

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 6047(e), 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
		2010
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☒ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>UPPER VALLEY MEDICAL CENTER AMENDED AND RESTATED RETIREMENT PLAN</u>	<table border="1"> <tr> <td>1b Three-digit plan number (PN) ►</td> <td><u>001</u></td> </tr> <tr> <td>1c Effective date of plan</td> <td><u>01/01/1987</u></td> </tr> </table>	1b Three-digit plan number (PN) ►	<u>001</u>	1c Effective date of plan	<u>01/01/1987</u>
1b Three-digit plan number (PN) ►	<u>001</u>				
1c Effective date of plan	<u>01/01/1987</u>				
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>UPPER VALLEY MEDICAL CENTER</u> <u>3130 NORTH DIXIE HIGHWAY</u> <u>TROY, OH 45373-1337</u>	<table border="1"> <tr> <td>2b Employer Identification Number (EIN) <u>34-1850683</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>937-440-4000</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>622000</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-1850683</u>	2c Sponsor's telephone number <u>937-440-4000</u>	2d Business code (see instructions) <u>622000</u>	
2b Employer Identification Number (EIN) <u>34-1850683</u>					
2c Sponsor's telephone number <u>937-440-4000</u>					
2d Business code (see instructions) <u>622000</u>					

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>09/19/2011</u>	<u>TRACY MOSER</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")

UPPER VALLEY MEDICAL CENTER

3130 NORTH DIXIE HIGHWAY
TROY, OH 45373-1337**3b** Administrator's EIN

34-1850683

3c Administrator's telephone number

937-440-4000

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:**a** Sponsor's name**4b** EIN**4c** PN**5** Total number of participants at the beginning of the plan year**5**

2022

6 Number of participants as of the end of the plan year (welfare plans complete only lines **6a**, **6b**, **6c**, and **6d**).**a** Active participants.....**6a**

634

b Retired or separated participants receiving benefits.....**6b**

642

c Other retired or separated participants entitled to future benefits.....**6c**

564

d Subtotal. Add lines **6a**, **6b**, and **6c**.....**6d**

1840

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....**6e**

49

f Total. Add lines **6d** and **6e**.....**6f**

1889

g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....**6g****h** Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....**6h**

3

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 Characteristic Codes in the instructions:

1A 1G 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:**9a** Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)**a Pension Schedules**

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information)
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2010 This Form is Open to Public Inspection
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>UPPER VALLEY MEDICAL CENTER AMENDED AND RESTATED RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>UPPER VALLEY MEDICAL CENTER</u>	D Employer Identification Number (EIN) <u>34-1850683</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2010</u>	
2 Assets:	
a Market value	2a <u>48975975</u>
b Actuarial value	2b <u>51050624</u>
3 Funding target/participant count breakdown	
	(1) Number of participants (2) Funding Target
a For retired participants and beneficiaries receiving payment	3a <u>650</u> <u>20034826</u>
b For terminated vested participants	3b <u>693</u> <u>12437497</u>
c For active participants:	
(1) Non-vested benefits	3c(1) <u>441853</u>
(2) Vested benefits	3c(2) <u>24053769</u>
(3) Total active	3c(3) <u>679</u> <u>24495622</u>
d Total	3d <u>2022</u> <u>56967945</u>
4 If the plan is at-risk, check the box and complete items (a) and (b)	☐
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>6.69</u> %
6 Target normal cost	6 <u>1425234</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	<u>09/15/2011</u>
Signature of actuary <u>NEVILLE A. ARJANI</u>	Date <u>08-02781</u>
Type or print name of actuary <u>FINDLEY DAVIES, INC.</u>	Most recent enrollment number <u>216-875-1900</u>
Firm name <u>1300 EAST NINTH STREET SUITE 850</u> <u>CLEVELAND, OH 44114-1516</u>	Telephone number (including area code)
Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2010
v.092308.1

Part II	Beginning of year carryover and prefunding balances	(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	6179742	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9	Amount remaining (Item 7 minus item 8).....	6179742	0
10	Interest on item 9 using prior year's actual return of <u>17.37</u> %	1073421	
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		3291360
b	Interest on (a) using prior year's effective rate of <u>8.18</u> %		269233
c	Total available at beginning of current plan year to add to prefunding balance		3560593
d	Portion of (c) to be added to prefunding balance.....		0
12	Reduction in balances due to elections or deemed elections.....	1776895	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	5476268	0

Part III	Funding percentages		
14	Funding target attainment percentage.....	14	80.00 %
15	Adjusted funding target attainment percentage.....	15	80.00 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	94.71 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV	Contributions and liquidity shortfalls				
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2010	319801				
07/15/2010	319801				
10/08/2010	319801				
12/22/2010	319801				
09/07/2011	1932877				
			Totals ►	18(b)	3212081
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contribution from prior years.....	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	2960902

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: 5.03 %	2nd segment: 6.73 %	3rd segment: 6.82 %	☐ N/A, full yield curve used
b Applicable month (enter code)	21b			4
22 Weighted average retirement age	22			62
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	1425234
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	9114871	1533960
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	2959194
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement		0
36 Additional cash requirement (item 34 minus item 35).....	36	2959194
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	2960902
38 Interest-adjusted excess contributions for current year (see instructions).....	38	1708
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2010
		This Form is Open to Public Inspection.
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan UPPER VALLEY MEDICAL CENTER AMENDED AND RESTATED RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 UPPER VALLEY MEDICAL CENTER	D Employer Identification Number (EIN) 34-1850683	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
U.S BANK NATIONAL ASSOCIATION
31-0841368

(b) Enter name and EIN or address of person who provided you disclosure 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)

FIFTH THIRD BANK RETIREMENT SVCS.

31-1051736

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 28	NONE KNOWN	63149	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

U.S BANK NATIONAL ASSOCIATION

31-0841368

(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?
21	NONE KNOWN	49422	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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
		2010
		This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan <u>UPPER VALLEY MEDICAL CENTER AMENDED AND RESTATED RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>UPPER VALLEY MEDICAL CENTER</u>	D Employer Identification Number (EIN) <u>34-1850683</u>	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	<u>3960122</u>	<u>3620627</u>
(2) U.S. Government securities.....	1c(2)	<u>13273193</u>	<u>10214639</u>
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	<u>5236056</u>	<u>7305485</u>
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	<u>7920644</u>	<u>9107337</u>
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	<u>16574255</u>	<u>22562959</u>
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		<u>340923</u>

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	46964270	53151970

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	46964270	53151970
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	3279204	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3279204
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	28	
(B) U.S. Government securities	2b(1)(B)	557871	
(C) Corporate debt instruments	2b(1)(C)	313662	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		871561
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	157436	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	295329	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		452765
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	35492152	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	35482958	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		9194

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	1467480	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		1467480
(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)		2796593
c Other income.....	2c		7569
d Total income. Add all income amounts in column (b) and enter total.....	2d		8884366

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2584091	
(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)		2584091
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)	49422	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	63149	
(4) Other	2i(4)	4	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		112575
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2696666

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		6187700
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) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

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

(1) Name: PLANTE & MORAN, PLLC

(2) EIN: 38-1357951

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 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 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.).....		X	
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.).....		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.)		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.).....		X	
e Was this plan covered by a fidelity bond?.....	X		1500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		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?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....			
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.			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount:

- 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)

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 section 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 2010 This Form is Open to Public Inspection.
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan <u>UPPER VALLEY MEDICAL CENTER AMENDED AND RESTATED RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>UPPER VALLEY MEDICAL CENTER</u>	D Employer Identification Number (EIN) <u>34-1850683</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>31-6162942</u>	
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 <u>107</u>

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)
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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	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 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
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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(es). If no, check the "No" box.....	☒ Increase	☐ Decrease	☐ Both	☐ No
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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.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule R (Form 5500) 2010
v.092308.1

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 items 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 items 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 items 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 items 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 items 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 items 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 participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	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 item 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 items (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: 52% Investment-Grade Debt: 39% High-Yield Debt: 1% Real Estate: 0% Other: 8%

- 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 item 19(b)?

☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

**Upper Valley Medical Center
Amended and Restated Retirement Plan**

**Financial Report
December 31, 2010**

Upper Valley Medical Center Amended and Restated Retirement Plan

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Independent Auditor's Report

To the Plan Administrator
Upper Valley Medical Center Amended
and Restated Retirement Plan

We were engaged to audit the financial statements and supplemental schedules of Upper Valley Medical Center Amended and Restated Retirement Plan (the "Plan") as of December 31, 2010 and 2009 and for the years then ended, as listed in the accompanying table of contents. These modified cash basis financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by U.S. Bank, N.A., the trustee of the Plan, except for comparing such information with the related information included in the modified cash basis financial statements and supplemental schedules. We have been informed by the plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the Trustee as of December 31, 2010 and 2009 and for the years then ended that the information provided to the plan administrator by the Trustee is complete and accurate.

As described in Note 2, these financial statements and supplemental schedules were prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in black ink that reads "Plante & Moran, PLLC".

Columbus, Ohio
August 24, 2011

Upper Valley Medical Center Amended and Restated Retirement Plan

Statement of Net Assets Available for Benefits Modified Cash Basis

		December 31	
		2010	2009
Assets			
Investments - At fair value:			
Mutual funds	\$	22,562,959	\$ 16,574,255
Interest-bearing cash		3,620,627	3,960,122
U.S. government securities		10,214,639	13,273,193
Municipal securities		340,923	-
Foreign obligations		509,398	343,696
Corporate obligations		6,796,087	4,892,360
Domestic common stocks		8,536,668	7,204,395
Foreign common stocks		570,669	716,249
Net Assets Available for Benefits	\$	53,151,970	\$ 46,964,270

Upper Valley Medical Center Amended and Restated Retirement Plan

Statement of Changes in Net Assets Available for Benefits Modified Cash Basis

	Year Ended	
	December 31, 2010	December 31, 2009
Additions		
Employer contributions	\$ 3,279,204	\$ 3,000,000
Interest, dividends, and other income	1,331,263	1,426,367
Net appreciation in fair value of investments (Note 6)	4,270,220	5,499,087
Total additions	8,880,687	9,925,454
Deductions		
Benefit payments	2,584,091	2,113,322
Administrative expenses	108,896	179,154
Total deductions	2,692,987	2,292,476
Increase in Net Assets Available for Benefits	6,187,700	7,632,978
Net Assets Available for Benefits		
Beginning of year	46,964,270	39,331,292
End of year	<u><u>\$ 53,151,970</u></u>	<u><u>\$ 46,964,270</u></u>

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 1 – Plan Description

Upper Valley Medical Center Amended and Restated Retirement Plan (the "Plan") is a noncontributory defined benefit plan which covers a continually decreasing portion of employees of Upper Valley Medical Center, Miami County Mental Health Center, and UVMC Management Corporation (collectively, the "Medical Center") and which provides for pension benefits. The Medical Center has agreed to voluntarily contribute such amounts as are necessary to provide assets sufficient to meet the benefits to be paid to plan beneficiaries. Participants are fully vested for normal retirement benefits after five years of service.

The Medical Center's funding policy is to make contributions to the Plan in amounts that are estimated by actuaries to be sufficient to fund the current service cost as well as the initial past service cost plus interest thereon over a period of 25 years. The Medical Center has met the Employee Retirement Income Security Act of 1974 (ERISA) minimum funding requirements. In addition, all plan expenses, except trustee fees and investment management fees, are paid by the Medical Center.

On February 14, 2001, the board of trustees of the Medical Center, as permitted by the plan document, approved the personnel and pension committee's recommendation to amend the Plan effective March 1, 2001. Under the amended Plan, each participant age 40 or older, as of January 1, 2001, who affirmatively elected to continue participation under this Plan, continues to accrue benefits hereunder according to the terms of the Plan. All other participants had their accrued benefits under this Plan frozen as of March 1, 2001 ("Freeze Date"), and such accrued benefits were calculated based upon each participant's average monthly compensation and benefit service as of March 1, 2001. Effective January 1, 2001, no new participants were permitted in this Plan.

The Medical Center has the right under the Plan to discontinue its contributions at any time and terminate the Plan subject to the provisions of ERISA. Should the Plan terminate at some future time, its net assets may not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC) at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty while other benefits may not be provided for at all.

Additional information about the Plan is contained in the Upper Valley Medical Center Amended and Restated Retirement Plan document. Copies of the plan document are available from the plan administrator.

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 2 – Summary of Significant Accounting Policies

Basis of Presentation – The financial statements and supplemental schedules of the Plan are prepared on the modified cash basis, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Under this basis, interest and dividend income is recorded when received, rather than when earned, investment assets are reported at fair value, net realized and unrealized appreciation (depreciation) in fair value of investments is recognized, contributions are recognized when received rather than as earned, and benefits and expenses are recognized when paid rather than as incurred.

Investment Valuation – Investments are stated at fair value. Securities, which are traded on a national securities exchange, are valued at the last reported sales price on the last business day of the year. Investments traded in the over-the-counter market and listed securities for which no sale was reported on that date are valued at the average of the last reported bid and ask prices. Mutual funds are valued at quoted market prices, which represent the net asset values of shares held by the Plan at year end. U.S. government securities, municipal securities, and corporate and foreign obligations are valued using quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices, discounted cash flow models, and other pricing models. These models are primarily industry-standard models that consider various assumptions, including time value and yield curve as well as other relevant economic measures. The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date (see Note 3).

Administrative Expenses – Various administrative costs are paid by the Medical Center.

Use of Estimates – The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 2 – Summary of Significant Accounting Policies (continued)

Actuarial Present Value of Accumulated Plan Benefits – Accumulated plan benefits are those future periodic payments that are attributable, under the Plan's provisions, to the service that employees have rendered through the valuation date for participants who affirmatively elected to continue participation under the Plan or the Freeze Date for other participants. Accumulated plan benefits include benefits expected to be paid to (a) currently retired or terminated employees or their beneficiaries and (b) certain present employees or their beneficiaries. Benefits for retired or terminated employees or their beneficiaries are based on employees' compensation during their five highest consecutive plan years within the last 10 plan years of active participation. Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included, to the extent they are deemed attributable to employee service rendered through the valuation date for participants who affirmatively elected to continue participation under the Plan or the Freeze Date, for other participants.

Note 3 – Fair Value of Assets and Liabilities

Topic 820, *Fair Value Measurements* of the Financial Accounting Standards Board Accounting Standards Codification, defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. It also establishes a fair value hierarchy that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. To measure fair value, the Medical Center incorporates assumptions that market participants would use in pricing the asset or liability, and utilizes market data to the maximum extent possible. The measurement of fair value incorporates nonperformance risk (i.e. the risk that an obligation will not be fulfilled). In measuring fair value, the Medical Center reflects the impact of its own credit risk on its liabilities, as well as any collateral. The Medical Center also considers the credit standing of its counterparties in measuring the fair value of its assets.

The standard describes three levels of inputs that may be used to measure fair value:

Level 1 inputs are defined as quoted prices in active markets for identical assets or liabilities.

Level 2 inputs are observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. Significant Level 2 inputs include comparable U.S. government, foreign, and corporate obligations that are traded on the open market.

Level 3 inputs are unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 3 – Fair Value of Assets and Liabilities (continued)

The fair value of financial assets and liabilities measured on a recurring basis was determined as follows:

	Fair Value Measurements at Reporting Date Using			
	Fair Value December 31, 2010	(Level 1) Quoted Prices In Active Markets	(Level 2) Other Observable Inputs	(Level 3) Unobservable Inputs
<u>Assets</u>				
Mutual funds –				
Equity investments	\$ 22,562,959	\$22,562,959	\$ –	\$ –
Interest-bearing cash	3,620,627	3,620,627	–	–
U.S. government securities –				
Fixed-income investments	10,214,639	–	10,214,639	–
Municipal securities –				
Fixed-income investments	340,923	–	340,923	–
Foreign obligations –				
Fixed-income investments	509,398	–	509,398	–
Corporate obligations –				
Fixed-income investments	6,796,087	–	6,796,087	–
Domestic common stocks –				
Equity investments	8,536,668	8,536,668	–	–
Foreign common stocks –				
Equity investments	570,669	570,669	–	–
Total assets at fair value	\$ 53,151,970	\$35,290,923	\$17,861,047	\$ –

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 3 – Fair Value of Assets and Liabilities (continued)

	Fair Value Measurements at Reporting Date Using			
	Fair Value December 31, 2009	(Level 1) Quoted Prices In Active Markets	(Level 2) Other Observable Inputs	(Level 3) Unobservable Inputs
Assets				
Mutual funds –				
Equity investments	\$ 16,574,255	\$16,574,255	\$ –	\$ –
Interest-bearing cash	3,960,122	3,960,122	–	–
U.S. government securities –				
Fixed-income investments	13,273,193	–	13,273,193	–
Foreign obligations –				
Fixed-income investments	343,696	–	343,696	–
Corporate obligations –				
Fixed-income investments	4,892,360	–	4,892,360	–
Domestic common stocks –				
Equity investments	7,204,395	7,204,395	–	–
Foreign common stocks –				
Equity investments	716,249	716,249	–	–
Total assets at fair value	\$ 46,964,270	\$28,455,021	\$18,509,249	\$ –

Note 4 – Accumulated Plan Benefits

A consulting actuary estimates the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money through discounts (for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 4 – Accumulated Plan Benefits (continued)

The actuarial present value of accumulated plan benefits as of the beginning of each plan year is as follows:

	January 1	
	2010	2009
Vested benefits:		
Retired employees	\$ 18,093,529	\$ 16,980,544
Other vested participants	30,483,864	28,298,099
Total vested benefits	48,577,393	45,278,643
Nonvested benefits	494,224	660,925
Total actuarial present value of accumulated plan benefits	<u>\$ 49,071,617</u>	<u>\$ 45,939,568</u>

The change in the actuarial present value of accumulated plan benefits for each plan year is as follows:

	Year Ended January 1	
	2010	2009
Beginning of year	\$ 45,939,568	\$ 43,146,675
Increase (decrease) during the year attributable to:		
Benefits accumulated	824,862	1,407,524
Interest due to the decrease in the discount period	3,583,588	3,366,090
Benefits paid	(2,113,322)	(1,980,721)
Change in actuarial assumptions	836,921	-
Net increase	<u>3,132,049</u>	<u>2,792,893</u>
End of year	<u>\$ 49,071,617</u>	<u>\$ 45,939,568</u>

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 4 – Accumulated Plan Benefits (continued)

The more significant assumptions underlying the 2010 and 2009 actuarial computations are as follows:

Actuarial Valuation Method	Projected Unit Credit Method
Health Mortality Rates	2000 Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA (2000 Mortality Table projected to 2010 by Scale AA for 2009)
Assumed Normal Retirement Age	Retirement rate percentage ranging from 15% at age 55 to 60% at age 65 with a weighted retirement age of 62
Assumed Rate of Return	8.00%
Changes in Assumptions and Methods	Discount rate changed to 5.32% for 2010 (5.85% for 2009) Salary scale changed to 4.00% for 2010 (4.50% in 2009)

Note 5 – Income Tax Status

The underlying nonstandardized prototype plan has received an opinion letter from the Internal Revenue Service (IRS) dated October 28, 2009, stating that the written form of the plan is qualified under Section 401(a) of the Internal Revenue Code (the "Code") and, therefore, the related trust is tax exempt. In accordance with Revenue Procedure 2002-6 and Announcement 2001-77, the Medical Center has determined that it is eligible to and has chosen to rely on the current IRS prototype-plan opinion letter. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified and the related trust is tax exempt.

Note 6 – Unaudited Investment Information

U.S. Bank, N.A. (the "Trustee"), holds the Plan's investments and executes all investment transactions. The investment balances and related investment results included in the accompanying financial statements and supplement schedule of assets held at the end of year are based solely on information provided by the Trustee. Additionally, the plan invests in certain investments managed by the Trustee.

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

Note 6 – Unaudited Investment Information (continued)

The fair values of significant individual investments held as of the end of the year are as follows:

	2010	2009
Mutual funds:		
Nuveen Equity Index Fund CI Y	\$ 11,033,937	\$ -
Nuveen Small Capital Index Fund CI Y	4,659,274	-
Vanguard Intl Growth Fd Class AD	6,869,748	5,281,116
First Amer Small Cap Index Fd Class Y	-	3,615,769
First Amer Equity Index Fd Class Y	-	7,677,370
Interest-bearing cash:		
First American Prime Obligation Fund CI Y	-	2,565,380
First American Treasury Obligations Fund CI Y	3,620,626	-

During 2010 and 2009, the Plan's investments (including investments bought and sold, as well as held during the year) appreciated (depreciated) in fair value as follows:

	2010	2009
Fair value as determined by quoted market price:		
Mutual funds	\$ 2,797,447	\$ 3,382,972
U.S. government securities	225,449	(89,246)
Municipal securities	(19,245)	-
Foreign obligations	(9,376)	34,529
Corporate obligations	296,602	718,489
Domestic common stocks	923,262	1,232,206
Foreign common stocks	56,081	220,137
Total	<u>\$ 4,270,220</u>	<u>\$ 5,499,087</u>

Upper Valley Medical Center Amended and Restated Retirement Plan

Notes to Financial Statements December 31, 2010 and 2009

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 risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such change could materially affect the amounts reported in the statement of net assets available for benefits.

Furthermore, plan contributions are made and the actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

Note 8 – Subsequent Events

The financial statements and related disclosures include evaluation of events up through and including August 24, 2011, which is the date the financial statements were available to be issued.

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Mutual Funds			
Nuveen	Nuveen Equity Index Fund CI Y - 513,923 shares	\$ 11,505,659	\$ 11,033,937
Nuveen	Nuveen Small Cap Index Fund CI Y - 424,342 shares	5,131,329	4,659,274
Vanguard	Vanguard Intl Grwth Fd CI A D - 111,667 shares	6,178,581	6,869,748
		22,815,569	22,562,959
Cash and Cash Equivalents			
*U.S. Bank, N.A.	First American Treasury Obligations Fund CI Y	3,620,627	3,620,627
		3,620,627	3,620,627
U.S. Government Securities			
Fannie Mae	\$1,458 principal amount, 6.000% due February 1, 2017	1,524	1,587
Fannie Mae	\$2,539 principal amount, 6.000% due May 1, 2017	2,654	2,769
Fannie Mae	\$2,086 principal amount, 6.000% due June 1, 2017	2,181	2,276
Fannie Mae	\$2,395 principal amount, 6.500% due June 1, 2017	2,544	2,621
Fannie Mae	\$1,280 principal amount, 6.000% due June 1, 2017	1,338	1,396
Fannie Mae	\$22,046 principal amount, 4.500% due May 1, 2018	22,614	23,355
Fannie Mae	\$9,278 principal amount, 6.000% due May 1, 2018	9,725	10,118
Fannie Mae	\$24,651 principal amount, 4.500% due June 1, 2018	25,006	26,115
Fannie Mae	\$22,703 principal amount, 4.500% due November 1, 2018	22,774	24,051
Fannie Mae	\$76,533 principal amount, 4.500% due March 1, 2019	76,820	81,081
Fannie Mae	\$71,076 principal amount, 4.500% due January 1, 2020	68,333	75,208
Fannie Mae	\$127,698 principal amount, 5.000% due April 1, 2023	132,467	135,540
Fannie Mae	\$191,911 principal amount, 4.500% due November 25, 2023	196,499	201,643
Fannie Mae	\$20,324 principal amount, 5.500% due February 1, 2025	20,779	21,966
Fannie Mae	\$292,915 principal amount, 5.000% due September 01, 2025	312,046	311,489
Fannie Mae	\$2,005 principal amount, 7.500% due June 1, 2028	2,138	2,290
Fannie Mae	\$2,100 principal amount, 6.500% due August 1, 2028	3,028	3,262
Fannie Mae	\$2,198 principal amount, 6.500% due June 1, 2029	2,295	2,472
Fannie Mae	\$7,524 principal amount, 6.500% due April 1, 2032	7,861	8,460
Fannie Mae	\$30,395 principal amount, 7.000% due May 1, 2032	32,026	34,643
Fannie Mae	\$10,163 principal amount, 6.500% due June 1, 2032	10,585	11,427

U.S. Government Securities (continued)

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Fannie Mae	\$7,630 principal amount, 6.500% due July 1, 2032	\$ 7,968	\$ 8,580
Fannie Mae	\$9,379 principal amount, 6.500% due July 1, 2032	9,815	10,546
Fannie Mae	\$136,886 principal amount, 6.000% due January 1, 2033	141,420	150,794
Fannie Mae	\$76,148 principal amount, 5.500% due February 1, 2033	77,977	81,986
Fannie Mae	\$3,482 principal amount, 6.500% due March 1, 2033	3,636	3,916
Fannie Mae	\$47,018 principal amount, 6.000% due August 25, 2033	46,430	47,726
Fannie Mae	\$38,970 principal amount, 5.500% due September 1, 2033	38,836	42,005
Fannie Mae	\$169,824 principal amount, 5.500% due November 1, 2033	184,100	183,053
Fannie Mae	\$56,451 principal amount, 5.500% due November 1, 2033	57,157	60,849
Fannie Mae	\$400,000 principal amount, 5.500% due December 25, 2033	396,063	432,268
Fannie Mae	\$21,722 principal amount, 5.500% due February 1, 2034	22,180	23,380
Fannie Mae	\$42,620 principal amount, 5.500% due April 1, 2034	43,193	45,941
Fannie Mae	\$231,273 principal amount, 5.000% due April 1, 2034	218,119	244,752
Fannie Mae	\$125,000 principal amount, 5.500% due May 25, 2034	122,578	131,406
Fannie Mae	\$99,678 principal amount, 5.500% due July 1, 2034	98,712	107,287
Fannie Mae	\$37,174 principal amount, 6.500% due September 1, 2034	37,923	41,683
Fannie Mae	\$92,481 principal amount, 5.500% due October 1, 2034	94,967	99,657
Fannie Mae	\$185,744 principal amount, 5.500% due March 1, 2035	187,602	201,375
Fannie Mae	\$9,224 principal amount, 6.000% due May 1, 2035	9,456	10,066
Fannie Mae	\$23,984 principal amount, 5.000% due July 1, 2035	23,752	25,322
Fannie Mae	\$7,725 principal amount, 6.000% due September 1, 2035	7,916	8,430
Fannie Mae	\$332,065 principal amount, 5.000% due November 1, 2035	317,433	350,588
Fannie Mae	\$41,831 principal amount, 6.000% due January 1, 2036	42,243	45,859
Fannie Mae	\$60,247 principal amount, 5.500% due February 1, 2036	58,338	64,790
Fannie Mae	\$90,687 principal amount, 6.000% due June 1, 2036	90,036	98,910
U.S. Government Securities (continued)			
Fannie Mae	\$185,032 principal amount, 6.000%		

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value		
		Cost	Market Value
	due June 1, 2036	\$ 185,408	\$ 203,831
Fannie Mae	\$20,179 principal amount, 6.500% due August 1, 2036	20,488	22,386
Fannie Mae	\$57,681 principal amount, 7.000% due September 1, 2036	59,429	65,321
Fannie Mae	\$57,446 principal amount, 6.500% due November 1, 2036	58,442	64,055
Fannie Mae	\$305,766 principal amount, 5.500% due May 1, 2037	328,412	330,732
Fannie Mae	\$78,438 principal amount, 5.500% due June 1, 2037	77,592	83,984
Fannie Mae	\$116,231 principal amount, 6.000% due January 1, 2038	122,714	126,479
Fannie Mae	\$130,900 principal amount, 5.500% due August 1, 2038	136,402	142,488
Fannie Mae	\$103,626 principal amount, 6.000% due November 1, 2038	109,827	112,729
Fannie Mae	\$316,694 principal amount, 4.500% due June 1, 2039	307,985	326,857
Fannie Mae	\$87,027 principal amount, 4.500% due August 1, 2039	90,862	89,820
Fannie Mae	\$93,314 principal amount, 4.500% due August 1, 2039	97,090	96,163
Fannie Mae	\$122,936 principal amount, 4.500% due May 1, 2040	128,276	126,687
Fannie Mae	\$170,093 principal amount, 5.000% due June 1, 2040	180,192	178,943
Fannie Mae	\$68,614 principal amount, 4.000% due August 1, 2040	70,812	68,326
Federal Home Loan	\$35,067 principal amount, 5.000% due April 1, 2018	35,207	37,396
Federal Home Loan	\$450,000 principal amount, 4.875% due June 13, 2018	456,694	503,253
Federal Home Loan	\$46,350 principal amount, 5.000% due August 1, 2018	46,538	49,428
Federal Home Loan	\$38,176 principal amount, 4.500% due September 1, 2018	37,962	40,300
Federal Home Loan	\$249,632 principal amount, 4.000% due May 1, 2019	257,277	258,916
Federal Home Loan	\$190,000 principal amount, 5.000% due February 15, 2025	184,300	200,858
Federal Home Loan	\$28,451 principal amount, 7.000% due June 1, 2026	29,291	32,216
Federal Home Loan	\$24,343 principal amount, 6.500% due January 1, 2029	25,389	27,371
Federal Home Loan	\$3,600 principal amount, 6.500% due July 1, 2032	3,748	4,047
Federal Home Loan	\$75,000 principal amount, 6.250% due July 15, 2032	86,507	91,615
U.S. Government Securities (continued)			
Federal Home Loan	\$182,942 principal amount, 5.500% due July 15, 2032	\$ 174,395	\$ 197,937

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Federal Home Loan	\$1,650 principal amount, 6.500% due September 1, 2032	1,721	1,855
Federal Home Loan	\$30,817 principal amount, 5.500% due September 1, 2033	31,038	33,110
Federal Home Loan	\$39,192 principal amount, 5.000% due December 1, 2033	39,027	41,374
Federal Home Loan	\$34,211 principal amount, 4.500% due June 1, 2034	33,163	35,293
Federal Home Loan	\$33,865 principal amount, 4.500% due September 1, 2034	32,828	34,936
Federal Home Loan	\$22,275 principal amount, 6.000% due February 1, 2035	22,905	24,376
Federal Home Loan	\$175,000 principal amount, 5.500% due March 15, 2035	169,976	189,047
Federal Home Loan	\$45,396 principal amount, 6.000% due August 1, 2035	46,588	49,592
Federal Home Loan	\$59,142 principal amount, 5.500% due October 1, 2035	58,550	63,395
Federal Home Loan	\$62,923 principal amount, 5.500% due March 1, 2036	62,284	67,449
Federal Home Loan	\$229,100 principal amount, 5.000% due July 1, 2036	214,557	240,708
Federal Home Loan	\$192,126 principal amount, 6.000% due July 1, 2037	193,387	211,684
Federal Home Loan	\$83,149 principal amount, 6.500% due August 1, 2037	88,969	92,948
Federal Home Loan	\$123,208 principal amount, 4.500% due August 1, 2040	128,945	126,373
Ginnie Mae	\$41,185 principal amount, 5.500% due July 20, 2033	41,468	44,608
U S Treas Bd Strip	\$250,000 principal amount due February 15, 2018	152,893	204,167
U S Treas Bd Strip	\$430,000 principal amount due November 15, 2027	158,539	206,034
U S Treasury IP	\$376,061 principal amount, 1.250% due July 15, 2020	385,982	385,053
U S Treasury Notes	\$945,000 principal amount, 3.500% due May 15, 2020	995,915	968,039
U S Treasury Notes	\$220,000 principal amount, 2.625% due November 15, 2020	208,898	207,522
		9,671,959	10,214,639
Municipal Securities			
Delaware St Build	\$85,000 principal amount, 3.250% due July 1, 2020	84,927	80,003
Mississippi St Ser	\$45,000 principal amount, 2.095% due November 1, 2015	45,000	43,568
Municipal Securities (continued)			
University Tx Univ	\$50,000 principal amount, 4.794% due August 15, 2046	\$ 50,000	\$ 45,490
Utah St Build	\$95,000 principal amount, 3.289%		

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Virginia College	due July 1, 2020	95,000	90,502
	\$85,000 principal amount, 2.700%		
	due February 1, 2017	85,241	81,360
		360,168	340,923
Foreign Obligations			
Canadian Natl	\$80,000 principal amount, 6.250%		
	due March 15, 2038	79,653	88,394
Husky Energy Inc	\$70,000 principal amount, 5.900%		
	due June 15, 2014	76,544	76,929
Rio Tinto Fin	\$80,000 principal amount, 3.500%		
	due November 2, 2020	79,380	75,942
Shell Intl Fin	\$145,000 principal amount, 4.375%		
	due March 25, 2020	144,861	152,085
Trans Canada	\$45,000 principal amount, 5.850%		
	due March 15, 2036	48,290	47,123
Tyco Intl Financ Tyc	\$65,000 principal amount, 4.125%		
	due October 15, 2014	67,801	68,925
		496,529	509,398
Corporate Obligations			
1st Financial Bank	\$105,000 principal amount, 3.000%		
	due April 17, 2017	104,582	103,915
Ally Auto	\$80,000 principal amount, 1.350%		
	due December 15, 2015	79,985	78,184
Amerquest Mtg	\$57,134 principal amount, 4.965%		
	due November 25, 2033	54,599	58,313
AT&T Inc	\$35,000 principal amount, 6.300%		
	due January 15, 2038	34,846	36,923
Autozone Inc.	\$90,000 principal amount, 4.000%		
	due November 15, 2020	87,278	85,002
Banc of America	\$93,661 principal amount, 5.750%		
	due August 25, 2034	91,085	96,295
Bank of America	\$175,000 principal amount, 5.625%		
	due October 14, 2016	175,179	181,440
BB & T Corp	\$95,000 principal amount, 5.250%		
	due November 01, 2019	95,989	98,406
Bear Stearns Coml	\$130,000 principal amount, 5.200%		
	due January 12, 2041	130,715	139,049
Berkshire Hathwy	\$155,000 principal amount, 3.200%		
	due February 11, 2015	154,871	159,941
Boeing Co	\$75,000 principal amount, 3.750%		
	due November 20, 2016	73,798	78,473
Burlington North	\$90,000 principal amount, 5.650%		
	due May 1, 2017	97,575	100,306
Corporate Obligations (continued)			
CA Inc	\$60,000 principal amount, 5.375%		
	due December 1, 2019	\$ 61,367	\$ 62,033
Cardinal Health	\$45,000 principal amount, 5.500%		
	due June 15, 2013	49,477	48,744

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis Form 5500 Schedule H, Line 4i EIN 34-1850683, Plan No. 001 December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Cisco Systems	\$125,000 principal amount, 4.950% due February 15, 2019	124,718	136,220
Citigroup Deutche	\$190,000 principal amount, 5.2219% due July 15, 2044	203,434	204,480
Citigroup Inc	\$70,000 principal amount, 6.125% due November 21, 2017	62,068	76,712
Clorox	\$75,000 principal amount, 3.550% due November 1, 2015	75,204	77,176
CNH Equipment Trust	\$190,000 principal amount, 2.490% due January 15, 2016	193,793	194,266
Coca Cola Enter	\$115,000 principal amount, 4.250% due March 1, 2015	127,573	123,925
Comcast Corp	\$70,000 principal amount, 5.700% due July 1, 2019	75,718	76,528
Conocophillps	\$65,000 principal amount, 5.900% due May 15, 2038	64,754	71,496
Countrywide Alt Ln	\$73,057 principal amount, 5.000% due February 25, 2020	68,673	72,513
Cred Suis NY Mtn	\$185,00 principal amount, 5.300% due August 13, 2019	194,172	195,410
CS First Boston Mtg	\$120,981 principal amount, 5.250% due October 25, 2019	121,888	124,204
CVS Caremark Corp	\$70,000 principal amount, 5.750% due June 1, 2017	74,899	77,886
Cwalt Inc	\$18,872 principal amount, 6.500% due September 25, 2034	19,447	18,352
Cwmbs Inc	\$46,997 principal amount, 5.250% due August 25, 2024	46,997	45,760
Duke Energy Ind	\$115,000 principal amount, 3.750% due July 15, 2020	115,231	112,268
Equity One Abs Inc	\$44,036 principal amount, 4.145% due April 25, 2034	44,036	42,165
Florida Pwr & Lt	\$70,000 principal amount, 5.960% due April 1, 2039	69,949	77,812
Gazprom Intl	\$17,391 principal amount, 7.201% due February 1, 2020	17,393	18,478
GE Capital Credit	\$185,000 principal amount, 3.960% due July 15, 2015	192,082	192,173
Gen Elec Cap Corp	\$155,000 principal amount, 4.800% due May 1, 2013	142,045	165,709
General Mills Inc	\$70,000 principal amount, 5.650% due February 15, 2019	72,566	77,928
Goldman Sachs Group	\$60,000 principal amount, 3.250% due June 15, 2012	59,767	62,285
Goldman Sachs Grp	\$90,000 principal amount, 6.125% due February 15, 2033	91,654	95,352
Corporate Obligations (continued)			
Green Tree Finl Corp	\$10,821 principal amount, 7.600% due June 15, 2025	\$ 11,988	\$ 10,957
Green Tree Finl Corp	\$9,777 principal amount, 7.750% due July 15, 2027	10,755	10,013
Green Tree Finl Corp	\$47,320 principal amount, 7.320%		

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis Form 5500 Schedule H, Line 4i EIN 34-1850683, Plan No. 001 December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
	due July 15, 2028	50,750	49,641
Greenwich Cap Coml	\$83,658 principal amount, 4.883% due June 10, 2036	84,076	84,552
Gs Mtg Secs Corp li	\$34752 principal amount, 4.602% due August 10, 2038	34,925	34,927
Homebanc Mortgage	\$18,110 principal amount, 2.69063% due April 25, 2037	18,262	11,986
IBM Corp	\$50,000 principal amount, 5.875% due November 29, 2032	53,211	56,355
J P Morgan Mtg	\$264,513 principal amount, 5.8179% due June 25, 2036	264,885	234,076
J P Morgan Mtg Tr	\$225,000 principal amount, 4.500% due February 25, 2034	226,687	228,157
J P Morgan Mtg Tr	\$63,198 principal amount, 4.8516% due February 25, 2035	63,495	59,179
J P Morgan Mtg Tr	\$100,000 principal amount, 5.20193% due August 25, 2035	98,234	90,102
J P Morgan Chase & Co	\$65,000 principal amount, 6.000% due January 15, 2018	70,257	72,589
J P Morgan Chase & Co	\$185,000 principal amount, 5.22904% due December 15, 2044	197,314	199,164
Kinder Morgan En Kmp	\$750,000 principal amount, 5.625% due February 15, 2015	81,667	82,310
Kroger Co	\$45,000 principal amount, 7.500% due January 15, 2014	45,424	51,883
Lockheed Martin Corp	\$63,000 principal amount, 5.720% due June 1, 2040	63,000	65,759
Marathon Oil Corp	\$70,000 principal amount, 6.500% due February 15, 2014	69,709	78,800
Metlife Inc	\$70,000 principal amount, 6.750% due June 1, 2016	70,468	81,197
Mid State Trust	\$109,461 principal amount, 7.079% due January 15, 2040	94,137	97,564
Morgan Stanley	\$40,000 principal amount, 5.750% due October 18, 2016	42,145	42,659
Morgan Stanley	\$100,000 principal amount, 5.10051% due December 15, 2041	95,250	94,914
Nissan Auto Recv	\$70,000 principal amount, 1.310% due September 15, 2016	69,988	69,549
Prudential Fin Mtn	\$75,000 principal amount, 3.875% due January 14, 2015	75,087	77,376
Residential Accred	\$50,000 principal amount, 5.000% due May 25, 2033	42,750	44,327
Residential Ast Mtg	\$97,193 principal amount, 4.96871% due September 25, 2033	95,295	98,351
Corporate Obligations (continued)			
RPM Intl Inc	\$70,000 principal amount, 6.250% due December 15, 2013	\$ 78,243	\$ 76,752
Southern Pwr Co	\$95,000 principal amount, 6.250% due July 15, 2012	99,466	102,138
Suntrust Bank	\$65,000 principal amount, 3.000% due November 16, 2011	65,317	66,479

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Target Corp	\$40,000 principal amount, 5.375% due May 1, 2017	38,771	44,827
Time Warner Cable	\$70,000 principal amount, 5.850% due May 1, 2017	74,861	78,106
Union Pac Corp	\$60,000 principal amount, 5.450% due January 31, 2013	60,463	64,810
United Health Grp	\$90,000 principal amount, 4.875% due February 15, 2013	96,434	95,818
Vanderbilt Acquisitions	\$26,475 principal amount, 6.570% due May 7, 2027	28,063	28,153
Verizon Global Fdg	\$130,000 principal amount, 4.900% due September 15, 2015	140,796	142,761
Virginia Elec Power	\$35,000 principal amount, 6.350% due November 30, 2037	34,921	40,064
Wachovia Bk Coml	\$185,000 principal amount, 5.7379% due May 15, 2043	184,892	198,424
Wachovia Bk Natl As	\$35,000 principal amount, 5.850% due February 1, 2037	34,414	35,224
Walt Disney Co	\$50,000 principal amount, 4.700% due December 1, 2012	49,886	53,598
Yum Brands Inc	\$80,000 principal amount, 3.875% due November 1, 2020	79,898	76,424
		6,645,591	6,796,087
Domestic Common Stocks			
3M Co	1,175 shares	77,930	101,403
Abbott Labs	2,300 shares	124,181	110,193
Aflac	2,000 shares	64,016	112,860
Allergan Inc	600 shares	41,425	41,202
Altria Group Inc	800 shares	15,927	19,696
Amerisourcebergen Corp	3,300 shares	103,826	112,596
Amgen Inc	1,300 shares	78,749	71,370
Anadarko Petroleum Corp	1,100 shares	63,861	83,776
Apache Corp	1,700 shares	79,888	202,691
Apple Inc	650 shares	46,625	209,664
AT&T	2,800 shares	82,933	82,264
Autozone Inc	225 shares	36,230	61,333
B M C Software Inc	1,500 shares	64,995	70,710
Baxter Intl Inc	800 shares	54,749	40,496
B B & T Corp	2,800 shares	78,260	73,612
Best Buy Co Inc	1,000 shares	41,225	34,290
Blackrock Inc	100 shares	22,800	19,058
Boeing Co	1,300 shares	92,023	84,838
Chevron Corp	1,300 shares	81,822	118,625
Cisco Sys Inc	5,000 shares	138,013	101,150
Cognizant Tech Solutions Crp	2,300 shares	96,287	168,567
Domestic Common Stocks (Continued)			
Conocophillips	2,800 shares	\$ 127,354	\$ 190,680
Costco Whsl Corp	2,000 shares	93,005	144,420
Disney Walt Co	1,300 shares	40,518	48,763
Dollar Tree Inc	2,350 shares	64,739	131,788
Ecolab Inc	2,000 shares	88,995	100,840
Emerson Elec Co	1,800 shares	94,412	102,906
Equinix Inc	1,000 shares	74,102	81,260

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Exelon Corporation	2,200 shares	92,122	91,608
Express Scripts Inc	3,000 shares	91,703	162,150
Exxon Mobil Corp	1,000 shares	81,866	73,120
F5 Networks Inc	600 shares	56,493	78,096
Fiserv Inc	1,625 shares	70,177	95,160
Fluor Corp	800 shares	40,270	53,008
Franklin Res Inc	850 shares	77,941	94,528
Freeport-Mcmoran Copper & Gold	900 shares	72,871	108,081
Frontier Communications Corp	834 shares	6,931	8,115
General Dynamics Corp	300 shares	21,216	21,288
Goldman Sachs Group Inc	400 shares	52,650	67,264
Google Inc	150 shares	82,911	89,096
Hasbro Inc	2,200 shares	59,449	103,796
Hewlett Packard Co	1,800 shares	58,775	75,780
Hj Heinz Co	800 shares	26,895	39,568
Honeywell International Inc	800 shares	21,583	42,528
I T T Corporation	2,175 shares	94,981	113,339
Illinois Tool Wks Inc	1,800 shares	92,957	96,120
Intel Corp	5,200 shares	103,022	109,356
Intercontinental Exchange Inc	400 shares	45,927	47,660
International Business Machines Corp	1,800 shares	197,920	264,168
J P Morgan Chase & Co	2,400 shares	93,318	101,808
Jacobs Engr Group Inc	800 shares	32,280	36,680
Johnson & Johnson	1,500 shares	96,139	92,775
Kellogg Co	800 shares	41,912	40,864
Kohls Corp	1,200 shares	54,990	65,208
Marathon Oil Corp	2,300 shares	62,186	85,169
Mattel Inc	2,000 shares	45,708	50,860
McDonalds Corp	3,200 shares	103,123	245,632
McKesson Corp	1,500 shares	69,681	105,570
Medco Health Solutions Inc	1,500 shares	75,829	91,905
Microsoft Corp	3,800 shares	122,154	106,058
Nike Inc	1,500 shares	67,228	128,130
Northern Tr Corp	1,200 shares	70,670	66,492
Occidental Pete Corp	2,000 shares	122,553	196,200
Oracle Corporation	7,925 shares	126,433	248,052
P G E Corp	1,800 shares	81,256	86,112
Parker Hannifin Corp	600 shares	43,206	51,780
Pepsico Inc	1,275 shares	54,611	83,296
Pfizer Inc	3,200 shares	55,925	56,032
Philip Morris Intl	1,800 shares	89,271	105,354
Praxair Inc	1,000 shares	67,517	95,470
Procter & Gamble Co	2,800 shares	178,042	180,124
Prudential Financial Inc	1,000 shares	54,157	58,710
Domestic Common Stocks (Continued)			
Qualcomm Inc	3,750 shares	\$ 141,992	\$ 185,587
Raytheon Com	1,800 shares	101,738	83,412
Republic Svcs Inc	5,100 shares	113,216	152,286
St Jude Med Inc	800 shares	29,520	34,200
Stanley Black Decker Inc	1,700 shares	75,275	113,679
State Str Corp	1,900 shares	85,193	88,046
Sysco Corp	800 shares	22,199	23,520
T Rowe Price Group Inc	1,000 shares	51,800	64,540

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Target Co	1,800 shares	82,445	108,234
Texas Instruments Inc	4,350 shares	120,649	141,375
Thermo Fisher Scientific Inc	800 shares	45,437	44,288
United Technologies Corp	2,250 shares	93,351	177,120
Verizon Communications Inc	3,275 shares	99,687	117,179
Wal Mart Stores Inc	1,300 shares	73,039	70,109
Walgreen Co	300 shares	10,905	11,688
Wells Fargo & Co	4,175 shares	127,379	129,383
Yum Brands Inc	1,200 shares	58,068	58,861
		6,657,632	8,536,668
Foreign Common Stocks			
Accenture Ltd	4,575 shares	121,229	221,842
Schlumberger Ltd	2,700 shares	103,377	225,450
Teva Pharmaceutical Inds	1,300 shares	71,453	67,769
Transocean Ltd	800 shares	72,086	55,608
		368,145	570,669
Total		\$ 50,636,220	\$ 53,151,970

Upper Valley Medical Center Amended and Restated Retirement Plan**Schedule of Reportable Transactions - Modified Cash Basis****Form 5500 Schedule H, Line 4j****EIN 34-1850683, Plan No. 001****Year Ended December 31, 2010**

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i) - A single transaction that amounts to more than 5 percent of the beginning value of total Plan assets:						
U.S. Bank, N.A.	First American Treasury Obligation Fund CI Y	\$ 2,462,299	\$ -	\$ 2,462,299	\$ 2,462,299	\$ -
Nuveen	Nuveen Equity Index Fund CI Y	\$ -	\$ 2,468,000	\$ 2,468,000	\$ 2,468,000	\$ -

Upper Valley Medical Center Amended and Restated Retirement Plan**Schedule of Reportable Transactions - Modified Cash Basis****Form 5500 Schedule H, Line 4j****EIN 34-1850683, Plan No. 001****Year Ended December 31, 2010**

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (iii) - A series of transactions with respect to securities of the same issue that amount in the aggregate to more than 5 percent of the beginning value of the total Plan assets:						
U.S. Bank, N.A.	First American Prime Obligation Fund CI Y					
	Purchases - 7	\$ 321,779	\$ -	\$ 321,779	\$ 321,779	\$ -
	Sales - 25		2,887,158	2,887,158	2,887,158	-
	First American Treasury Obligation Fund CI Y					
	Purchases - 308	\$ 18,684,887	\$ -	\$ 18,684,887	\$ 18,684,887	\$ -
	Sales - 223		16,451,462	16,451,462	16,451,462	-
	Nuveen Equity Index Fund CI Y					
	Purchases - 4	\$ 3,268,000	\$ -	\$ 3,268,000	\$ 3,268,000	\$ -
	Sales - 1		300,000	364,026	300,000	(64,026)

There were no Category (ii) or (iv) reportable transactions during the year.

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Upper Valley Medical Center Amended and Restated Retirement Plan
January 1, 2010 Valuation
EIN/PN: 34-1850683 / 001

Rates of Retirement

<u>Age(s)</u>	<u>Rate</u>
55	15%
56-59	5
60	10
61	15
62	30
63	20
64	60
65	20
70	100%

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

APPENDIX B

STATEMENT OF ACTUARIAL ASSUMPTIONS AND METHODS

Interest Rates

Funding: 24-month segment rates averaged through the end of September 2009:

- | | | |
|----|---|-------|
| a. | First Rate, Years 1-5 | 5.03% |
| b. | Second Rate, Years 5-20 | 6.73% |
| c. | Third Rate, Years 20+ | 6.82% |
| d. | Effective Interest Rate using the above rates | 6.69% |
| e. | Interest rate for developing expected value of assets, (limited by statute) | 6.69% |

Salary Scale

Future salaries are projected using the appropriate salary scale below. For accrued benefits actual individual pay histories have been used with missing years filled in using the appropriate salary scale below.

Funding: 4.50%

Mortality

RP-2000 static, non-generational Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA, male and female, with different rates for annuitants and nonannuitants.

Rates of Retirement

<u>Age</u>	<u>Rate</u>
55	15%
56-59	5
60	10
61	15
62	30
63-64	20
65	60
66-69	20
70	100

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

APPENDIX B (Continued)

Rates of Disability 50% of Table S-10 of the 11th Railroad Retirement Board Valuation (modified). Sample rates and ages are as follows.

<u>Age</u>	<u>Rate</u>
25	.03%
40	.06
55	.54

Rates of Turnover Based on Sarason's T-7 Table

Sample Rates:

<u>Age</u>	<u>Rate</u>
25	9.7%
40	7.8%
55	0.0%

Assumptions Made In Valuing Spouse's Benefit Eighty percent of the employees included in the valuation are assumed to be married. These percentages are used as the probabilities that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Optional Form Election All employees are assumed to elect the life annuity benefit.

Annual Increases to Maximum Benefits and Plan Compensation Limits Funding: 0.00%

Provision for Expenses The expected administrative (i.e. non-investment) expenses that will be paid from plan assets, which were assumed to equal actual expenses during the prior year, were included in the Target Normal Cost for minimum contribution purposes. No expenses are paid from the plan assets.

APPENDIX B (Continued)

Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.

Employees Valued

Only participants as of the valuation date were valued.

Schedule SB, Line 26 - Schedule of Active Participant Data

January 1, 2010 Valuation
Upper Valley Medical Center Amended and Restated Retirement Plan
(EIN: 34-1850683; PN: 001)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	-	-	-	-	-	-	-	-	-
25 to 29	1 (*)	7 (*)	-	-	-	-	-	-	-	-
30 to 34	-	23 (*)	11 (*)	-	-	-	-	-	-	-
35 to 39	4 (*)	29 (*)	26 (*)	6 (*)	-	-	-	-	-	-
40 to 44	-	29 (*)	30 (*)	24 (*)	8 (*)	-	-	-	-	-
45 to 49	1 (*)	21 (*)	23 (*)	29 (*)	17 (*)	6 (*)	1 (*)	1 (*)	-	-
50 to 54	1 (*)	30 (*)	16 (*)	18 (*)	23 (*)	27 (*)	13 (*)	14 (*)	1 (*)	-
55 to 59	-	17 (*)	7 (*)	24 (*)	27 (*)	22 (*)	15 (*)	13 (*)	7 (*)	-
60 to 64	1 (*)	10 (*)	5 (*)	8 (*)	9 (*)	23 (*)	9 (*)	9 (*)	5 (*)	2 (*)
65 to 69	1 (*)	-	2 (*)	2 (*)	5 (*)	2 (*)	3 (*)	2 (*)	1 (*)	1 (*)
70 & up	-	1 (*)	-	1 (*)	2 (*)	2 (*)	-	1 (*)	-	-

* Average compensation is not shown since there are fewer than 1,000 active participants in this plan

Schedule SB, line 25 – Change in Method
Upper Valley Medical Center Amended and Restated Retirement Plan
January 1, 2010 Valuation
EIN/PN: 34-1850683 / 001

***Changes in Methods
since the Last
Actuarial Valuation***

The full yield curve with the interest rates for October which were published in November was used for determining the funding target last year. These rates were updated to the segment interest rates for September 2009 for the current plan year.

Automatic approval for the change in interest rate methodology is granted per Reg. 1.430(h)(2)-1(h)(3).

APPENDIX A
SUMMARY OF PRINCIPAL PLAN PROVISIONS

<i>Plan Sponsor</i>	Upper Valley Medical Center Amended & Restated Retirement Plan
<i>EIN/PN</i>	34-1850683/001
<i>Effective Date</i>	January 1, 1987, last amended and restated effective January 1, 2008, last amended effective January 1, 2009.
<i>Plan Year</i>	The 12-month period beginning each January 1.
<i>Participation</i>	Any Employee who has completed one year of Vesting Service and has attained age 21 shall be eligible to participate on the following January 1 or July 1. Effective March 1, 2001, no new Participants are permitted in this Plan. Each Participant age 40 or older as of January 1, 2001, who affirmatively elected to continue participation under this Plan continues to accrue benefits under this Plan. Each other Participant had their Accrued Benefit under this Plan frozen as of March 1, 2001, with such benefit based on Average Monthly Compensation and Benefit Service as of March 1, 2001. If any former Employee or Former Participant is re-employed by the Company on or after March 1, 2001, such re-employed Employee may not participate in this Plan upon re-employment.
<i>Compensation</i>	Total compensation for the calendar year as limited by IRC Section 415(c)(3) including modifications by IRC Section 403(b), 401(k), 132(f)(4), 125, 402(h), and 457(b).
<i>Annualized Compensation</i>	Compensation for purposes of calculating the Average Monthly Compensation shall be annualized on a 2,080 hour basis. Hours for this purpose include hours actually worked, but not on-call hours or any other hours during which the Employee is not actually working, such as hours credited for a leave of absence or excused on census hours.
<i>Average Monthly Compensation</i>	1/60 th of annualized compensation for the highest 5 consecutive years of employment out of the last 10 years of employment. Such 10 year period shall end with the last Plan Year preceding the Plan Year in which the Employee terminates employment.
<i>Vesting Service</i>	One year of vesting service is earned for each Plan Year in which 1,000 hours are worked. All hours of service are included for this purpose.

APPENDIX A (Continued)

Benefit Service

For each plan year, Benefit Service is credited based on hours of service according to the following table:

<u>Hours in Plan Year</u>	<u>Credit</u>
Less than 1,000	0.0
1,000 - 1,199	0.6
1,200 - 1,399	0.7
1,400 - 1,599	0.8
1,600 - 1,799	0.9
1,800 or more	1.0

For each plan year for which hours of service is less than 1,000, and only a partial Plan Year is worked, Benefit Service is credited based on hours of service according to the following table:

<u>Hours in Partial Plan Year</u>	<u>Credit</u>
Less Than 200	0.0
200 - 399	0.1
400 - 599	0.2
600 - 799	0.3
800 - 999	0.4

Hours for this purpose include up to 500 hours each of hours credited because of excused on census or approved leave of absence.

Accrued Benefit

A monthly life annuity starting at age 65 equal to 1.0% of Average Monthly Compensation multiplied by the number of Years of Benefit Service.

Normal Retirement Benefit

Eligibility:

Age 65.

Monthly Benefit:

The Accrued Benefit.

APPENDIX A (Continued)

Early Retirement Benefit

Eligibility:

Age 55 and 5 years of Vesting Service.

Monthly Benefit:

The Accrued Benefit at Normal Retirement, or Early Retirement reduced by 5/9ths of one percent for each of the first 60 months and by 5/18ths of one percent for each of the next 60 months that Early Retirement Date precedes Normal Retirement.

Late Retirement Benefit

Eligibility:

Any age after Normal Retirement Age.

Monthly Benefit:

The Accrued Benefit.

Disability Retirement Benefit

Eligibility:

Completion of 5 years of Vesting Service and Permanent and Total disability at any age.

Monthly Benefit:

The Accrued Benefit as of date of disability payable at Normal Retirement, or a reduced amount at Early Retirement.

Termination Benefit

Eligibility:

Upon termination of employment prior to retirement after completion of at least 5 years of Vesting Service.

Monthly Benefit:

The vested benefit commences in full at age 65, or in a reduced amount under the early retirement provisions.

APPENDIX A (Continued)

<i>Death Benefit</i>	<u><i>Eligibility:</i></u> 100% vested and married for at least one year.
	<u><i>Monthly Benefit:</i></u> A monthly benefit for life commencing at the time the participant would have been eligible for retirement. The benefit is equal to 50% of the benefit vested on the date of death, adjusted as appropriate for early commencement and the 50% Joint and Survivor Annuity form of payment.
<i>Optional Forms of Payments</i>	Life Annuity Joint & Survivor with 50%, 66 2/3%, 75% or 100% continuation 5 Year or 10 Year Certain and Continuous The conversion factors are based on the 1984 Unisex Pension table and 7.50% interest.
<i>Benefits Available as Lump Sums</i>	This plan pays small benefit amounts (less than \$1,000) automatically, and participants can elect a lump sum if the lump sum value is between \$1,000 and \$5,000. Lump sums over \$5,000 are not available. The conversion factors used to calculate lump sums are based on the applicable mortality and applicable interest rates per IRC Section 417(e).
<i>Maximum Benefit Limit</i>	The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Date.
<i>Plan Compensation Limit</i>	The Internal Revenue Code Section 401(a)(17)(B) Maximum Compensation that can be recognized for benefit calculation purposes.
<i>Changes in Plan Provisions</i>	The automatic changes, if any, in the plan compensation limit and maximum benefit limit were recognized as amendments for funding purposes. Such changes are anticipated for ASC 715 expense purposes and are not treated as amendments.

Upper Valley Medical Center Amended and Restated Retirement Plan**Schedule of Reportable Transactions - Modified Cash Basis****Form 5500 Schedule H, Line 4j****EIN 34-1850683, Plan No. 001****Year Ended December 31, 2010**

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i) - A single transaction that amounts to more than 5 percent of the beginning value of total Plan assets:						
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Nuveen	Nuveen Equity Index Fund CI Y	\$ -	\$ 2,468,000	\$ 2,468,000	\$ 2,468,000	\$ -

Upper Valley Medical Center Amended and Restated Retirement Plan**Schedule of Reportable Transactions - Modified Cash Basis****Form 5500 Schedule H, Line 4j****EIN 34-1850683, Plan No. 001****Year Ended December 31, 2010**

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (iii) - A series of transactions with respect to securities of the same issue that amount in the aggregate to more than 5 percent of the beginning value of the total Plan assets:						
U.S. Bank, N.A.	First American Prime Obligation Fund CI Y					
	Purchases - 7	\$ 321,779	\$ -	\$ 321,779	\$ 321,779	\$ -
	Sales - 25		2,887,158	2,887,158	2,887,158	-
	First American Treasury Obligation Fund CI Y					
	Purchases - 308	\$ 18,684,887	\$ -	\$ 18,684,887	\$ 18,684,887	\$ -
	Sales - 223		16,451,462	16,451,462	16,451,462	-
	Nuveen Equity Index Fund CI Y					
	Purchases - 4	\$ 3,268,000	\$ -	\$ 3,268,000	\$ 3,268,000	\$ -
	Sales - 1		300,000	364,026	300,000	(64,026)

There were no Category (ii) or (iv) reportable transactions during the year.

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Mutual Funds			
Nuveen	Nuveen Equity Index Fund CI Y - 513,923 shares	\$ 11,505,659	\$ 11,033,937
Nuveen	Nuveen Small Cap Index Fund CI Y - 424,342 shares	5,131,329	4,659,274
Vanguard	Vanguard Intl Grwth Fd CI A D - 111,667 shares	6,178,581	6,869,748
		22,815,569	22,562,959
Cash and Cash Equivalents			
*U.S. Bank, N.A.	First American Treasury Obligations Fund CI Y	3,620,627	3,620,627
		3,620,627	3,620,627
U.S. Government Securities			
Fannie Mae	\$1,458 principal amount, 6.000% due February 1, 2017	1,524	1,587
Fannie Mae	\$2,539 principal amount, 6.000% due May 1, 2017	2,654	2,769
Fannie Mae	\$2,086 principal amount, 6.000% due June 1, 2017	2,181	2,276
Fannie Mae	\$2,395 principal amount, 6.500% due June 1, 2017	2,544	2,621
Fannie Mae	\$1,280 principal amount, 6.000% due June 1, 2017	1,338	1,396
Fannie Mae	\$22,046 principal amount, 4.500% due May 1, 2018	22,614	23,355
Fannie Mae	\$9,278 principal amount, 6.000% due May 1, 2018	9,725	10,118
Fannie Mae	\$24,651 principal amount, 4.500% due June 1, 2018	25,006	26,115
Fannie Mae	\$22,703 principal amount, 4.500% due November 1, 2018	22,774	24,051
Fannie Mae	\$76,533 principal amount, 4.500% due March 1, 2019	76,820	81,081
Fannie Mae	\$71,076 principal amount, 4.500% due January 1, 2020	68,333	75,208
Fannie Mae	\$127,698 principal amount, 5.000% due April 1, 2023	132,467	135,540
Fannie Mae	\$191,911 principal amount, 4.500% due November 25, 2023	196,499	201,643
Fannie Mae	\$20,324 principal amount, 5.500% due February 1, 2025	20,779	21,966
Fannie Mae	\$292,915 principal amount, 5.000% due September 01, 2025	312,046	311,489
Fannie Mae	\$2,005 principal amount, 7.500% due June 1, 2028	2,138	2,290
Fannie Mae	\$2,100 principal amount, 6.500% due August 1, 2028	3,028	3,262
Fannie Mae	\$2,198 principal amount, 6.500% due June 1, 2029	2,295	2,472
Fannie Mae	\$7,524 principal amount, 6.500% due April 1, 2032	7,861	8,460
Fannie Mae	\$30,395 principal amount, 7.000% due May 1, 2032	32,026	34,643
Fannie Mae	\$10,163 principal amount, 6.500% due June 1, 2032	10,585	11,427

U.S. Government Securities (continued)

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Form 5500 Schedule H, Line 4i

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Fannie Mae	\$7,630 principal amount, 6.500% due July 1, 2032	\$ 7,968	\$ 8,580
Fannie Mae	\$9,379 principal amount, 6.500% due July 1, 2032	9,815	10,546
Fannie Mae	\$136,886 principal amount, 6.000% due January 1, 2033	141,420	150,794
Fannie Mae	\$76,148 principal amount, 5.500% due February 1, 2033	77,977	81,986
Fannie Mae	\$3,482 principal amount, 6.500% due March 1, 2033	3,636	3,916
Fannie Mae	\$47,018 principal amount, 6.000% due August 25, 2033	46,430	47,726
Fannie Mae	\$38,970 principal amount, 5.500% due September 1, 2033	38,836	42,005
Fannie Mae	\$169,824 principal amount, 5.500% due November 1, 2033	184,100	183,053
Fannie Mae	\$56,451 principal amount, 5.500% due November 1, 2033	57,157	60,849
Fannie Mae	\$400,000 principal amount, 5.500% due December 25, 2033	396,063	432,268
Fannie Mae	\$21,722 principal amount, 5.500% due February 1, 2034	22,180	23,380
Fannie Mae	\$42,620 principal amount, 5.500% due April 1, 2034	43,193	45,941
Fannie Mae	\$231,273 principal amount, 5.000% due April 1, 2034	218,119	244,752
Fannie Mae	\$125,000 principal amount, 5.500% due May 25, 2034	122,578	131,406
Fannie Mae	\$99,678 principal amount, 5.500% due July 1, 2034	98,712	107,287
Fannie Mae	\$37,174 principal amount, 6.500% due September 1, 2034	37,923	41,683
Fannie Mae	\$92,481 principal amount, 5.500% due October 1, 2034	94,967	99,657
Fannie Mae	\$185,744 principal amount, 5.500% due March 1, 2035	187,602	201,375
Fannie Mae	\$9,224 principal amount, 6.000% due May 1, 2035	9,456	10,066
Fannie Mae	\$23,984 principal amount, 5.000% due July 1, 2035	23,752	25,322
Fannie Mae	\$7,725 principal amount, 6.000% due September 1, 2035	7,916	8,430
Fannie Mae	\$332,065 principal amount, 5.000% due November 1, 2035	317,433	350,588
Fannie Mae	\$41,831 principal amount, 6.000% due January 1, 2036	42,243	45,859
Fannie Mae	\$60,247 principal amount, 5.500% due February 1, 2036	58,338	64,790
Fannie Mae	\$90,687 principal amount, 6.000% due June 1, 2036	90,036	98,910
U.S. Government Securities (continued)			
Fannie Mae	\$185,032 principal amount, 6.000%		

Upper Valley Medical Center Amended and Restated Retirement Plan

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Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost		Market Value	
	due June 1, 2036	\$	185,408	\$	203,831
Fannie Mae	\$20,179 principal amount, 6.500%				
	due August 1, 2036		20,488		22,386
Fannie Mae	\$57,681 principal amount, 7.000%				
	due September 1, 2036		59,429		65,321
Fannie Mae	\$57,446 principal amount, 6.500%				
	due November 1, 2036		58,442		64,055
Fannie Mae	\$305,766 principal amount, 5.500%				
	due May 1, 2037		328,412		330,732
Fannie Mae	\$78,438 principal amount, 5.500%				
	due June 1, 2037		77,592		83,984
Fannie Mae	\$116,231 principal amount, 6.000%				
	due January 1, 2038		122,714		126,479
Fannie Mae	\$130,900 principal amount, 5.500%				
	due August 1, 2038		136,402		142,488
Fannie Mae	\$103,626 principal amount, 6.000%				
	due November 1, 2038		109,827		112,729
Fannie Mae	\$316,694 principal amount, 4.500%				
	due June 1, 2039		307,985		326,857
Fannie Mae	\$87,027 principal amount, 4.500%				
	due August 1, 2039		90,862		89,820
Fannie Mae	\$93,314 principal amount, 4.500%				
	due August 1, 2039		97,090		96,163
Fannie Mae	\$122,936 principal amount, 4.500%				
	due May 1, 2040		128,276		126,687
Fannie Mae	\$170,093 principal amount, 5.000%				
	due June 1, 2040		180,192		178,943
Fannie Mae	\$68,614 principal amount, 4.000%				
	due August 1, 2040		70,812		68,326
Federal Home Loan	\$35,067 principal amount, 5.000%				
	due April 1, 2018		35,207		37,396
Federal Home Loan	\$450,000 principal amount, 4.875%				
	due June 13, 2018		456,694		503,253
Federal Home Loan	\$46,350 principal amount, 5.000%				
	due August 1, 2018		46,538		49,428
Federal Home Loan	\$38,176 principal amount, 4.500%				
	due September 1, 2018		37,962		40,300
Federal Home Loan	\$249,632 principal amount, 4.000%				
	due May 1, 2019		257,277		258,916
Federal Home Loan	\$190,000 principal amount, 5.000%				
	due February 15, 2025		184,300		200,858
Federal Home Loan	\$28,451 principal amount, 7.000%				
	due June 1, 2026		29,291		32,216
Federal Home Loan	\$24,343 principal amount, 6.500%				
	due January 1, 2029		25,389		27,371
Federal Home Loan	\$3,600 principal amount, 6.500%				
	due July 1, 2032		3,748		4,047
Federal Home Loan	\$75,000 principal amount, 6.250%				
	due July 15, 2032		86,507		91,615
U.S. Government Securities (continued)					
Federal Home Loan	\$182,942 principal amount, 5.500%				
	due July 15, 2032	\$	174,395	\$	197,937

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Federal Home Loan	\$1,650 principal amount, 6.500% due September 1, 2032	1,721	1,855
Federal Home Loan	\$30,817 principal amount, 5.500% due September 1, 2033	31,038	33,110
Federal Home Loan	\$39,192 principal amount, 5.000% due December 1, 2033	39,027	41,374
Federal Home Loan	\$34,211 principal amount, 4.500% due June 1, 2034	33,163	35,293
Federal Home Loan	\$33,865 principal amount, 4.500% due September 1, 2034	32,828	34,936
Federal Home Loan	\$22,275 principal amount, 6.000% due February 1, 2035	22,905	24,376
Federal Home Loan	\$175,000 principal amount, 5.500% due March 15, 2035	169,976	189,047
Federal Home Loan	\$45,396 principal amount, 6.000% due August 1, 2035	46,588	49,592
Federal Home Loan	\$59,142 principal amount, 5.500% due October 1, 2035	58,550	63,395
Federal Home Loan	\$62,923 principal amount, 5.500% due March 1, 2036	62,284	67,449
Federal Home Loan	\$229,100 principal amount, 5.000% due July 1, 2036	214,557	240,708
Federal Home Loan	\$192,126 principal amount, 6.000% due July 1, 2037	193,387	211,684
Federal Home Loan	\$83,149 principal amount, 6.500% due August 1, 2037	88,969	92,948
Federal Home Loan	\$123,208 principal amount, 4.500% due August 1, 2040	128,945	126,373
Ginnie Mae	\$41,185 principal amount, 5.500% due July 20, 2033	41,468	44,608
U S Treas Bd Strip	\$250,000 principal amount due February 15, 2018	152,893	204,167
U S Treas Bd Strip	\$430,000 principal amount due November 15, 2027	158,539	206,034
U S Treasury IP	\$376,061 principal amount, 1.250% due July 15, 2020	385,982	385,053
U S Treasury Notes	\$945,000 principal amount, 3.500% due May 15, 2020	995,915	968,039
U S Treasury Notes	\$220,000 principal amount, 2.625% due November 15, 2020	208,898	207,522
		9,671,959	10,214,639
Municipal Securities			
Delaware St Build	\$85,000 principal amount, 3.250% due July 1, 2020	84,927	80,003
Mississippi St Ser	\$45,000 principal amount, 2.095% due November 1, 2015	45,000	43,568
Municipal Securities (continued)			
University Tx Univ	\$50,000 principal amount, 4.794% due August 15, 2046	\$ 50,000	\$ 45,490
Utah St Build	\$95,000 principal amount, 3.289%		

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Form 5500 Schedule H, Line 4i

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Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Virginia College	due July 1, 2020	95,000	90,502
	\$85,000 principal amount, 2.700%		
	due February 1, 2017	85,241	81,360
		360,168	340,923
Foreign Obligations			
Canadian Natl	\$80,000 principal amount, 6.250%		
	due March 15, 2038	79,653	88,394
Husky Energy Inc	\$70,000 principal amount, 5.900%		
	due June 15, 2014	76,544	76,929
Rio Tinto Fin	\$80,000 principal amount, 3.500%		
	due November 2, 2020	79,380	75,942
Shell Intl Fin	\$145,000 principal amount, 4.375%		
	due March 25, 2020	144,861	152,085
Trans Canada	\$45,000 principal amount, 5.850%		
	due March 15, 2036	48,290	47,123
Tyco Intl Financ Tyc	\$65,000 principal amount, 4.125%		
	due October 15, 2014	67,801	68,925
		496,529	509,398
Corporate Obligations			
1st Financial Bank	\$105,000 principal amount, 3.000%		
	due April 17, 2017	104,582	103,915
Ally Auto	\$80,000 principal amount, 1.350%		
	due December 15, 2015	79,985	78,184
Amerquest Mtg	\$57,134 principal amount, 4.965%		
	due November 25, 2033	54,599	58,313
AT&T Inc	\$35,000 principal amount, 6.300%		
	due January 15, 2038	34,846	36,923
Autozone Inc.	\$90,000 principal amount, 4.000%		
	due November 15, 2020	87,278	85,002
Banc of America	\$93,661 principal amount, 5.750%		
	due August 25, 2034	91,085	96,295
Bank of America	\$175,000 principal amount, 5.625%		
	due October 14, 2016	175,179	181,440
BB & T Corp	\$95,000 principal amount, 5.250%		
	due November 01, 2019	95,989	98,406
Bear Stearns Coml	\$130,000 principal amount, 5.200%		
	due January 12, 2041	130,715	139,049
Berkshire Hathwy	\$155,000 principal amount, 3.200%		
	due February 11, 2015	154,871	159,941
Boeing Co	\$75,000 principal amount, 3.750%		
	due November 20, 2016	73,798	78,473
Burlington North	\$90,000 principal amount, 5.650%		
	due May 1, 2017	97,575	100,306
Corporate Obligations (continued)			
CA Inc	\$60,000 principal amount, 5.375%		
	due December 1, 2019	\$ 61,367	\$ 62,033
Cardinal Health	\$45,000 principal amount, 5.500%		
	due June 15, 2013	49,477	48,744

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis Form 5500 Schedule H, Line 4i EIN 34-1850683, Plan No. 001 December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Cisco Systems	\$125,000 principal amount, 4.950% due February 15, 2019	124,718	136,220
Citigroup Deutche	\$190,000 principal amount, 5.2219% due July 15, 2044	203,434	204,480
Citigroup Inc	\$70,000 principal amount, 6.125% due November 21, 2017	62,068	76,712
Clorox	\$75,000 principal amount, 3.550% due November 1, 2015	75,204	77,176
CNH Equipment Trust	\$190,000 principal amount, 2.490% due January 15, 2016	193,793	194,266
Coca Cola Enter	\$115,000 principal amount, 4.250% due March 1, 2015	127,573	123,925
Comcast Corp	\$70,000 principal amount, 5.700% due July 1, 2019	75,718	76,528
Conocophillps	\$65,000 principal amount, 5.900% due May 15, 2038	64,754	71,496
Countrywide Alt Ln	\$73,057 principal amount, 5.000% due February 25, 2020	68,673	72,513
Cred Suis NY Mtn	\$185,00 principal amount, 5.300% due August 13, 2019	194,172	195,410
CS First Boston Mtg	\$120,981 principal amount, 5.250% due October 25, 2019	121,888	124,204
CVS Caremark Corp	\$70,000 principal amount, 5.750% due June 1, 2017	74,899	77,886
Cwalt Inc	\$18,872 principal amount, 6.500% due September 25, 2034	19,447	18,352
Cwmbs Inc	\$46,997 principal amount, 5.250% due August 25, 2024	46,997	45,760
Duke Energy Ind	\$115,000 principal amount, 3.750% due July 15, 2020	115,231	112,268
Equity One Abs Inc	\$44,036 principal amount, 4.145% due April 25, 2034	44,036	42,165
Florida Pwr & Lt	\$70,000 principal amount, 5.960% due April 1, 2039	69,949	77,812
Gazprom Intl	\$17,391 principal amount, 7.201% due February 1, 2020	17,393	18,478
GE Capital Credit	\$185,000 principal amount, 3.960% due July 15, 2015	192,082	192,173
Gen Elec Cap Corp	\$155,000 principal amount, 4.800% due May 1, 2013	142,045	165,709
General Mills Inc	\$70,000 principal amount, 5.650% due February 15, 2019	72,566	77,928
Goldman Sachs Group	\$60,000 principal amount, 3.250% due June 15, 2012	59,767	62,285
Goldman Sachs Grp	\$90,000 principal amount, 6.125% due February 15, 2033	91,654	95,352
Corporate Obligations (continued)			
Green Tree Finl Corp	\$10,821 principal amount, 7.600% due June 15, 2025	\$ 11,988	\$ 10,957
Green Tree Finl Corp	\$9,777 principal amount, 7.750% due July 15, 2027	10,755	10,013
Green Tree Finl Corp	\$47,320 principal amount, 7.320%		

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	due July 15, 2028	50,750	49,641
Greenwich Cap Coml	\$83,658 principal amount, 4.883% due June 10, 2036	84,076	84,552
Gs Mtg Secs Corp li	\$34752 principal amount, 4.602% due August 10, 2038	34,925	34,927
Homebanc Mortgage	\$18,110 principal amount, 2.69063% due April 25, 2037	18,262	11,986
IBM Corp	\$50,000 principal amount, 5.875% due November 29, 2032	53,211	56,355
J P Morgan Mtg	\$264,513 principal amount, 5.8179% due June 25, 2036	264,885	234,076
J P Morgan Mtg Tr	\$225,000 principal amount, 4.500% due February 25, 2034	226,687	228,157
J P Morgan Mtg Tr	\$63,198 principal amount, 4.8516% due February 25, 2035	63,495	59,179
J P Morgan Mtg Tr	\$100,000 principal amount, 5.20193% due August 25, 2035	98,234	90,102
J P Morgan Chase & Co	\$65,000 principal amount, 6.000% due January 15, 2018	70,257	72,589
J P Morgan Chase & Co	\$185,000 principal amount, 5.22904% due December 15, 2044	197,314	199,164
Kinder Morgan En Kmp	\$750,000 principal amount, 5.625% due February 15, 2015	81,667	82,310
Kroger Co	\$45,000 principal amount, 7.500% due January 15, 2014	45,424	51,883
Lockheed Martin Corp	\$63,000 principal amount, 5.720% due June 1, 2040	63,000	65,759
Marathon Oil Corp	\$70,000 principal amount, 6.500% due February 15, 2014	69,709	78,800
Metlife Inc	\$70,000 principal amount, 6.750% due June 1, 2016	70,468	81,197
Mid State Trust	\$109,461 principal amount, 7.079% due January 15, 2040	94,137	97,564
Morgan Stanley	\$40,000 principal amount, 5.750% due October 18, 2016	42,145	42,659
Morgan Stanley	\$100,000 principal amount, 5.10051% due December 15, 2041	95,250	94,914
Nissan Auto Recv	\$70,000 principal amount, 1.310% due September 15, 2016	69,988	69,549
Prudential Fin Mtn	\$75,000 principal amount, 3.875% due January 14, 2015	75,087	77,376
Residential Accred	\$50,000 principal amount, 5.000% due May 25, 2033	42,750	44,327
Residential Ast Mtg	\$97,193 principal amount, 4.96871% due September 25, 2033	95,295	98,351
Corporate Obligations (continued)			
RPM Intl Inc	\$70,000 principal amount, 6.250% due December 15, 2013	\$ 78,243	\$ 76,752
Southern Pwr Co	\$95,000 principal amount, 6.250% due July 15, 2012	99,466	102,138
Suntrust Bank	\$65,000 principal amount, 3.000% due November 16, 2011	65,317	66,479

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Target Corp	\$40,000 principal amount, 5.375% due May 1, 2017	38,771	44,827
Time Warner Cable	\$70,000 principal amount, 5.850% due May 1, 2017	74,861	78,106
Union Pac Corp	\$60,000 principal amount, 5.450% due January 31, 2013	60,463	64,810
United Health Grp	\$90,000 principal amount, 4.875% due February 15, 2013	96,434	95,818
Vanderbilt Acquisitions	\$26,475 principal amount, 6.570% due May 7, 2027	28,063	28,153
Verizon Global Fdg	\$130,000 principal amount, 4.900% due September 15, 2015	140,796	142,761
Virginia Elec Power	\$35,000 principal amount, 6.350% due November 30, 2037	34,921	40,064
Wachovia Bk Coml	\$185,000 principal amount, 5.7379% due May 15, 2043	184,892	198,424
Wachovia Bk Natl As	\$35,000 principal amount, 5.850% due February 1, 2037	34,414	35,224
Walt Disney Co	\$50,000 principal amount, 4.700% due December 1, 2012	49,886	53,598
Yum Brands Inc	\$80,000 principal amount, 3.875% due November 1, 2020	79,898	76,424
		6,645,591	6,796,087
Domestic Common Stocks			
3M Co	1,175 shares	77,930	101,403
Abbott Labs	2,300 shares	124,181	110,193
Aflac	2,000 shares	64,016	112,860
Allergan Inc	600 shares	41,425	41,202
Altria Group Inc	800 shares	15,927	19,696
Amerisourcebergen Corp	3,300 shares	103,826	112,596
Amgen Inc	1,300 shares	78,749	71,370
Anadarko Petroleum Corp	1,100 shares	63,861	83,776
Apache Corp	1,700 shares	79,888	202,691
Apple Inc	650 shares	46,625	209,664
AT&T	2,800 shares	82,933	82,264
Autozone Inc	225 shares	36,230	61,333
B M C Software Inc	1,500 shares	64,995	70,710
Baxter Intl Inc	800 shares	54,749	40,496
B B & T Corp	2,800 shares	78,260	73,612
Best Buy Co Inc	1,000 shares	41,225	34,290
Blackrock Inc	100 shares	22,800	19,058
Boeing Co	1,300 shares	92,023	84,838
Chevron Corp	1,300 shares	81,822	118,625
Cisco Sys Inc	5,000 shares	138,013	101,150
Cognizant Tech Solutions Crp	2,300 shares	96,287	168,567
Domestic Common Stocks (Continued)			
Conocophillips	2,800 shares	\$ 127,354	\$ 190,680
Costco Whsl Corp	2,000 shares	93,005	144,420
Disney Walt Co	1,300 shares	40,518	48,763
Dollar Tree Inc	2,350 shares	64,739	131,788
Ecolab Inc	2,000 shares	88,995	100,840
Emerson Elec Co	1,800 shares	94,412	102,906
Equinix Inc	1,000 shares	74,102	81,260

Upper Valley Medical Center Amended and Restated Retirement Plan

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Exelon Corporation	2,200 shares	92,122	91,608
Express Scripts Inc	3,000 shares	91,703	162,150
Exxon Mobil Corp	1,000 shares	81,866	73,120
F5 Networks Inc	600 shares	56,493	78,096
Fiserv Inc	1,625 shares	70,177	95,160
Fluor Corp	800 shares	40,270	53,008
Franklin Res Inc	850 shares	77,941	94,528
Freeport-Mcmoran Copper & Gold	900 shares	72,871	108,081
Frontier Communications Corp	834 shares	6,931	8,115
General Dynamics Corp	300 shares	21,216	21,288
Goldman Sachs Group Inc	400 shares	52,650	67,264
Google Inc	150 shares	82,911	89,096
Hasbro Inc	2,200 shares	59,449	103,796
Hewlett Packard Co	1,800 shares	58,775	75,780
Hj Heinz Co	800 shares	26,895	39,568
Honeywell International Inc	800 shares	21,583	42,528
I T T Corporation	2,175 shares	94,981	113,339
Illinois Tool Wks Inc	1,800 shares	92,957	96,120
Intel Corp	5,200 shares	103,022	109,356
Intercontinental Exchange Inc	400 shares	45,927	47,660
International Business Machines Corp	1,800 shares	197,920	264,168
J P Morgan Chase & Co	2,400 shares	93,318	101,808
Jacobs Engr Group Inc	800 shares	32,280	36,680
Johnson & Johnson	1,500 shares	96,139	92,775
Kellogg Co	800 shares	41,912	40,864
Kohls Corp	1,200 shares	54,990	65,208
Marathon Oil Corp	2,300 shares	62,186	85,169
Mattel Inc	2,000 shares	45,708	50,860
McDonalds Corp	3,200 shares	103,123	245,632
McKesson Corp	1,500 shares	69,681	105,570
Medco Health Solutions Inc	1,500 shares	75,829	91,905
Microsoft Corp	3,800 shares	122,154	106,058
Nike Inc	1,500 shares	67,228	128,130
Northern Tr Corp	1,200 shares	70,670	66,492
Occidental Pete Corp	2,000 shares	122,553	196,200
Oracle Corporation	7,925 shares	126,433	248,052
P G E Corp	1,800 shares	81,256	86,112
Parker Hannifin Corp	600 shares	43,206	51,780
Pepsico Inc	1,275 shares	54,611	83,296
Pfizer Inc	3,200 shares	55,925	56,032
Philip Morris Intl	1,800 shares	89,271	105,354
Praxair Inc	1,000 shares	67,517	95,470
Procter & Gamble Co	2,800 shares	178,042	180,124
Prudential Financial Inc	1,000 shares	54,157	58,710
Domestic Common Stocks (Continued)			
Qualcomm Inc	3,750 shares	\$ 141,992	\$ 185,587
Raytheon Com	1,800 shares	101,738	83,412
Republic Svcs Inc	5,100 shares	113,216	152,286
St Jude Med Inc	800 shares	29,520	34,200
Stanley Black Decker Inc	1,700 shares	75,275	113,679
State Str Corp	1,900 shares	85,193	88,046
Sysco Corp	800 shares	22,199	23,520
T Rowe Price Group Inc	1,000 shares	51,800	64,540

Upper Valley Medical Center Amended and Restated Retirement Plan

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500 Schedule H, Line 4i

EIN 34-1850683, Plan No. 001

December 31, 2010

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Market Value
Target Co	1,800 shares	82,445	108,234
Texas Instruments Inc	4,350 shares	120,649	141,375
Thermo Fisher Scientific Inc	800 shares	45,437	44,288
United Technologies Corp	2,250 shares	93,351	177,120
Verizon Communications Inc	3,275 shares	99,687	117,179
Wal Mart Stores Inc	1,300 shares	73,039	70,109
Walgreen Co	300 shares	10,905	11,688
Wells Fargo & Co	4,175 shares	127,379	129,383
Yum Brands Inc	1,200 shares	58,068	58,861
		6,657,632	8,536,668
Foreign Common Stocks			
Accenture Ltd	4,575 shares	121,229	221,842
Schlumberger Ltd	2,700 shares	103,377	225,450
Teva Pharmaceutical Inds	1,300 shares	71,453	67,769
Transocean Ltd	800 shares	72,086	55,608
		368,145	570,669
Total		\$ 50,636,220	\$ 53,151,970

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2010**This Form is Open to Public
Inspection**For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan Upper Valley Medical Center Amended and Restated Retirement Plan	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Upper Valley Medical Center	D Employer Identification Number (EIN) 34-1850683
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other	
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500	

Part I Basic Information

1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2010</u>		
2 Assets:		
a Market value.....	2a	48,975,975
b Actuarial value.....	2b	51,050,624
3 Funding target/participant count breakdown	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a 650	20,034,826
b For terminated vested participants.....	3b 693	12,437,497
c For active participants:		
(1) Non-vested benefits.....	3c(1)	441,853
(2) Vested benefits.....	3c(2)	24,053,769
(3) Total active.....	3c(3) 679	24,495,622
d Total.....	3d 2,022	56,967,945
4 If the plan is at-risk, check the box and complete items (a) and (b) ☐		
a Funding target disregarding prescribed at-risk assumptions.....	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor.....	4b	
5 Effective interest rate.....	5	6.69 %
6 Target normal cost.....	6	1,425,234

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		09/15/2011
Signature of actuary		Date
Neville A. Arjani		11-02781
Type or print name of actuary		Most recent enrollment number
Findley Davies, Inc.		(216) 875-1900
Firm name		Telephone number (including area code)
1300 East Ninth Street Suite 850		
Cleveland OH 44114-1516		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2010
v.092308.1

Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	6,179,742	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8)	6,179,742	0
10 Interest on item 9 using prior year's actual return of <u>17.37</u> %	1,073,421	
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		3,291,360
b Interest on (a) using prior year's effective rate of <u>8.18</u> %		269,233
c Total available at beginning of current plan year to add to prefunding balance		3,560,593
d Portion of (c) to be added to prefunding balance		0
12 Reduction in balances due to elections or deemed elections	1,776,895	0
13 Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	5,476,268	0

Part III Funding percentages

14 Funding target attainment percentage	14	80.00 %
15 Adjusted funding target attainment percentage	15	80.00 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	94.71 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2010	319,801				
07/15/2010	319,801				
10/08/2010	319,801				
12/22/2010	319,801				
09/07/2011	1,932,877				
Totals ▶			18(b)	3,212,081	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 2,960,902

20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of Quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions used to determine funding target and target normal cost**21** Discount rate:**a** Segment rates:1st segment:
5.03 %2nd segment:
6.73 %3rd segment:
6.82 %☐ N/A, full yield curve used**b** Applicable month (enter code)**21b**

4

22 Weighted average retirement age**22**

62

23 Mortality table(s) (see instructions)☐

Prescribed - combined

☒

Prescribed - separate

☐

Substitute

Part VI Miscellaneous items**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**27** If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.**27****Part VII Reconciliation of unpaid minimum required contributions for prior years****28** Unpaid minimum required contribution for all prior years**28**

0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....**29**

0

30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29).....**30**

0

Part VIII Minimum required contribution for current year**31** Target normal cost, adjusted, if applicable (see instructions).....**31**

1,425,234

32 Amortization installments:

Outstanding Balance

Installment

a Net shortfall amortization installment

9,114,871

1,533,960

b Waiver amortization installment

0

0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount**33****34** Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33).....**34**

2,959,194

Carryover balance

Prefunding balance

Total balance

35 Balances used to offset funding requirement

0

0

0

36 Additional cash requirement (item 34 minus item 35).....**36**

2,959,194

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....**37**

2,960,902

38 Interest-adjusted excess contributions for current year (see instructions).....**38**

1,708

39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....**39**

0

40 Unpaid minimum required contribution for all years**40**

0

Schedule SB, line 32 – Schedule of Amortization Bases
Upper Valley Medical Center Amended and Restated Retirement Plan
January 1, 2010 Valuation
EIN/PN: 34-1850683 / 001

EXHIBIT VII
SCHEDULE OF AMORTIZATION BASES

Plan Year Beginning		1/01/2010		
	Date Established	Present Value of Payments	Remaining Years	Amortization Installment
Shortfall Amortization Bases	1/01/2010	<u>\$ 9,114,871</u>	7	<u>\$ 1,533,960</u>
	Total	\$ 9,114,871		\$ 1,533,960
Waiver Amortization Bases	1/01/2010	\$ 0		\$ 0