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

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [X] 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:
- [X] 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
UNITED MEDICAL DOCTORS 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1989

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)
UNITED MEDICAL DOCTORS

28078 BAXTER RD. SUITE 530
MURRIETA, CA 92563

2b Employer Identification Number (EIN) 20-0358722

2c Plan Sponsor's telephone number 951-566-5229

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.	05/15/2024	DR. JOHN HONG
	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 [X] 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 TEMECULA VALLEY DIGESTIVE DISEASE CONSULANTS

c Plan Name TEMECULA VALLEY DIGESTIVE DISEASE CONSULANTS, PROFIT SHARING

4b EIN 20-0358722

4d PN 001

5 Total number of participants at the beginning of the plan year	**5**	128
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	87
a(2) Total number of active participants at the end of the plan year	**6a(2)**	78
b Retired or separated participants receiving benefits	**6b**	10
c Other retired or separated participants entitled to future benefits	**6c**	48
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	136
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	136
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	136
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	16
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:

2A 2E 2F 2H 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] 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)** [X] 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)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **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 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2021** **This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan	**B** Three-digit plan number (PN) ▶
UNITED MEDICAL DOCTORS 401(K) PLAN	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
UNITED MEDICAL DOCTORS	20-0358722

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

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

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

SAN DIEGO PENSION CONSULTANTS

9665 CHESAPEAKE DRIVE
SUITE 201
SAN DIEGO, CA 92123

33-0461574

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 15 37 64	CONTRACT ADMINISTRATOR	14180	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MORGAN STANLEY

5796 ARMADA DRIVE
SUITE 200
CARLSBAD, CA 92008

20-8764829

(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?
16 17 26 27	BROKER DEALER FIRM	0	Yes [X] No [ ]	Yes [X] No [ ]	13407	Yes [ ] No [X]

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

CAPITAL GROUP/AMERICAN FUNDS

P.O. BOX 659530
SAN ANTONIO, TX 78265

95-6817943

(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?
64	RECORDKEEPER	1345	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [ ] No [X]

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
UNITED MEDICAL DOCTORS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
UNITED MEDICAL DOCTORS

D Employer Identification Number (EIN)
20-0358722

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)	274753	369154
(2) Participant contributions	1b(2)	9156	0
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	130457	197376
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	67196	82344
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	14517	10127
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	3414364	4227379
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(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	3910443	4886380
	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 through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	3910443	4886380

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)	369154	
	(B) Participants	2a(1)(B)	440207	
	(C) Others (including rollovers)	2a(1)(C)	15727	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		825088
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	745	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		754
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	165814	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		165814
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		404485
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1396141
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	406243	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		406243
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	300	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	13661	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		13961
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		420204
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		975937
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] 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) [X] 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: LAVINE, LOFGREN, MORRIS & ENGELBERG **(2)** EIN: 33-0690020

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:

		Yes	No	Amount
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.)	4a	X		207

			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?	**4e**		X	
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**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.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
UNITED MEDICAL DOCTORS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
UNITED MEDICAL DOCTORS

D Employer Identification Number (EIN)
20-0358722

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): _____ _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

UNITED MEDICAL DOCTORS 401(K) PLAN

INDEPENDENT AUDITORS' REPORT,
FINANCIAL STATEMENTS, AND
SUPPLEMENTAL SCHEDULES

December 31, 2021

UNITED MEDICAL DOCTORS 401(K) PLAN

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LAVINE, LOFGREN, MORRIS & ENGELBERG, LLP
CERTIFIED PUBLIC ACCOUNTANTS

4180 LA JOLLA VILLAGE DRIVE
SUITE 300
LA JOLLA
CALIFORNIA
92037

PHONE (858) 455-1200
FAX (858) 455-0898
WEB SITE www.llme.com

An Independent Member of
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INDEPENDENT AUDITORS' REPORT

To the Administrative Committee
United Medical Doctors 401(k) Plan
Murrieta, California

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements

We have performed an audit of the financial statements of United Medical Doctors 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) (an "ERISA 103(a)(3)(C) audit"). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (the "2021 Financial Statements").

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 Financial Statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

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

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2021 Financial Statements section:

- The amounts and disclosures in the accompanying 2021 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 2021 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 on the 2021 Financial Statements

We conducted our audit 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 2021 Financial Statements section of our report. We are required to be independent of United Medical Doctors 401(k) Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about United Medical Doctors 401(k) Plan's ability to continue as a going concern for one year after 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 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2021 Financial Statements 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 judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

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

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

Our audit 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 2021 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 Matters

2021 Supplemental Schedules Required by ERISA

The supplemental schedules (Schedule H, Part IV, Line 4(a) and Schedule H, Part IV, Line 4(i) as of or for the year ended December 31, 2021) are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented fairly, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules 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).

Report on Compiled 2020 Financial Statement

Plan management is responsible for the accompanying financial statement of United Medical Doctors 401(k) Plan, which comprises the statement of net assets available for benefits as of December 31, 2020 (the "2020 Financial Statement"). We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the 2020 Financial Statement nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by Plan management. Accordingly, we do not express an opinion, a conclusion, or provide any form of assurance on the 2020 Financial Statement of United Medical Doctors 401(k) Plan.



La Jolla, California
March 18, 2024

UNITED MEDICAL DOCTORS 401(K) PLAN

Statements of Net Assets Available for Benefits
As of December 31, 2021 and 2020 (Compiled)

	2021	2020 (Compiled)
ASSETS		
Investments, at fair value	$ 4,507,099	$ 3,612,017
Receivables:		
Employer contributions receivable	369,154	274,753
Participant contributions receivable	-	9,156
Notes receivable from participants	10,127	14,517
Total receivables	379,281	298,426
Total assets	4,886,380	3,910,443
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 4,886,380	$ 3,910,443

See accompanying notes to financial statements.

UNITED MEDICAL DOCTORS 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2021

Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	404,485
Dividend income		165,814
Interest income on interest-bearing cash		9
Net investment income		570,308
Contributions:		
Participant - current		440,207
Employer - safe harbor nonelective		287,570
Employer - profit-sharing		81,584
Participant - rollover		15,727
Total contributions		825,088
Interest income from participant notes receivable		745
Total additions		1,396,141
Deductions from net assets attributed to:		
Benefits paid to participants		406,243
Administrative expenses		13,961
Total deductions		420,204
Net increase in net assets available for benefits		975,937
Net assets available for benefits:		
Beginning of year (compiled)		3,910,443
End of year	$	4,886,380

See accompanying notes to financial statements.

NOTE 1. DESCRIPTION OF THE PLAN

General

United Medical Doctors 401(k) Plan (the "Plan") is sponsored by United Medical Doctors (the “Company”). The Plan, which became effective on January 1, 1989, is a defined contribution retirement plan covering all eligible employees of the Company to allow them to adopt a regular program of savings for retirement.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 as amended (“ERISA”), and the provisions of the Internal Revenue Code (the “IRC”). The following description of the Plan provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

Eligibility

Employees who are at least 21 years of age and have completed one year of service are generally eligible to participate in the Plan. Ineligible employees generally include:

- non-resident aliens who receive no earned income from the Company from sources within the United States;
- individuals who perform services for the Company but are not provided with fringe benefits, defined as coverage under the Company’s group health insurance policy, because the job classification is one for which fringe benefits are not provided;
- individuals whose compensation, conditions of employment, and retirement benefits are established by the terms of a collective bargaining agreement; and
- individuals who are not reported on payroll records as common law employees even if a court or administrative agency subsequently determines that such individuals are common law employees and not independent contractors.

An employee may enter the Plan on the January 1st or July 1st coincident with or next following the day the employee meets the Plan’s eligibility requirements.

Participant Contributions

Participants may elect to contribute from 1% to 100% of eligible compensation to the Plan, as defined by the Plan, and may designate their contributions as either pre-tax or Roth amounts. In addition, employees who are age 50 or older can elect to defer additional amounts (called “catch-up contributions”) to the Plan. Participant contributions are subject to limitations imposed by Internal Revenue Service (“IRS”) regulations. Employees may also contribute amounts representing rollover distributions from other qualified sources.

Employer Contributions

Safe Harbor Nonelective Contributions: The Company shall make employer safe harbor nonelective contributions on an annual basis equal to 3% of a participant’s annual compensation, as defined by the Plan. For the year ended December 31, 2021, the Company made an employer safe harbor nonelective contribution in the amount of $287,570. This amount, which was remitted to the Plan in October 2022, is included in employer contributions receivable as of December 31, 2021.

NOTE 1. DESCRIPTION OF THE PLAN (Continued)

Employer Contributions (Continued)

Nonelective (Profit-Sharing) Contributions: The Company may also make nonelective contributions each year on a discretionary basis, up to a maximum of 25% of the aggregate compensation of all participants eligible for such a contribution. To share in the allocation of any discretionary nonelective employer contributions, a participant must have completed at least 1,000 hours of service, as defined, during the Plan year, and be employed on the last day of the Plan year unless termination of service prior to the last date of the Plan year was due to (i) death, (ii) total and permanent disability, or (iii) termination of employment on or after their normal retirement age or early retirement date.

For the year ended December 31, 2021, the Company authorized a discretionary nonelective contribution to non-highly compensated employees equal to 1.425% of annual compensation, with the exception of the Plan trustee, for whom the Company authorized a discretionary profit-sharing contribution in a fixed amount that would allow the Plan trustee to reach the statutory annual limit for contributions. The nonelective employer contribution for the year ended December 31, 2021 in the amount of $81,584 was remitted to the Plan in October 2022, and is included in employer contributions receivable as of December 31, 2021.

Participant Accounts and Investment Options

Each participant's account is credited with the participant's contribution, any employer safe harbor nonelective contributions, and allocations of (i) any discretionary nonelective employer, (ii) Plan earnings or losses, and (iii) administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as applicable. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Upon enrollment in the Plan, a participant may direct participant and employer contributions in any of the Plan's investment options. Subsequently, participants may change their allocations and transfer account balances between investment options in accordance with Plan provisions.

Notes Receivable from Participants (Participant Loans)

Participants may borrow against their accounts a minimum of $1,000 up to a maximum generally equal to the lesser of $50,000 or 50% of their vested account balance. Participants may not have more than two loans outstanding at a time. Loan transactions are treated as transfers between the investment fund and the loan account balance using the same allocation method as contributions. Loan terms may not exceed 5 years unless the loan is to be used to acquire the principal residence of the participant in which case the limit is 10 years. Loans are secured by the participant's vested account balance and bear interest at the prime rate as published in the *Wall Street Journal* as of the date of the loan, plus 1.00%. The interest rates on outstanding loans at December 31, 2021 ranged from 5.75% to 6.00%. Principal and interest are paid regularly through payroll deductions.

During 2020, the Plan operationally implemented provisions of the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act") to provide relief to certain participants from the financial effects of the COVID-19 pandemic. Participants requesting relief under the CARES Act were permitted (i) an increased loan limit to the lesser of $100,000 or 100% of the nonforfeitable account balance (available through September 22, 2020), and (ii) a delay in loan repayments due through December 31, 2020 for up to one year. In July 2022, the Plan was formally amended to implement these provisions.

NOTE 1. DESCRIPTION OF THE PLAN (Continued)

Vesting

Participants are immediately vested in their contributions and employer safe harbor nonelective contributions, plus actual earnings thereon. Vesting in discretionary nonelective employer contributions is based on years of credited service, as defined in the Plan, according to the following schedule:

Years of Service	Vested Percentage
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years or more	100%

In the event of termination due to death, total and permanent disability, or reaching early or normal retirement age, a participant shall become 100% vested in the discretionary nonelective employer contribution portion of his or her account.

Payment of Benefits

Participants are entitled to a distribution of their vested benefits in the event of death, disability, retirement, termination of employment, or termination of the Plan. For Plan purposes, normal retirement age is the later of attaining age 65 or completing five years of service.

Upon termination of employment, if the participant has neither elected to receive a cash distribution nor had the balance rolled over into an IRA of his/her choosing, the Plan may transfer a participant's vested account balance greater than $1,000 and less than $5,000 into an individual retirement account ("IRA") selected by the Company. Also at its discretion, the Plan may elect to distribute accounts with vested balances of less than $1,000. If a terminated participant's vested account exceeds $5,000, a participant may elect to receive distributions in a lump-sum, annuity, substantially equal installments, or may defer receipt of payments according to Plan provisions.

Pursuant to the Setting Every Community Up for Retirement Enhancement Act of 2019 (the "SECURE" Act), which became law on December 20, 2019, participants may defer taking distributions as follows:

- If a participant reached the age of 70½ in 2019, the participant may defer receiving distributions until the later of April 1, 2020, or the April following the calendar year in which the participant retires;
- If a participant reaches the age of 70½ in 2020 or later, the participant may defer receiving distributions until the later of the April following the calendar year in which the participant reaches age 72 or retires.

The Plan permits in-service distributions from employee elective contribution and employer safe harbor nonelective contribution accounts upon attaining age 59½, or upon permanent disability. Also, the Plan permits in-service distributions from the discretionary nonelective employer contribution portion of a participant's account once the participant reaches normal retirement age or age 64, provided the participant has at least 15 years of service. A participant is entitled to receive an in-service distribution from the employee rollover contribution portion of his or her account at any time.

NOTE 1. DESCRIPTION OF THE PLAN (Continued)

Payment of Benefits (Continued)

During 2020, the Plan operationally implemented the following provisions of the CARES Act related to distributions: (i) participants may withdraw up to $100,000 without a 10% early distribution penalty, (ii) such distributions can be repaid within three years of the date of distribution, and (iii) required minimum distributions were temporarily suspended for 2020. In July 2022, the Plan was formally amended to implement these provisions.

Forfeitures

If a participant terminates employment with the Company before becoming fully vested, the unvested portion of employer contributions and related earnings are forfeited following a distribution from the participant's account, or if earlier, at the end of five consecutive one-year breaks in service . Forfeitures of unvested employer contributions and related earnings are transferred from the terminated participant's account to a forfeiture account from which they may be used to pay administrative expenses and reduce employer contributions to the Plan. During 2021, $6,783 was added to the forfeiture account. As of December 31, 2021 and 2020 (compiled), the forfeitures account totaled $6,783 and $0, respectively.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Valuation of Investments and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when earned. Dividends are recorded on the ex-dividend date. Net realized and unrealized appreciation or depreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and distributions are charged directly to the accounts of the transacting participants and are included in administrative expenses. Investment-related expenses are included in net realized and unrealized appreciation or depreciation in the fair value of investments.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Notes Receivable from Participants (Participant Loans)

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2021 or 2020 (compiled). If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits

Benefit payments to participants are recorded when paid.

Recently Issued Accounting Standard

In August 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2018-13, *Fair Value Measurement (Topic 820) Disclosure Framework Changes to the Disclosure Requirements for Fair Value Measurement*. ASU 2018-13 improves and simplifies the disclosure requirements for fair value measurements. Plan management adopted ASU 2018-13 effective January 1, 2020; its adoption did not have a material impact on the Plan's financial statements.

Subsequent Events

Plan management has evaluated subsequent events through the date of the independent auditors' report, which is the date these financial statements were available to be issued (Note 12).

NOTE 3. INFORMATION CERTIFIED BY THE CUSTODIAN

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and the ERISA-required supplemental schedule (Schedule H, Part IV, Line 4i), including investments and notes receivable from participants held at December 31, 2021, and net realized and unrealized appreciation or depreciation in fair value of investments, dividends, interest income on notes receivable from participants for the year then ended, was obtained by management and agreed to or derived from information certified as complete and accurate by Capital Bank and Trust Company, a custodian of the Plan which is also a qualified custodian as defined by ERISA Section 103(a)(3)(C).

The following highlights the investment information certified by the Capital Bank and Trust Company as of and for the Plan year ended December 31, 2021:

Included in the Statement of Net Assets as of December 31, 2021:	
Interest-bearing cash	$ 33,233
Mutual funds	$ 3,007,256
Notes receivable from participants	$ 10,127
Included in the Statement of Changes in Net Assets for the Year Ended December 31, 2021:	
Net realized and unrealized appreciation in fair value of investments	$ 244,103
Dividend income	$ 150,680
Interest income from participant notes receivable	$ 745

NOTE 4. FAIR VALUE MEASUREMENTS

FASB Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are as follows:

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

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical or similar assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, and inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement for the asset or liability at the measurement date. These inputs reflect Plan management's best estimate of what market participants would use in pricing the asset or liability at the measurement date. Consideration is given to the risk inherent in the valuation technique and in the inputs to the model.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The following is a description of the valuation methodologies used for assets measured at fair value at December 31, 2021 and 2020 (compiled). There have been no changes in the methodologies used at December 31, 2021 and 2020 (compiled).

Interest-Bearing Cash (Includes Bank Deposits and Money Market Accounts): Interest-bearing cash consists primarily of amounts deposited in savings accounts as well as money market accounts. The carrying amounts of bank deposits approximate fair value due to the short-term nature of these investments. Money market accounts are required to publish their net asset value on a daily basis and to transact at that price. Such accounts held by the Plan are deemed to be actively traded.

Common Stock: Valued at the closing prices reported on the active market on which the individual securities are traded.

Registered Investment Companies (Includes Mutual Funds and Exchange-Traded Funds): Valued at the daily closing price as reported by the fund. Such funds held by the Plan are open-end funds that are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The funds held by the Plan are deemed to be actively traded.

The preceding 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 Plan management 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.

NOTE 4. FAIR VALUE MEASUREMENTS (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and December 31, 2020 (compiled):

	December 31, 2021			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash	$ 197,376	$ -	$ -	$ 197,376
Mutual funds	4,212,322	-	-	4,212,322
Exchange-traded funds	15,057	-	-	15,057
Common stock	82,344	-	-	82,344
Total investments at fair value	$ 4,507,099	$ -	$ -	$ 4,507,099

	December 31, 2020 (Compiled)			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash	$ 130,457	$ -	$ -	$ 130,457
Mutual funds	3,389,237	-	-	3,389,237
Exchange-traded funds	25,127	-	-	25,127
Common stock	67,196	-	-	67,196
Total investments at fair value	$ 3,612,017	$ -	$ -	$ 3,612,017

NOTE 5. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain of the Plan's operating expenses are paid by the Company and the Company provides administrative services for the Plan at no cost to the Plan. Certain investments are managed by an affiliate of Capital Bank & Trust, a custodian of the Plan. In addition, the Plan allows participants to take loans against their account balances. These transactions are considered exempt party-in-interest transactions.

NOTE 6. TAX STATUS

The Company has adopted a non-standardized pre-approved profit-sharing plan and relies upon the pre-approved plan's opinion letter from the IRS, which states that the plan is designed in accordance with applicable sections of the IRC. The Company has not applied for a determination letter from the IRS specific to the Plan. The Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the accompanying financial statements.

The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2021, there are no uncertain tax positions taken or expected to be taken that would require disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no tax audits in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2018.

NOTE 7. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risk. 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 accompanying financial statements.

NOTE 8. 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 such event, all participants would become fully vested in their account balances.

NOTE 9. CARES ACT

In response to the effects of the coronavirus on the economy, in March 2020, Congress passed the CARES Act. The CARES Act provides temporary relief for retirement plan sponsors and participants with respect to employer contributions, distributions, and participant loans. The provisions of the CARES Act may be implemented operationally prior to formally amending the Plan document. The Plan has implemented certain relief provisions included in the CARES Act as disclosed in the preceding notes to the financial statements. Plan management formally amended the Plan in July 2022.

NOTE 10. LACK OF REQUIRED FIDELITY BOND

The Plan did not obtain fidelity bond coverage during the year ended December 31, 2021. ERISA requires that plans maintain a fidelity bond with coverage equal to at least 10% of the Plan assets as of the beginning of the plan year, in an amount not less than $1,000 and need not exceed $500,000. The Plan administrator does not believe the Plan has incurred any fidelity bond losses during 2021 . Effective February 8, 2023, the Plan obtained a fidelity bond that Plan management believes meets ERISA requirements.

NOTE 11. DELINQUENT PARTICIPANT CONTRIBUTIONS

The Company identified one instance in 2021 where amounts withheld from employees were not forwarded to the custodian within the reasonableness timeframe established by the Department of Labor. The Company is in the process of calculating the lost earnings, as well as related interest thereon, and intends to remit such amounts to the Plan, as soon as administratively possible.

Based on such actions, Plan management and the Company believe the delinquent remittance will not cause the Plan to be disqualified by the IRS and that the self-corrective actions will allow the Plan to be in compliance with the Plan documents and ERISA. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

NOTE 12. SUBSEQUENT EVENT

On December 29, 2022, the SECURE 2.0 Act of 2022 (the "SECURE Act 2.0") became law. The purpose of the legislation is to expand access to retirement plans and to help working Americans increase their retirement savings. The SECURE Act 2.0 includes various required and optional provisions that will become effective between 2023 and 2033, certain of which are described below.

- Beginning in 2023, the age for required minimum distributions will increase from age 72 to 73. Beginning in 2033, the age for required minimum distributions will increase from age 73 to 75.
- Beginning in 2026, catch-up contributions will be made on a Roth basis, unless the participant earns $145,000 or less.
- Beginning January 1, 2025, a participant from the ages 60 to 63 can elect catch-up contributions up to the limit of the greater of $10,000 or 150% of the catch-up contribution limit imposed by the IRS.
- Starting January 1, 2025, long-term part-time workers (defined as employees who have worked for two consecutive 12 month periods during each of which they have at least 500 hours of service) will become eligible to enroll in their employer's retirement plan after two years.

Additionally, Plan management has not yet determined which of the optional provisions, if any, the Plan will implement. Plan management expects to formally amend the Plan by December 31, 2025.

SUPPLEMENTAL SCHEDULES

UNITED MEDICAL DOCTORS 401(K) PLAN

Form 5500 Attachment – Schedule H, Part IV, Line 4a –
Schedule of Delinquent Participant Contributions **EIN: 20-0358722**
For the Year Ended December 31, 2021 **Plan Number: 001**

Participant Contributions Transferred Late to the Plan			Total That Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program and Prohibited Transaction Exemption 2002-51
Check Here if Late Participant Loan Repayments Are Included ☑	Date Withheld	Date Remitted	Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	
$ 207	12/30/2021	11/19/2022	$ 207	$ -	$ -	$ -
$ 207			$ 207 *	$ -	$ -	$ -

* The Company has not yet remitted the lost earnings.

See accompanying independent auditors' report.

UNITED MEDICAL DOCTORS 401(K) PLAN

Form 5500 Attachment – Schedule H, Part IV, Line 4i – Schedule of Assets Held for Investment Purposes at End of Year **EIN: 20-0358722**
As of December 31, 2021 **Plan Number: 001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
*	American Funds 2045 Target Date R3	Mutual fund	-	$ 562,187
*	American Funds 2040 Target Date R3	Mutual fund	-	408,850
*	American Funds 2050 Target Date R3	Mutual fund	-	353,498
*	Amcap Fund R3	Mutual fund	-	317,040
*	Washington Mutual Investors Fund R3	Mutual fund	-	272,204
*	American Funds 2030 Target Date R3	Mutual fund	-	239,635
*	The Investment Company of America R3	Mutual fund	-	205,274
*	Smallcap World Fund R3	Mutual fund	-	159,977
	Oakmark Fund Institutional	Mutual fund	-	137,199
*	Morgan Stanley Private Bank NA	Interest-bearing cash	-	126,591
*	American Fundamental Inv F2	Mutual fund	-	124,864
*	Europacific Growth Fund R3	Mutual fund	-	79,194
	Fidelity Adv New Insights I	Mutual fund	-	74,598
*	American Funds 2015 Target Date R3	Mutual fund	-	71,948
*	American Funds 2010 Target Date R3	Mutual fund	-	63,592
	Thornburg Developing World I	Mutual fund	-	63,078
*	American Funds 2035 Target Date R3	Mutual fund	-	62,977
	First Eagle Overseas I	Mutual fund	-	62,656
	BNY Mellon Intl Stk I	Mutual fund	-	62,649
	Invesco Developing Mkts Y	Mutual fund	-	62,646
	Thornburg Intl Growth I	Mutual fund	-	62,635
	Clearbridge Intl Growth	Mutual fund	-	62,606
	Causeway Value Instl	Mutual fund	-	62,357
	Clearbridge Large Cap Gwth I	Mutual fund	-	62,195
*	American Funds 2055 Target Date R3	Mutual fund	-	55,680
*	American Funds 2025 Target Date R3	Mutual fund	-	49,271
	Allspring Special Mdcp Vl I	Mutual fund	-	37,641
	Congress Mid Cap Growth Instl	Mutual fund	-	37,509
	E V Income Fund Of Boston I	Mutual fund	-	36,787
	Pimco Short Term I2	Mutual fund	-	34,775
	Pgim Total Return Bond Z	Mutual fund	-	34,755
*	AF U.S. Government Money Market R3	Money Market fund	-	33,232
*	New World Fund R3	Mutual fund	-	32,701
*	American Funds 2060 Target Date R3	Mutual fund	-	30,400
*	Morgan Stanley Bank N.A.	Interest-bearing cash	-	28,951
	Metropolitan West Tot Ret Bd I	Mutual fund	-	25,141
	Diamond Hill Long-Short I	Mutual fund	-	23,631
	MFS Glb Alternative Strat I	Mutual fund	-	18,338
*	American Funds 2020 Target Date R3	Mutual fund	-	14,167
	Oakmark Fund Institutional	Mutual fund	-	13,306

See accompanying independent auditors' report.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	Invesco Ftse Rafi Us 1500	Exchange-traded fund	-	$ 12,653
	Royce Premier Inv	Mutual fund	-	12,537
	T Rowe Price Qm Us Sm Cp Gr Eq	Mutual fund	-	12,507
*	The Bond Fund of America R3	Mutual fund	-	10,304
	Causeway Intl Value Instl	Mutual fund	-	9,590
	First Eagle Overseas I	Mutual fund	-	9,454
	BNY Mellon Intl Stk I	Mutual fund	-	9,431
	Clearbridge Large Cap Gwth I	Mutual fund	-	9,245
	Fidelity Adv New Insights I	Mutual fund	-	9,180
*	Morgan Stanley Bank N.A.	Interest-bearing cash	-	8,602
	Congress Mid Cap Growth Instl	Mutual fund	-	7,469
	Thornburg Developing World I	Mutual fund	-	7,425
	Thornburg Intl Growth I	Mutual fund	-	7,288
	Invesco Developing Mkts Y	Mutual fund	-	5,294
*	Inflation Linked Bond Fund R3	Mutual fund	-	4,735
*	U.S. Government Securities Fund R3	Mutual fund	-	4,566
*	Intermediate Bond Fund of America R3	Mutual fund	-	4,553
*	Capital World Bond Fund R3	Mutual fund	-	4,504
*	American New World F2	Mutual fund	-	3,701
	Matthews Japan Instl	Mutual fund	-	1,704
	Wisdomtree Japan Sm Cap Div	Exchange-traded fund	-	1,427
	O'Reilly Automotive Inc New	Common stock	-	1,412
	Jabil Circuit Inc	Common stock	-	1,407
	Knight Swift Transn Hldgs Cl A	Common stock	-	1,402
	Lumentum Hldgs Inc Com	Common stock	-	1,375
	Arch Capital Group Ltd	Common stock	-	1,333
	Mainstreet Bancshares Inc	Common stock	-	1,328
	Triton Intl Ltd Cl A	Common stock	-	1,325
	Standard Motor Products Inc	Common stock	-	1,310
	Sprouts Farmers Market	Common stock	-	1,306
	CDK Global Inc Com	Common stock	-	1,294
	Encore Wire Corp	Common stock	-	1,288
	Unity Bancorp Inc	Common stock	-	1,286
	Turning Point Brands Inc	Common stock	-	1,284
	Southern Mo Bancorp	Common stock	-	1,252
	Metlife Incorporated	Common stock	-	1,250
	Flextronics Intl Ltd	Common stock	-	1,246
	Ulta Beauty Inc	Common stock	-	1,237
	Robert Half Int	Common stock	-	1,227
	Churchill Downs Inc	Common stock	-	1,205

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	SLM Corporation	Common stock	-	$ 1,200
	Prudential Financial Inc	Common stock	-	1,191
	Capital One Financial Corp	Common stock	-	1,161
	Hologic Inc	Common stock	-	1,148
	Goldman Sachs Grp Inc	Common stock	-	1,148
	Greenbrier Cos Inc	Common stock	-	1,147
	Hillenbrand Inc	Common stock	-	1,144
	Hp Inc Com	Common stock	-	1,130
	First Bancorp P.R. Com New	Common stock	-	1,130
	Voya Finl Inc	Common stock	-	1,127
	Allscripts Healthcare Solu Inc.	Common stock	-	1,125
	Byline Bankcorp Inc	Common stock	-	1,121
	Home Bancorp Inc Com	Common stock	-	1,121
	Assured Guaranty Ltd	Common stock	-	1,104
	Level One Bancorp Inc	Common stock	-	1,104
	Central Valley Comm Bancorp	Common stock	-	1,101
	Amer Financial Gp Inc Hldg Co	Common stock	-	1,099
	Ally Financial Inc	Common stock	-	1,095
	Qorvo Inc Com	Common stock	-	1,095
	Simmons 1st Natl A New	Common stock	-	1,094
	Athene Holding Ltd Class A	Common stock	-	1,083
	Textainer Group Holdings Ltd	Common stock	-	1,071
	Western New England Bancorp In	Common stock	-	1,069
	Greenhill & Co Inc	Common stock	-	1,058
	Cowen Inc Cl A	Common stock	-	1,047
	Oshkosh Corp	Common stock	-	1,014
	CNO Finl Group Inc	Common stock	-	1,001
	Popular Inc Com New	Common stock	-	984
	Invesco S&P 500 Equal Weight E	Exchange-traded fund	-	977
	D R Horton Inc	Common stock	-	976
	Pulte Group Inc	Common stock	-	972
	Tri Pointe Homes Inc	Common stock	-	948
	Marinemax Inc Com Fl	Common stock	-	945
	Tempur-Pedic Int'l Inc	Common stock	-	941
	Primoris Services Corp	Common stock	-	935
	M/I Homes Inc Com	Common stock	-	933
	Jefferies Fnl Group Inc	Common stock	-	931
	Worthington Industries	Common stock	-	929
	Tompkins Fncl Corp	Common stock	-	919
	Mohawk Industries Inc	Common stock	-	911

UNITED MEDICAL DOCTORS 401(K) PLAN

Form 5500 Attachment – Schedule H, Part IV, Line 4i – Schedule of Assets Held for Investment Purposes at End of Year **EIN: 20-0358722**
As of December 31, 2021 (Continued) **Plan Number: 001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	Owens Corning	Common stock	-	$ 905
	BNY Mellon Sm/Md Cap Gw I	Mutual fund	-	874
	Encore Cap Grp Inc	Common stock	-	870
	Toll Brothers	Common stock	-	869
	Flagstar Bancorp Inc	Common stock	-	815
	Atkore Inc	Common stock	-	778
	Meritor Inc Com	Common stock	-	768
	Bio Rad Lab A	Common stock	-	756
	US Cellular Cp	Common stock	-	755
	Nexstar Media Group Cl A	Common stock	-	755
	Penske Auto Gp Inc	Common stock	-	750
	Taylor Morrison Home Corp Cl A	Common stock	-	734
	Lennar Corporation	Common stock	-	697
	Nucor Corporation	Common stock	-	685
	Irobot	Common stock	-	659
	Crocs Inc	Common stock	-	641
	Silicon Lab Inc	Common stock	-	619
	La Z Boy Incorporated	Common stock	-	545
	PVH Corporation	Common stock	-	533
	Zumiez Inc	Common stock	-	528
	Foot Locker Inc	Common stock	-	524
	Genesco Inc	Common stock	-	513
	Kohls Corporation Wisc	Common stock	-	494
	Macy's Inc	Common stock	-	393
	Citi Trends Inc	Common stock	-	379
	Hibbett Inc	Common stock	-	360
				4,507,099
*	Participant Loans	Interest rates range from 5.75% to 6.00%; maturities vary	-0-	10,127
		Total		$ 4,517,226

* Represents a party-in-interest.
(1) Cost information is omitted for participant-directed investments.

See accompanying independent auditors' report.

Annual Examination and Report of an Independent Qualified Public Accountant (IQPA) under 29 CFR 2520.104-46.

The Annual Plan Audit has not yet been completed. The audit is ongoing and will be completed as soon as administratively feasible. An amended Form 5500 will be filed upon completion of the Plan Audit.

This preliminary filing has been submitted in good faith prior to the filing deadline to indicate that the Form 5500 was completed in full other than the inclusion of the Plan Audit.

UNITED MEDICAL DOCTORS 401(K) PLAN

Form 5500 Attachment – Schedule H, Part IV, Line 4i – Schedule of Assets Held for Investment Purposes at End of Year **EIN: 20-0358722**
As of December 31, 2021 **Plan Number: 001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
*	American Funds 2045 Target Date R3	Mutual fund	-	$ 562,187
*	American Funds 2040 Target Date R3	Mutual fund	-	408,850
*	American Funds 2050 Target Date R3	Mutual fund	-	353,498
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*	Washington Mutual Investors Fund R3	Mutual fund	-	272,204
*	American Funds 2030 Target Date R3	Mutual fund	-	239,635
*	The Investment Company of America R3	Mutual fund	-	205,274
*	Smallcap World Fund R3	Mutual fund	-	159,977
	Oakmark Fund Institutional	Mutual fund	-	137,199
*	Morgan Stanley Private Bank NA	Interest-bearing cash	-	126,591
*	American Fundamental Inv F2	Mutual fund	-	124,864
*	Europacific Growth Fund R3	Mutual fund	-	79,194
	Fidelity Adv New Insights I	Mutual fund	-	74,598
*	American Funds 2015 Target Date R3	Mutual fund	-	71,948
*	American Funds 2010 Target Date R3	Mutual fund	-	63,592
	Thornburg Developing World I	Mutual fund	-	63,078
*	American Funds 2035 Target Date R3	Mutual fund	-	62,977
	First Eagle Overseas I	Mutual fund	-	62,656
	BNY Mellon Intl Stk I	Mutual fund	-	62,649
	Invesco Developing Mkts Y	Mutual fund	-	62,646
	Thornburg Intl Growth I	Mutual fund	-	62,635
	Clearbridge Intl Growth	Mutual fund	-	62,606
	Causeway Value Instl	Mutual fund	-	62,357
	Clearbridge Large Cap Gwth I	Mutual fund	-	62,195
*	American Funds 2055 Target Date R3	Mutual fund	-	55,680
*	American Funds 2025 Target Date R3	Mutual fund	-	49,271
	Allspring Special Mdcp Vl I	Mutual fund	-	37,641
	Congress Mid Cap Growth Instl	Mutual fund	-	37,509
	E V Income Fund Of Boston I	Mutual fund	-	36,787
	Pimco Short Term I2	Mutual fund	-	34,775
	Pgim Total Return Bond Z	Mutual fund	-	34,755
*	AF U.S. Government Money Market R3	Money Market fund	-	33,232
*	New World Fund R3	Mutual fund	-	32,701
*	American Funds 2060 Target Date R3	Mutual fund	-	30,400
*	Morgan Stanley Bank N.A.	Interest-bearing cash	-	28,951
	Metropolitan West Tot Ret Bd I	Mutual fund	-	25,141
	Diamond Hill Long-Short I	Mutual fund	-	23,631
	MFS Glb Alternative Strat I	Mutual fund	-	18,338
*	American Funds 2020 Target Date R3	Mutual fund	-	14,167
	Oakmark Fund Institutional	Mutual fund	-	13,306

See accompanying independent auditors' report.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	Invesco Ftse Rafi Us 1500	Exchange-traded fund	-	$ 12,653
	Royce Premier Inv	Mutual fund	-	12,537
	T Rowe Price Qm Us Sm Cp Gr Eq	Mutual fund	-	12,507
*	The Bond Fund of America R3	Mutual fund	-	10,304
	Causeway Intl Value Instl	Mutual fund	-	9,590
	First Eagle Overseas I	Mutual fund	-	9,454
	BNY Mellon Intl Stk I	Mutual fund	-	9,431
	Clearbridge Large Cap Gwth I	Mutual fund	-	9,245
	Fidelity Adv New Insights I	Mutual fund	-	9,180
*	Morgan Stanley Bank N.A.	Interest-bearing cash	-	8,602
	Congress Mid Cap Growth Instl	Mutual fund	-	7,469
	Thornburg Developing World I	Mutual fund	-	7,425
	Thornburg Intl Growth I	Mutual fund	-	7,288
	Invesco Developing Mkts Y	Mutual fund	-	5,294
*	Inflation Linked Bond Fund R3	Mutual fund	-	4,735
*	U.S. Government Securities Fund R3	Mutual fund	-	4,566
*	Intermediate Bond Fund of America R3	Mutual fund	-	4,553
*	Capital World Bond Fund R3	Mutual fund	-	4,504
*	American New World F2	Mutual fund	-	3,701
	Matthews Japan Instl	Mutual fund	-	1,704
	Wisdomtree Japan Sm Cap Div	Exchange-traded fund	-	1,427
	O'Reilly Automotive Inc New	Common stock	-	1,412
	Jabil Circuit Inc	Common stock	-	1,407
	Knight Swift Transn Hldgs Cl A	Common stock	-	1,402
	Lumentum Hldgs Inc Com	Common stock	-	1,375
	Arch Capital Group Ltd	Common stock	-	1,333
	Mainstreet Bancshares Inc	Common stock	-	1,328
	Triton Intl Ltd Cl A	Common stock	-	1,325
	Standard Motor Products Inc	Common stock	-	1,310
	Sprouts Farmers Market	Common stock	-	1,306
	CDK Global Inc Com	Common stock	-	1,294
	Encore Wire Corp	Common stock	-	1,288
	Unity Bancorp Inc	Common stock	-	1,286
	Turning Point Brands Inc	Common stock	-	1,284
	Southern Mo Bancorp	Common stock	-	1,252
	Metlife Incorporated	Common stock	-	1,250
	Flextronics Intl Ltd	Common stock	-	1,246
	Ulta Beauty Inc	Common stock	-	1,237
	Robert Half Int	Common stock	-	1,227
	Churchill Downs Inc	Common stock	-	1,205

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	SLM Corporation	Common stock	-	$ 1,200
	Prudential Financial Inc	Common stock	-	1,191
	Capital One Financial Corp	Common stock	-	1,161
	Hologic Inc	Common stock	-	1,148
	Goldman Sachs Grp Inc	Common stock	-	1,148
	Greenbrier Cos Inc	Common stock	-	1,147
	Hillenbrand Inc	Common stock	-	1,144
	Hp Inc Com	Common stock	-	1,130
	First Bancorp P.R. Com New	Common stock	-	1,130
	Voya Finl Inc	Common stock	-	1,127
	Allscripts Healthcare Solu Inc.	Common stock	-	1,125
	Byline Bankcorp Inc	Common stock	-	1,121
	Home Bancorp Inc Com	Common stock	-	1,121
	Assured Guaranty Ltd	Common stock	-	1,104
	Level One Bancorp Inc	Common stock	-	1,104
	Central Valley Comm Bancorp	Common stock	-	1,101
	Amer Financial Gp Inc Hldg Co	Common stock	-	1,099
	Ally Financial Inc	Common stock	-	1,095
	Qorvo Inc Com	Common stock	-	1,095
	Simmons 1st Natl A New	Common stock	-	1,094
	Athene Holding Ltd Class A	Common stock	-	1,083
	Textainer Group Holdings Ltd	Common stock	-	1,071
	Western New England Bancorp In	Common stock	-	1,069
	Greenhill & Co Inc	Common stock	-	1,058
	Cowen Inc Cl A	Common stock	-	1,047
	Oshkosh Corp	Common stock	-	1,014
	CNO Finl Group Inc	Common stock	-	1,001
	Popular Inc Com New	Common stock	-	984
	Invesco S&P 500 Equal Weight E	Exchange-traded fund	-	977
	D R Horton Inc	Common stock	-	976
	Pulte Group Inc	Common stock	-	972
	Tri Pointe Homes Inc	Common stock	-	948
	Marinemax Inc Com Fl	Common stock	-	945
	Tempur-Pedic Int'l Inc	Common stock	-	941
	Primoris Services Corp	Common stock	-	935
	M/I Homes Inc Com	Common stock	-	933
	Jefferies Fnl Group Inc	Common stock	-	931
	Worthington Industries	Common stock	-	929
	Tompkins Fncl Corp	Common stock	-	919
	Mohawk Industries Inc	Common stock	-	911

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost[1]	(e) Current value
	Owens Corning	Common stock	-	$ 905
	BNY Mellon Sm/Md Cap Gw I	Mutual fund	-	874
	Encore Cap Grp Inc	Common stock	-	870
	Toll Brothers	Common stock	-	869
	Flagstar Bancorp Inc	Common stock	-	815
	Atkore Inc	Common stock	-	778
	Meritor Inc Com	Common stock	-	768
	Bio Rad Lab A	Common stock	-	756
	US Cellular Cp	Common stock	-	755
	Nexstar Media Group Cl A	Common stock	-	755
	Penske Auto Gp Inc	Common stock	-	750
	Taylor Morrison Home Corp Cl A	Common stock	-	734
	Lennar Corporation	Common stock	-	697
	Nucor Corporation	Common stock	-	685
	Irobot	Common stock	-	659
	Crocs Inc	Common stock	-	641
	Silicon Lab Inc	Common stock	-	619
	La Z Boy Incorporated	Common stock	-	545
	PVH Corporation	Common stock	-	533
	Zumiez Inc	Common stock	-	528
	Foot Locker Inc	Common stock	-	524
	Genesco Inc	Common stock	-	513
	Kohls Corporation Wisc	Common stock	-	494
	Macy's Inc	Common stock	-	393
	Citi Trends Inc	Common stock	-	379
	Hibbett Inc	Common stock	-	360
				4,507,099
*	Participant Loans	Interest rates range from 5.75% to 6.00%; maturities vary	-0-	10,127
		Total		$ 4,517,226

* Represents a party-in-interest.
(1) Cost information is omitted for participant-directed investments.

See accompanying independent auditors' report.