items requiring recognition or disclosure.

SUPPLEMENTAL SCHEDULE

Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.
Plan EIN:62-1102683
Plan Number: 001
December 31, 2022

Schedule H, Line 4i- Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
Party in Interest	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Y	Mutual of America Investment Corporation	Mutual of America Aggressive Allocation	*	\$ 831
Y	Mutual of America Investment Corporation	Mutual of America Conservative Allocation	*	111,961
Y	Mutual of America Investment Corporation	Mutual of America Moderate Allocation	*	10,128
Y	Mutual of America Investment Corporation	Mutual of America Bond	*	18
	T. Rowe Price	T. Rowe Price Blue Chip Growth Portfolio	*	7,119
Y	Mutual of America Investment Corporation	Mutual of America Composite Fund	*	38,508
	Calvert	Calvert VP SRI Balanced Portfolio	*	91
	Delaware Funds by Macquarie	Delaware VIP Small Cap Value Series	*	18
Y	Mutual of America Investment Corporation	Mutual of America Equity Index Fund	*	524,258
	Fidelity Investments	Fidelity VIP Mid Cap Portfolio	*	2,448
	Fidelity Investments	Fidelity VIP Asset Manager	*	18
	Fidelity Investments	Fidelity VIP Contrafund Portfolio	*	202,659
	Fidelity Investments	Fidelity VIP Equity-Income Portfolio	*	14,183
	Goldman Sachs	Goldman Sachs VIT US Equity Insights Fund	*	605
	Goldman Sachs	Goldman Sachs VIT Small Cap Equity Insights Fund	*	20
	American Funds	American Funds IS New World Fund	*	20,505
Y	Mutual of America Investment Corporation	Mutual of America Money Market Fund	*	18
Y	Mutual of America Investment Corporation	Mutual of America Mid-Term Bond Fund	*	789
Y	Mutual of America Investment Corporation	Mutual of America Mid-Cap Equity Index	*	257,160
	Massachusetts Financial Services	MFS VIT III Mid Cap Value Portfolio	*	19
Y	Mutual of America Investment Corporation	Mutual of America Mid-Cap Value	*	18
	Neuberger Berman	Neuberger Berman AMT Sustainable Equity Portfolio	*	91
Y	Mutual of America Investment Corporation	Mutual of America International	*	97
	Invesco Oppenheimer	Invesco Oppenheimer VA Main Street	*	1,276
Y	Mutual of America Investment Corporation	Mutual of America 2015 Retirement Fund	*	18
Y	Mutual of America Investment Corporation	Mutual of America 2020 Retirement Fund	*	73,397
Y	Mutual of America Investment Corporation	Mutual of America 2025 Retirement Fund	*	213,807
Y	Mutual of America Investment Corporation	Mutual of America 2030 Retirement Fund	*	333,755
Y	Mutual of America Investment Corporation	Mutual of America 2035 Retirement Fund	*	1,912,399

*Cost information is not required for participant-directed investments.

See independent auditor's report.

Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.
Plan EIN:62-1102683
Plan Number: 001
December 31, 2022

Schedule H, Line 4i- Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
Party in Interest	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Y	Mutual of America Investment Corporation	Mutual of America 2040 Retirement Fund	*	862,937
Y	Mutual of America Investment Corporation	Mutual of America 2045 Retirement Fund	*	611,896
Y	Mutual of America Investment Corporation	Mutual of America 2050 Retirement Fund	*	664,782
Y	Mutual of America Investment Corporation	Mutual of America 2055 Retirement Fund	*	156,383
Y	Mutual of America Investment Corporation	Mutual of America 2060 Retirement Fund	*	82,130
Y	Mutual of America Investment Corporation	Mutual of America 2065 Retirement Fund	*	6,883
Y	Mutual of America Investment Corporation	Mutual of America Retirement Income Fund	*	1,510
	Vanguard	Vanguard VIF Real Estate Index Portfolio	*	1,697
	PIMCO	PIMCO VIT Real Return Institutional Portfolio	*	18
	Victory Capital	Victory RS Small Cap Growth Equity VIP Series	*	17
Y	Mutual of America Investment Corporation	Mutual of America All America	*	18
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Equity Index Fund	*	216,109
	DWS	DWS Capital Growth	*	5,725
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Growth Fund	*	127,966
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Value	*	18
	American Century Investments	American Century VP Capital Appreciation	*	3,107
	Vanguard	Vanguard VIF Diversified Value Portfolio	*	173,830
	Vanguard	Vanguard VIF International Portfolio	*	256,385
	Vanguard	Vanguard VIF Total Bond Market Index Portfolio	*	97
	TOTAL INVESTMENT HELD, AT FAIR VALUE			6,897,722
Y	Mutual of America Investment Corporation	Interest Accumulation Account (contract value)	*	987,814
	TOTAL INVESTMENT HELD			\$7,885,536
Y	Participant Loans	Interest Rates of 3.25%		19,098

*Cost information is not required for participant-directed investments.

See independent auditor's report.

**SAFE-HARBOR 403(B) THRIFT
PLAN FOR EMPLOYEES OF
RURAL MEDICAL SERVICES, INC.**

FINANCIAL STATEMENTS

December 31, 2022

**SAFE-HARBOR 403(B) THRIFT PLAN FOR EMPLOYEES OF
RURAL MEDICAL SERVICES, INC.**

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Independent Auditor's Report

To the Administrative Committee of
Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

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

We have performed audits of the financial statements of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc., 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 statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 subjected to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 5 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 accompanying financial statements, 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 accompanying financial statements 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 (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of 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 Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgement made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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 Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.'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.

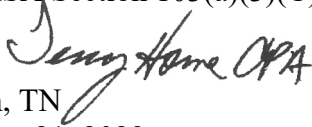
Other Matter-Supplemental Schedule Required by ERISA

The supplemental schedule of Schedule of Assets (Held at End of Year) is presented for purpose of additional analysis and is not a required part of the financial statements, but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. 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, are 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 qualified institutions agrees to, or is derived from, in all materials respects, the information prepared and certified by institutions that management determined meet the requirements of ERISA Section 103(a)(3)(C).


Lebanon, TN
November 21, 2023

**SAFE-HARBOR 403(b) THRIFT PLAN FOR EMPLOYEES
OF RURAL MEDICAL SERVICES, INC.
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2022 and 2021**

	December 31,	
	2022	2021
Assets		
Investments, at fair value	\$ 6,897,722	\$ 8,298,405
Investments, at contract value	987,814	607,304
Receivables		
Employer contribution	25,799	11,010
Employee contribution	9,363	10,393
Notes receivable from participants	19,098	40,388
Total receivables	54,260	61,791
Total Assets	\$ 7,939,796	\$ 8,967,500
Liabilities	\$ 0	\$ 0
Total Liabilities	0	0
Net assets available for benefits	\$ 7,939,796	\$ 8,967,500

**SAFE-HARBOR 403(b) THRIFT PLAN FOR EMPLOYEES
OF RURAL MEDICAL SERVICES, INC.
STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR PLAN BENEFITS
For the Year Ended December 31, 2022**

Additions (Reductions)

Additions (Reductions) to net assets attributed to:

Investment income (loss):

Net appreciation (depreciation) in fair value of investments	\$ (1,382,965)
Interest	2,357
Total investment income (loss)	<u>(1,380,608)</u>

Contributions:

Employer	304,312
Participants	300,937
Rollover	39,670
Total contributions	<u>644,919</u>

Total additions (reductions)	<u>(735,689)</u>
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Deductions

Deductions from net assets attributed to:

Benefits paid to participants	291,392
Administrative expense	623

Total deductions	<u>292,015</u>
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Net increase (decrease) in net assets available for benefits	(1,027,704)
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Net assets available for benefits

Beginning of year	<u>8,967,500</u>
End of year	<u><u>\$ 7,939,796</u></u>

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 1 - Description of Plan

The following description of Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc. ("Plan") sponsored by Rural Medical Services, Inc. ("Company") 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, established by Rural Medical Services, Inc. ("Company") effective October 1, 1994 for the benefit of its employees. It is subject to the provisions of the *Employee Retirement Income Security Act of 1974* (ERISA).

The Plan was amended effective November 1, 2018 to change the plan name from "Rural Medical Services Employer Sponsored 403(b) Plan" to "403(b) Thrift Plan of Rural Medical Services, Inc." The amendment was also made to adopt an automatic contribution agreement whereby all individuals who became employed on or after November 1, 2018 have been deemed to have directed the Company to make salary reduction contributions of 1% of compensation on his/her behalf after thirty days of employment. Subsequent to November 1, 2018, participant loans are permitted by the Plan.

The plan was amended effective January 1, 2022 to change the plan name from "403(b) Thrift Plan of Rural Medical Services, Inc." to "Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc." The amendment was also adopted to provide a safe-harbor provision, replaced the thirty-day employer contribution requirement with the first day of the month following hire date, and updated the definition of Plan Compensation to include all wages.

Contributions

Participants may contribute to the Plan via pre-tax or Roth salary deferrals and may change their contribution percentage at their discretion. The maximum annual contribution allowed in a calendar year for each participant is prescribed by federal statutes (\$20,500 in 2022 and \$19,500 in 2021). Additional catch-up contributions are permitted for participants who are age 50 or older by the end of the calendar year in which the catch-up contributions are made.

The Company makes an "employer base contribution" for eligible employees, as defined by the plan document. The Company contributes a safe-harbor fixed percentage equal to 5% of the employee's compensation, as defined in the Plan agreement.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Participant Account

Each participant's account is credited with the participant's contribution, the Company's contributions, and investment earnings. Each participant's account is charged with an allocable portion of the administrative expenses paid by the Plan. Allocations of contributions are based on participant compensation, and allocations of earnings are based on each participant's account balance. Upon retirement or termination, a participant is entitled to the balance in his/her account. A participant may elect to direct the investment allocation of his/her account or to allow an investment manager to direct the investments.

Vesting

Participants are immediately vested in all contributions plus actual earnings thereon. Accordingly, there were no forfeitures during the plan year ended December 31, 2022, and no forfeitures were utilized or outstanding.

Administrative Expenses

Certain expenses incurred in the administration of the Plan are paid directly by the Company.

Investment options

Investments are participant-directed among various mutual funds offered by the Plan.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive an amount equal to the value of the participant's interest in his or her account in either a lump-sum amount or under a specified payments option which provides for a series of monthly withdrawals from the participant's account. Other withdrawals from participants' accounts balances may be made under certain circumstances, as defined in the Plan document.

Contributions receivable

Contributions receivable are recorded when determined contributions of the employer and employees are not received by the investment custodian until a subsequent reporting period. An allowance is provided when necessary to recognize potentially uncollectible receivables and amounts deemed worthless are written off. There were contributions receivable of \$35,162 and \$21,403 at December 31, 2022 and 2021, respectively. There was no allowance for uncollectible receivables deemed necessary at these reporting dates.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser value of \$50,000 or 50% of their account balance. The loans are to be secured only by the balance in the participant's account, and each participant is limited to two loans outstanding at one time. The term of the loan must not exceed five years, and it will bear interest at a rate determined by the custodian. Principal and interest on these loans are paid ratably through payroll deductions. At December 31, 2022 and 2021, the Plan had loans receivable from participants of \$19,098 and \$40,388, respectively.

Note 2 – Summary of Significant Accounting Policies

Basis of accounting

The accompanying financial statements have been prepared in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") using the accrual method of accounting. U.S. GAAP is embodied in the Financial Accounting Standards Board *Accounting Standards Codification* ("FASB ASC"), which is the authoritative source of U.S. accounting and reporting standards for nongovernmental entities.

Use of estimates

The preparation of financial statements in conformity 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 and changes in net assets and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates, and such differences could be material. Significant estimates used in preparing these financial statements include those used to establish the fair values of investments.

Valuation of investments

The investments in the funds are presented at fair value. Shares of registered investment companies are valued based on quoted market prices, which represent the net asset value of shares held by the Plan at year-end.

The Plan provides fixed income accounts as investment options available to Plan participants. These investments are fixed income options (i.e., a deposit administration contract) that provide a more stable asset value with a guaranteed rate of return. These investments are valued at contract value.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

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. Unrealized gains and losses are recorded for changes in the fair value of mutual fund investments during the year. Realized gains and losses are recorded when investments are sold. Realized and unrealized gains and losses for each reporting period are combined and presented as net appreciation (depreciation) in fair value of investments in the accompanying statement of changes in net assets available for benefits.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance.

Note 3 – Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participant accounts would continue to be held by the Plan's trustee until all vested benefits are distributed to the participants.

Note 4- Benefits payable to former participants

The portion of net assets which had been processed for payment to persons who requested withdrawals but had not yet been paid by the Plan was \$0 at both December 31, 2022 and 2021.

Note 5 – Description of Information Certified by the Plan Trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

The following was provided and certified by Mutual of America Life Insurance Company, the Plan's trustee/custodian:

	<u>2022</u>	<u>2021</u>
Investments, at fair value	\$ 6,897,722	\$ 8,298,405
Investments, at contract value	987,814	607,304
Notes receivable from participants	19,098	40,388
Investment income (loss)	\$(1,380,608)	

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 6 – Investment in Insurance Company General Account

The Plan has included the “Mutual of America Interest Accumulation” account (Interest Accumulation account) as an investment option available to Plan participants. This investment represents a fixed income option (i.e., a deposit administration contract) that typically provides a more stable valuation, combined with a guaranteed rate of return. Investments are held in the general obligation account of Mutual of America, which provides the cash flow for all of the insurance company’s general obligations and contractual commitments.

Amounts placed in the Interest Accumulation account are credited with interest at a rate determined by Mutual of America, and Mutual of America reserves the right to change the interest rates applicable to amounts held in the Interest Accumulation account at its discretion.

It is possible that certain types of events could permit the insurance company to terminate the contract and limit the Plan’s ability to process transactions at contract value, including an amendment to the Plan document to terminate the Plan. The Plan administrator does not believe these events are probable of occurring.

The fixed income contract meets the criteria to be considered a fully benefit-responsive investment contract. Accordingly, the amount participants would receive upon withdrawal is limited to contract value. This measurement is utilized for reporting the investment in the accompanying statements of net assets available for benefits. The Plan administrator does not consider an allowance for potential loss of contract value necessary at December 31, 2022 or 2021.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

Note 7 – Fair Value Measurements

The Plan adopted the Fair Value Measurement and Disclosure topic of the FASB ASC, which establishes a framework for measuring 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 below:

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

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets 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 the observable market data by correlation or other means.

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

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

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

The investments in the registered investment companies are based on quoted market prices. There have been no changes in the methodologies used during the years ended December 31, 2022 and 2021.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

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

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

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
December 31, 2022				
Pooled				
Separate Accounts	\$ 6,897,722	\$ 0	\$ 0	\$ 6,897,722
Total	\$ 6,897,722	\$ 0	\$ 0	\$ 6,897,722
December 31, 2021				
Pooled				
Separate Accounts	\$ 8,298,405	\$ 0	\$ 0	\$ 8,298,405
Total	\$ 8,298,405	\$ 0	\$ 0	\$ 8,298,405

Note 8 – Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of differences between the financial statements at December 31, 2022 and 2021 to Schedule H of Form 5500:

	<u>2022</u>	<u>2021</u>
Net assets available for benefits per the financial statements	\$ 7,939,796	\$ 8,967,500
Net assets available for benefits per Schedule H of Form 5500	\$ 7,939,796	\$ 8,967,500

Note 9 – Income Tax Status

The Plan is a prototype plan that qualifies for tax-exempt status; however it has not received a favorable determination letter issued by the Internal Revenue Service. The plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the plan has been amended since inception, the plan administrator and the plan's tax counsel believe that the plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the plan is qualified and the related trust is tax-exempt.

Safe-Harbor 403(b) Thrift Plan for Employees of Rural Medical Services, Inc.

Notes to Financial Statements

December 31, 2022

The Plan adheres to guidance issued by the Codification with respect to accounting for uncertainty in income taxes. This guidance clarifies the accounting for uncertainty in income taxes recognized in an enterprise's financial statements and prescribes a comprehensive model for recognizing, measuring, presenting, and disclosing in the financial statements tax positions taken or expected to be taken on a tax return including positions that the organization is exempt from income taxes or not subject to income taxes or unrelated business income. With few exceptions, the Plan is no longer subject to income tax examinations by federal, state, or local tax authorities for years prior to the current and two most recent tax years.

Note 10 – Related Party Transactions

Certain plan investments are shares of mutual funds and annuities managed by Mutual of America Financial Group, who is the trustee/custodian as defined by the Plan. These transactions qualify as exempt party-in-interest transactions.

Note 11 – 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 12 – Corrective Employer Base Contributions

The Plan administrator determined that, during the year ended December 31, 2021, certain compensation was inappropriately included while other eligible compensation was excluded from the calculation of employee salary reduction contributions. The Plan administrator finalized the calculation of the correction in November 2023 and made a corrective contribution of \$3,738. This correction does not include a provision for lost earnings.

The Plan administrator also determined that, during the year ended December 31, 2022, certain compensation was inappropriately excluded from the calculation of employee salary reduction contributions. The Plan administrator finalized the calculation of the correction in November 2023 and made a corrective contribution of \$11,319. This correction does not include a provision for lost earnings.

Accordingly, receivables for the corrective contributions have been included in the accompanying financial statements.

**Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.**

Notes to Financial Statements

December 31, 2022

Note 13 – Subsequent Events

In addition to ongoing supply chain issues as a result of the COVID-19 pandemic, certain geopolitical risks abroad are causing inflationary pressures and energy price increases. Together these risks may cause significant market volatility, which may affect the Plan's investments. No adjustments have been made to these financial statements as a result of these uncertainties.

The Plan has evaluated subsequent events through November 21, 2023, the date the financial statements were available to be issued, for potential recognition or disclosure in the financial statements. Management has not identified any additional items requiring recognition or disclosure.

SUPPLEMENTAL SCHEDULE

Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.
Plan EIN:62-1102683
Plan Number: 001
December 31, 2022

Schedule H, Line 4i- Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
Party in Interest	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Y	Mutual of America Investment Corporation	Mutual of America Aggressive Allocation	*	\$ 831
Y	Mutual of America Investment Corporation	Mutual of America Conservative Allocation	*	111,961
Y	Mutual of America Investment Corporation	Mutual of America Moderate Allocation	*	10,128
Y	Mutual of America Investment Corporation	Mutual of America Bond	*	18
	T. Rowe Price	T. Rowe Price Blue Chip Growth Portfolio	*	7,119
Y	Mutual of America Investment Corporation	Mutual of America Composite Fund	*	38,508
	Calvert	Calvert VP SRI Balanced Portfolio	*	91
	Delaware Funds by Macquarie	Delaware VIP Small Cap Value Series	*	18
Y	Mutual of America Investment Corporation	Mutual of America Equity Index Fund	*	524,258
	Fidelity Investments	Fidelity VIP Mid Cap Portfolio	*	2,448
	Fidelity Investments	Fidelity VIP Asset Manager	*	18
	Fidelity Investments	Fidelity VIP Contrafund Portfolio	*	202,659
	Fidelity Investments	Fidelity VIP Equity-Income Portfolio	*	14,183
	Goldman Sachs	Goldman Sachs VIT US Equity Insights Fund	*	605
	Goldman Sachs	Goldman Sachs VIT Small Cap Equity Insights Fund	*	20
	American Funds	American Funds IS New World Fund	*	20,505
Y	Mutual of America Investment Corporation	Mutual of America Money Market Fund	*	18
Y	Mutual of America Investment Corporation	Mutual of America Mid-Term Bond Fund	*	789
Y	Mutual of America Investment Corporation	Mutual of America Mid-Cap Equity Index	*	257,160
	Massachusetts Financial Services	MFS VIT III Mid Cap Value Portfolio	*	19
Y	Mutual of America Investment Corporation	Mutual of America Mid-Cap Value	*	18
	Neuberger Berman	Neuberger Berman AMT Sustainable Equity Portfolio	*	91
Y	Mutual of America Investment Corporation	Mutual of America International	*	97
	Invesco Oppenheimer	Invesco Oppenheimer VA Main Street	*	1,276
Y	Mutual of America Investment Corporation	Mutual of America 2015 Retirement Fund	*	18
Y	Mutual of America Investment Corporation	Mutual of America 2020 Retirement Fund	*	73,397
Y	Mutual of America Investment Corporation	Mutual of America 2025 Retirement Fund	*	213,807
Y	Mutual of America Investment Corporation	Mutual of America 2030 Retirement Fund	*	333,755
Y	Mutual of America Investment Corporation	Mutual of America 2035 Retirement Fund	*	1,912,399

*Cost information is not required for participant-directed investments.

See independent auditor's report.

Safe-Harbor 403(b) Thrift Plan for Employees of
Rural Medical Services, Inc.
Plan EIN:62-1102683
Plan Number: 001
December 31, 2022

Schedule H, Line 4i- Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
Party in Interest	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Y	Mutual of America Investment Corporation	Mutual of America 2040 Retirement Fund	*	862,937
Y	Mutual of America Investment Corporation	Mutual of America 2045 Retirement Fund	*	611,896
Y	Mutual of America Investment Corporation	Mutual of America 2050 Retirement Fund	*	664,782
Y	Mutual of America Investment Corporation	Mutual of America 2055 Retirement Fund	*	156,383
Y	Mutual of America Investment Corporation	Mutual of America 2060 Retirement Fund	*	82,130
Y	Mutual of America Investment Corporation	Mutual of America 2065 Retirement Fund	*	6,883
Y	Mutual of America Investment Corporation	Mutual of America Retirement Income Fund	*	1,510
	Vanguard	Vanguard VIF Real Estate Index Portfolio	*	1,697
	PIMCO	PIMCO VIT Real Return Institutional Portfolio	*	18
	Victory Capital	Victory RS Small Cap Growth Equity VIP Series	*	17
Y	Mutual of America Investment Corporation	Mutual of America All America	*	18
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Equity Index Fund	*	216,109
	DWS	DWS Capital Growth	*	5,725
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Growth Fund	*	127,966
Y	Mutual of America Investment Corporation	Mutual of America Small Cap Value	*	18
	American Century Investments	American Century VP Capital Appreciation	*	3,107
	Vanguard	Vanguard VIF Diversified Value Portfolio	*	173,830
	Vanguard	Vanguard VIF International Portfolio	*	256,385
	Vanguard	Vanguard VIF Total Bond Market Index Portfolio	*	97
	TOTAL INVESTMENT HELD, AT FAIR VALUE			6,897,722
Y	Mutual of America Investment Corporation	Interest Accumulation Account (contract value)	*	987,814
	TOTAL INVESTMENT HELD			\$7,885,536
Y	Participant Loans	Interest Rates of 3.25%		19,098

*Cost information is not required for participant-directed investments.

See independent auditor's report.