

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), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089
		2011
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</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>RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER</u>	1b Three-digit plan number (PN) ► <u>001</u> 1c Effective date of plan <u>10/01/1967</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>FISHER-TITUS MEDICAL CENTER</u> <u>272 BENEDICT AVE</u> <u>NORWALK, OH 44857-2374</u>	2b Employer Identification Number (EIN) <u>34-4430716</u> 2c Sponsor's telephone number <u>419-668-8101</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>10/16/2012</u>	<u>DUANE L. WOODS, JR</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 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") FISHER-TITUS MEDICAL CENTER 272 BENEDICT AVE NORWALK, OH 44857-2374	3b Administrator's EIN 34-4430716 3c Administrator's telephone number 419-668-8101
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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
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5 Total number of participants at the beginning of the plan year	5	352
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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	254
b Retired or separated participants receiving benefits.....	6b	57
c Other retired or separated participants entitled to future benefits.....	6c	39
d Subtotal. Add lines 6a , 6b , and 6c	6d	350
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	4
f Total. Add lines 6d and 6e	6f	354
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	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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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

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)	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	(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 2011 This Form is Open to Public Inspection
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

▶ **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>RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER</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>FISHER-TITUS MEDICAL CENTER</u>	D Employer Identification Number (EIN) <u>34-4430716</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>2011</u>	
2 Assets:	
a Market value	2a <u>28708158</u>
b Actuarial value	2b <u>27333543</u>
3 Funding target/participant count breakdown:	
	(1) Number of participants (2) Funding Target
a For retired participants and beneficiaries receiving payment	3a <u>49</u> <u>5717421</u>
b For terminated vested participants	3b <u>38</u> <u>1161468</u>
c For active participants:	
(1) Non-vested benefits	3c(1) <u>102818</u>
(2) Vested benefits	3c(2) <u>20351803</u>
(3) Total active	3c(3) <u>265</u> <u>20454621</u>
d Total	3d <u>352</u> <u>27333510</u>
4 If the plan is in at-risk status, check the box and complete lines (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 in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>6.38 %</u>
6 Target normal cost	6 <u>1522522</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>09/18/2012</u>
Signature of actuary	Date
<u>MATTHEW R. KLEIN, F.S.A.</u>	<u>11-06865</u>
Type or print name of actuary	Most recent enrollment number
<u>FINDLEY DAVIES, INC.</u>	<u>216-875-1900</u>
Firm name	Telephone number (including area code)
<u>1300 EAST NINTH STREET, SUITE 850</u> <u>CLEVELAND, OH 44114-1516</u>	
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) 2011
v.012611

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 (line 13 from prior year)	34006	4721233
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	34006	4721233
10 Interest on line 9 using prior year's actual return of <u>8.85</u> %	3010	417829
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38 from prior year)		953220
b Interest on (a) using prior year's effective rate of <u>6.66</u> % except as otherwise provided (see instructions)		63484
c Total available at beginning of current plan year to add to prefunding balance		1016704
d Portion of (c) to be added to prefunding balance		290624
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	37016	5429686

Part III Funding percentages		
14 Funding target attainment percentage	14	80.00 %
15 Adjusted funding target attainment percentage	15	100.00 %
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	86.20 %
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
02/22/2011	200000		11/07/2011	200000	
03/14/2011	200000		12/05/2011	250000	
06/15/2011	200000		01/19/2012	200000	
07/15/2011	200000		01/31/2012	200000	
09/12/2011	134484		03/05/2012	200000	
10/11/2011	200000		04/05/2012	200000	
			Totals ►	18(b)	3384484
				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 contributions 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	3185715
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 II		Beginning of year carryover and prefunding balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)		
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		
9	Amount remaining (line 7 minus line 8)		
10	Interest on line 9 using prior year's actual return of _____%		
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		
b	Interest on (a) using prior year's effective rate of _____% except as otherwise provided (see instructions)		
c	Total available at beginning of current plan year to add to prefunding balance.....		
d	Portion of (c) to be added to prefunding balance.....		
12	Other reductions in balances due to elections or deemed elections		
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....		

Part III		Funding percentages	
14	Funding target attainment percentage.....	14	%
15	Adjusted funding target attainment percentage.....	15	%
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	%
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
04/27/2012	200000	0			
06/06/2012	200000	0			
07/11/2012	200000	0			
07/30/2012	200000	0			
09/05/2012	200000	0			
			Totals ▶	18(b)	18(c)

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 contributions 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
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

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

21 Discount rate:				
a Segment rates:	1st segment: 3.78%	2nd segment: 6.31%	3rd segment: 6.57%	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 65
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 contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	1522522	
b Excess assets, if applicable, but not greater than 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
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 (lines 31a - 31b + 32a + 32b - 33)...	34	1522522	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	1522522	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	3185715	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	1663193	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42		
43 Excess installment acceleration amount to be carried over to future plan years	43	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
		2011
		This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 FISHER-TITUS MEDICAL CENTER	D Employer Identification Number (EIN) 34-4430716

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

UBS FINANCIAL SERVICES, INC.

13-2638166

(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 50 62 65 99	TRUSTEE	64599	Yes ☒ No ☐	Yes ☒ No ☐	107	Yes ☒ No ☐

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

FINDLEY DAVIES, INC.

34-1213174

(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?
11 17 50	NONE	48364	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WILMINGTON TRUST

51-0099033

(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 28 50	TRUSTEE	30321	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

SAGE ADVISORY SERVICES, LTD. CO.

5900 SOUTHWEST PKWY # 1-100
AUSTIN, TX 78735

(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?
28 50	NONE	21118	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAMBIAR INVESTORS, INC.

2401 E. SECOND AVENUE
DENVER, CO 80206

(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?
28 50	NONE	9295	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GLOBAL CURRENTS INVESTMENT MANAGEME

2 RIGHTER PARKWAY
WILMINGTON, DE 19803

(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?
28 50	NONE	9074	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

WICKENS HERZER PANZA COOK & BATISTA

35765 CHESTER ROAD
AVON, OH 44011

(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?
29 50	NONE	8281	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SANDS CAPITAL MANAGEMENT

1101 WILSON BOULEVARD
ARLINGTON, VA 22209

(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?
28 50	NONE	7175	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HIRTH, NORRIS & GARRISON, LLP

31-1158488

(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?
10 50	NONE	6700	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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2011 This Form is Open to Public Inspection.	
For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011					
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 FISHER-TITUS MEDICAL CENTER				D Employer Identification Number (EIN) 34-4430716	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: STRATEGIC BOND PORTFOLIO					
b Name of sponsor of entity listed in (a): UBS FINANCIAL SERVICES					
c EIN-PN 26-3783650-914		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6960002	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT	

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 FISHER-TITUS MEDICAL CENTER	D Employer Identification Number (EIN) 34-4430716	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	865516	1800000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	66242	54070
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	830944	2211757
(2) U.S. Government securities.....	1c(2)	5742799	5728105
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	3203192	3720799
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	8385483	7876502
(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)	6585738	6960002
(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)	3047759	3449225
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	28727673	31800460

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	28727673	31800460
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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)	3384484	
(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)		3384484
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)	149292	
(C) Corporate debt instruments	2b(1)(C)	105094	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	41056	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		295442
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	166251	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	111034	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		277285
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	16154268	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	16156416	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-2148

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	-78603	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-78603
(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)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		3876460

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	569773	
(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)		569773
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)	98138	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	123417	
(4) Other	2i(4)	12345	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		233900
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		803673

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3072787
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: HIRTH, NORRIS & GARRISON, LLP (2) EIN: 31-1158488

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		5000000
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.			
4n			

- 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 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan <u>RETIREMENT PLAN FOR EMPLOYEES OF FISHER-TITUS MEDICAL CENTER</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FISHER-TITUS MEDICAL CENTER</u>	D Employer Identification Number (EIN) <u>34-4430716</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
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>38-2636152</u> <u>25-1926550</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>0</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)
----------------	--

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☒ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

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

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

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

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

Schedule R (Form 5500) 2011
v.012611

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: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER

FINANCIAL STATEMENTS

* * * * *

DECEMBER 31, 2011 AND 2010

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Partners

JAMES E. NORRIS, CPA
JODI L. GARRISON, CPA
TIMOTHY R. HARRIS, CPA

CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Pension Advisory Committee of
Retirement Plan for Employees of Fisher-Titus Medical Center

We were engaged to audit the financial statements of the Retirement Plan for Employees of Fisher-Titus Medical Center as of December 31, 2011 and 2010, and for the years then ended, and the supplemental schedules as of and for the year ended December 31, 2011, as listed in the accompanying index. These financial statements and 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 3, which was certified by PNC Bank, UBS Financial Services, Inc, Wilmington Trust and BlackRock, Inc. the custodians of the assets of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustees hold the Plan's investment assets and execute investment transactions. The plan administrator and trustees have obtained a certification from the custodians as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator and trustees by the custodians is complete and accurate.

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 supplemental schedules are presented for the purpose of additional analysis and are not a required part of the financial statements but are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. 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 trustees, 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 cursive script, appearing to read "Hirth Norris & Garrison".

Grove City, Ohio
September 27, 2012



RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
DECEMBER 31, 2011 AND 2010

	<u>2011</u>	<u>2010</u>
ASSETS		
Investments at fair value – Notes 2,3,4,7 and 12		
Common stock	\$ 7,876,502	\$ 8,385,483
Bonds - corporate	2,779,814	2,615,191
Bonds – government & related agencies	4,690,682	5,133,704
Asset backed securities	1,978,408	1,175,747
Common/collective trust funds	6,960,002	6,585,738
Registered investment companies	3,449,225	3,047,759
Warrants	<u>0</u>	<u>21,349</u>
Total investments	27,734,633	26,964,971
 Cash and equivalents	 2,211,757	 830,944
 Contribution receivable, employer	 1,800,000	 865,516
 Accrued interest and dividends receivable	 <u>54,070</u>	 <u>66,242</u>
 Total assets	 31,800,460	 28,727,673
 LIABILITIES	 <u>0</u>	 <u>0</u>
 NET ASSETS AVAILABLE FOR PLAN BENEFITS	 <u>\$ 31,800,460</u>	 <u>\$ 28,727,673</u>

The accompanying notes are an integral
part of these financial statements.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
STATEMENTS OF CHANGES IN NET ASSETS
AVAILABLE FOR PLAN BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010

	<u>2011</u>	<u>2010</u>
INCREASES		
Employer contributions	\$ 3,384,484	\$ 2,615,516
Investment income (including unrealized appreciation in fair value of investments) – Notes 2,3,4,7 and 12	<u>491,976</u>	<u>2,419,428</u>
Total increases	3,876,460	5,034,944
DECREASES		
Benefit payments	569,773	458,429
Administrative expenses & fees	<u>233,900</u>	<u>233,324</u>
Total decreases	<u>803,673</u>	<u>691,753</u>
CHANGE IN NET ASSETS AVAILABLE FOR PLAN BENEFITS	3,072,787	4,343,191
NET ASSETS AVAILABLE FOR PLAN BENEFITS BEGINNING OF YEAR	<u>28,727,673</u>	<u>24,384,482</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS END OF YEAR	<u>\$ 31,800,460</u>	<u>\$ 28,727,673</u>

The accompanying notes are an integral
part of these financial statements.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 1 - PLAN DESCRIPTION

The Retirement Plan for Employees of Fisher-Titus Medical Center (Plan) is a defined benefit pension plan which was created for the purpose of providing retirement and death benefits to employees of Fisher-Titus Medical Center (Plan sponsor). The Internal Revenue Service has approved the Plan as a qualified pension plan. As such, the Plan's earnings are exempt from Federal income tax and benefits are not taxable to the participants until received. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA) and amendments thereto.

Eligibility

Employees of the Plan sponsor who have attained age 21 and completed one Year of Service are participants in the Plan with the following exceptions:

1. No employee covered by a collective bargaining agreement with the Plan sponsor under which retirement benefits are subject of good faith bargaining may participate.
2. Leased employees may not participate.
3. Employees of FTMC Medical Care, LLC, Health Promotion of Norwalk, Inc., Fisher Group, State Collection, HealthWorks Plus, Norwalk Area Health Services and Fisher-Titus Foundation may not participate. Also, rehired employees whose original date of hire was prior to January 1, 1997, but who did not have vested benefits under this Plan at the time of their previous termination of employment, may not participate.
4. No employee whose original date of employment is on or after January 1, 1997, may participate.

Benefits

The Plan provides normal retirement benefits, reduced early benefits, death benefits in some cases and termination benefits. A detailed description of Plan benefits is contained in the Plan's summary plan description (SPD) and Plan document.

Vesting

Participants vest in the Plan under a normal vesting schedule or if the Plan is determined to be "top heavy plan" an accelerated vesting schedule. The Plan's normal vesting schedule is:

<u>Years of Service</u>	<u>Vesting Percentage</u>
0-4	0%
5	100%

The Plan's top-heavy vesting schedule is:

<u>Years of Service</u>	<u>Vesting Percentage</u>
1	0%
2	20%
3	40%
4	60%
5	80%
6	100%

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 1 - PLAN DESCRIPTION (Continued)

Contributions

The Plan sponsor makes contributions in amounts determined by the Plan's actuary to adequately fund current operations and past service liabilities.

NOTE 2 - ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Valuation of Investments

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

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Receivables

Contributions for a year are determined by the plan actuary. Contributions are recorded in the period they pertain to as determined by the Plan actuary. Contributions required for a given year, but not yet funded as allowed by law, are recorded as receivables.

Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Benefits and Administrative expenses

Benefit payments to participants are recorded upon distribution. Reasonable expenses incident to the operation of the Plan, including PBGC insurance premiums, are paid out of the Plan and recorded as incurred.

NOTE 3 - INFORMATION SUPPLIED BY PLAN TRUSTEES

The accompanying financial statements contain information that was provided by the Plan's custodians; PNC Bank, UBS Financial Services, Inc., Wilmington Trust and BlackRock, Inc. with respect to cash equivalents, fair value of investments, investment income, and depreciation in value of investments. The Plan administrator has obtained certification that the information is complete and accurate.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The fair value measurements authoritative literature established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs are unobservable and have the lowest priority.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available.

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access. This includes common stock, most corporate bonds, US government securities and certain trust assets.

Level 2 – Inputs to the valuations methodology include quoted market prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from a corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability. This includes certain assets held in collective trusts, certain corporate bonds.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement. This includes certain assets held in collective trust and other assets not traded at quoted prices.

Following is a description of the valuation methodologies used for assets measured at fair value. The methodologies used for 2011 were first adopted January 1, 2008, for valuation and disclosure purposes.

Common stock – Valued at quoted market prices at plan year-end.
Corporate & government bonds – Valued at quoted market prices at plan year-end.
Asset backed securities – Valued at quoted market prices at plan year-end.
Mutual funds – Valued at the net asset value (NAV) of shares held by the plan at year-end.
Common/collective trust funds – Valued based on interest (units) owned of the trust and the related underlying assets within the trust as increased or decreased by activity within the trust. Value determined by administrators of the trust based on assets held and estimated prices obtainable in available open market.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2011.

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Common stocks	\$ 7,876,502	\$ -	\$ -	\$ 7,876,502
Corporate bonds	2,779,814	-	-	2,779,814
Government bonds	4,690,682	-	-	4,690,682
Asset back securities	1,978,408	-	-	1,978,408
Common/collective funds	-	-	6,960,002	6,960,002
Mutual funds	3,449,225	-	-	3,449,225
Total fair value	\$ 20,774,631	\$ -	\$ 6,960,002	\$ 27,734,633

The following table sets forth a summary of changes in the fair value of the plan's Level 3 assets for the year ended December 31, 2011.

	<u>Common/collective trust funds</u>
Beginning balance	\$ 6,585,739
Realized gains (losses)	774
Unrealized gains (losses)	403,810
Transfers	-
Purchases, sales, issuances and settlements (net)	(30,321)
Ending balance	\$ 6,960,002

NOTE 5 - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments that are attributed under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries.

The actuarial present value of accumulated plan benefits is determined by the Plan's actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts of 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.

The significant actuarial assumptions used in the valuation as of January 1, 2012, were as follows:

- | | |
|--|---|
| 1. <u>Employees Excluded from Cost</u> | Those not eligible to participate. |
| 2. <u>Interest Rates</u> | |
| a. Funding Purposes | 8.00% before retirement.
8.00% after retirement. |
| 3. <u>Salary Scale</u> | 3.00% annual increases. |
| 4. <u>Retirement</u> | All retirements assumed to occur at employee's Normal Retirement Age. |

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 5 - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS (Continued)

5. <u>Mortality Table</u>	Pre Retirement – RP Annuity Mortality Table (male and female) projected to 2015 by scale AA Post Retirement – RP Annuity Mortality Table (male and female) projected to 2015 by scale AA
6. <u>Withdrawal Assumption</u>	T-3 table from the Actuary's Pension Handbook.
7. <u>Actuarial Value of Assets</u>	Market Value of Assets.
8. <u>Covered Compensation</u>	N/A

The actuarial present value of accumulated Plan benefits at January 1, 2012 and 2011, respectively:

	<u>2012</u>	<u>2011</u>
Vested benefits		
Participants currently receiving payments	\$ 7,326,744	\$ 4,915,778
Other participants	<u>17,479,864</u>	<u>16,853,494</u>
Total vested benefits	24,806,608	21,769,272
Non vested accrual benefits	<u>485,948</u>	<u>77,526</u>
Total actuarial present value of accumulated Plan benefits	<u>\$ 25,292,556</u>	<u>\$ 21,846,798</u>

The following is a statement of changes in the actuarial present value of accumulated plan benefits for the years under audit:

	<u>2012</u>	<u>2011</u>
Actuarial present value of accumulated plan benefits at January 1, 2012 and 2011	\$ 21,846,798	\$ 19,471,654
Additional accrual of benefits	1,709,062	1,295,706
Change in assumptions	583,415	0
Increase in interest	1,723,054	1,537,867
Decrease in discount period	0	0
Benefits paid and settlements	<u>(569,773)</u>	<u>(458,429)</u>
Actuarial present value of accumulated Plan benefits at January 1, 2012 and 2011	<u>\$ 25,292,556</u>	<u>\$ 21,846,798</u>

NOTE 6 - PLAN TERMINATION

The Plan sponsor has the right to terminate the Plan at any time without the consent of any Plan participants. If such a termination were to occur, the assets of the Plan would be allocated to participants as stipulated in the Plan document and the excess, if any, returned to the Plan sponsor.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 7 - INVESTMENT AND FUNDING POLICY

The Plan's investment policy is to maintain sufficient liquidity to assure the timely payment of benefits and the selection of investments which in the long run, will produce a rate of return no less than the rate of return assumed by the actuary in making his determination of funding requirements (8%). During 2011 and 2010, the Company made contributions of \$1,584,484 and \$1,750,000 respectively to meet actuarial funding requirements. Additionally, a contribution will be made in 2012 for the 2011 year in the amount of \$1,800,000.

NOTE 8 - INCOME TAX STATUS

The Plan obtained its latest determination letter on November 8, 2007, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 9 - EXPENSES OF PLAN PAID BY PLAN SPONSOR

The Plan sponsor pays for the cost of administrative personnel. The Plan pays all investment management fees, professional fees, and PBGC insurance premiums.

NOTE 10 - BENEFITS INSURANCE COVERAGE

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. government agency) if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For Plan terminations that ceiling is \$4,500 per month in 2011, 2010 and 2009, \$4,313 per month in 2008 and \$4,125 in 2007. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

NOTE 11 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The audited financial statements and Form 5500 are in agreement.

NOTE 12 - INVESTMENTS

The Plan's investments are held by four different trustees. The investments are valued at fair value as determined by quoted prices and the trustees. As evidenced in the supplemental schedule of assets the investments of the Plan include a variety of different holdings.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS

NOTE 12 - INVESTMENTS (Continued)

These investments are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

The fair value of individual investments that represent 5% or more of the Plan's net assets are as follows:

	<u>December 31, 2011</u>	<u>December 31, 2010</u>
BlackRock Global Allocation Fund	\$2,081,591	\$2,155,499

NOTE 13 - PLAN AMENDMENTS AND SUBSEQUENT EVENTS

The Plan's Board of Trustees approved a proposal on June 25, 2012, to switch the management of the Plan from a self-trusted arrangement to a corporate trustee/custodian arrangement.

The Plan was amended on June 27, 2011, to revise parts of the Plan document dealing with eligibility.

The Plan was amended on April 25, 2011, to revise the HEART Act of the Plan.

Subsequent events were evaluated by management through September 27, 2012, which is the date the statements were available to be issued.

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER

FINANCIAL STATEMENTS

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SUPPLEMENTAL SCHEDULES

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
EIN: 34-4430716 PN: 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	COUPON INTEREST RATE	MATURITY DATE	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Asset Backed Securities					
Honda Auto Receivables Owner	0.650%	6/17/2013		52,105	\$ 52,110
CFAST	1.100%	8/8/2013		75,202	75,042
Hyundai Auto Receivables	2.030%	8/15/2013		16,097	16,045
USAOT	1.540%	2/18/2014		9,124	9,148
Toyota Auto Receivables Owner	0.530%	4/15/2014		69,999	69,871
Nissan Auto Receivables Owner	0.870%	7/15/2014		49,993	50,055
Toyota Auto Receivables Owner	0.980%	10/15/2014		40,244	40,084
Mercedes-Benz Auto Receivables	0.850%	3/16/2015		39,999	40,031
Honda Auto Receivables Owner	0.940%	3/18/2015		49,998	50,069
WOART	2.210%	5/15/2015		39,999	40,556
Chrysler Financial Auto Security	2.820%	1/15/2016		20,182	19,854
BACCT	0.338%	4/15/2016		79,334	79,836
Comet	0.488%	12/15/2016		84,681	84,810
Honda Auto Receivables	0.940%	12/21/2016		59,892	60,081
CSFB	3.936%	5/15/2038		36,155	35,775
LB-UBS Commercial Mrtge Trust	5.347%	11/15/2038		38,009	37,481
Bear Stearns commercial Morg	5.537%	10/12/2041		43,316	44,906
JPMCC	5.429%	12/12/2043		53,656	53,636
WBCMT	5.308%	11/15/2048		36,909	38,353
JPMCC	5.412%	5/15/2049		42,228	43,242
FNMA PL 913253	5.850%	3/1/2037		44,571	45,449
FNMA Pool SF256749	6.000%	6/1/2037		62,081	67,940
FNMA PL 899717	6.000%	9/1/2037		30,375	31,581
FNMA PL 687984	5.500%	3/1/2033		121,160	121,528
FNMA PL 735288	5.000%	3/1/2035		2,048	2,045
FNMA PL 735676	5.000%	7/1/2035		43,483	43,609
FNMA PL AE0115	5.500%	12/1/2035		58,586	59,594
FNMA PL 745275	5.000%	2/1/2036		61,306	61,973
FNMA PL 745343	5.500%	3/1/2036		5,190	5,214
FNMA PL 745418	5.500%	4/1/2036		3,089	3,074
FHLMC PL G03432	5.500%	11/1/2037		55,988	56,531
FHLMC PL G04913	5.000%	3/1/2038		11,194	11,257
FNMA PL 995722	5.000%	5/1/2038		2,155	2,177
FNMA PL 889697	6.000%	7/1/2038		24,463	24,677
FNMA PL 190391	6.000%	9/1/2038		127,141	128,382
FHLMC PL G04688	5.500%	9/1/2038		9,329	9,391
FNMA PL AE0484	5.500%	12/1/2038		3,873	3,822
FNMA PL 995876	4.500%	5/1/2039		85,212	87,608
FNMA PL AC8720	5.000%	12/1/2039		6,376	6,443
FNMA PL AB1389	4.500%	8/1/2040		56,607	58,797
FHLMC PL A97046	4.500%	2/1/2041		67,954	71,634
FHLMC PL A97047	4.500%	2/1/2041		60,561	63,774

RETIREMENT PLAN FOR EMPLOYEES OF
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SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	COUPON INTEREST RATE	MATURITY DATE	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Asset Backed Securities (continued)					
FNMA PL AE0984	4.500%	2/1/2041		42,504	44,426
FNMA PL AI1969	4.500%	5/1/2041		20,047	20,743
FNMA PL AI1888	4.500%	5/1/2041		3,710	3,744
FNMA PL AI9748	4.500%	8/4/2041		1,998	2,010
Total asset backed securities				<u>\$ 1,948,123</u>	<u>\$ 1,978,408</u>
Government Securities					
US Treasury Note	0.375%	6/30/2013		516,289	516,226
Freddie Mac	1.000%	8/27/2014		167,534	166,605
US Treasury Note	0.500%	10/15/2014		566,944	567,339
Fannie Mae	0.625%	10/30/2014		749,485	748,635
US Treasury Note	2.250%	3/31/2016		107,713	111,997
Freddie Mac	2.500%	5/27/2016		276,026	275,361
US Treasury Note	1.000%	10/31/2016		287,194	287,762
US Treasury Note	2.625%	1/31/2018		314,617	315,851
Freddie Mac	3.750%	3/27/2019		170,022	188,352
US Treasury Note	3.500%	5/15/2020		724,145	770,761
US Treasury Note	0.875%	2/29/2012		151,086	150,199
US Tsy Infl Prot Note	3.000%	7/15/2012		113,799	109,354
US Treasury Note	1.375%	3/15/2013		31,651	31,442
FNMA	0.750%	12/18/2013		77,255	78,298
US Treasury Note	1.500%	7/31/2016		63,283	64,097
US Treasury Note	2.125%	8/15/2021		94,163	95,384
US Tsy Infl Prot Note	3.625%	4/15/2028		58,194	62,453
US Tsy Infl Prot Note	2.500%	1/15/2029		139,403	150,566
Total government securities				<u>\$ 4,608,803</u>	<u>\$ 4,690,682</u>
Corporate Bonds & Notes					
Natl Ruralutilities	7.250%	3/1/2012		19,727	17,179
Peco Energy Co	4.750%	10/1/2012		41,988	41,196
Alabama Power Co	4.850%	12/15/2012		37,671	36,385
Prudential Financial Inc	5.150%	1/15/2013		46,371	46,588
Columbus Sthn Power	5.500%	3/1/2013		41,897	41,876
Dominion Resources Inc	5.000%	3/15/2013		30,677	31,461
UnitedHealth Group Inc	4.875%	4/1/2013		34,134	36,569
WMC Fin Ltd	5.125%	5/15/2013		32,309	31,709
John Deere Cptl Corp	1.875%	6/17/2013		40,941	40,724
Heinz H J Co	5.350%	7/15/2013		38,730	37,361
Electronic Data Systems	5.660%	8/1/2013		43,988	42,403
CoCa Cola Enterprises	5.000%	8/15/2013		20,751	21,269

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	COUPON INTEREST RATE	MATURITY DATE	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Corporate Bonds & Notes (continued)					
Vodafone Group Plc	5.000%	12/16/2013		43,420	42,920
Kroger Co	7.500%	1/15/2014		40,144	39,115
Wyeth	5.500%	2/1/2014		31,373	32,888
CoCa Cola Enterprises	7.375%	3/3/2014		23,380	22,717
Shell Intl Fin	4.000%	3/21/2014		42,369	42,994
Conagra Foods Inc	5.875%	4/15/2014		32,542	32,923
Dow Chemical Co	7.600%	5/15/2014		40,678	39,579
Bank of Amer Corp	7.375%	5/15/2014		35,892	36,290
Caterpillar Finl Svcs	1.375%	5/20/2014		40,369	40,501
Schwab Charles Corp New	4.950%	6/1/2014		53,484	54,187
Trgt Corp	1.125%	7/18/2014		40,230	40,294
Arcelormittal Sa	9.000%	2/15/2015		35,837	33,168
Boeing Co	3.500%	2/15/2015		43,228	42,946
U.S. Bancorp	3.150%	3/4/2015		34,993	36,582
Vornado Realty	4.250%	4/1/2015		34,171	36,222
HSBC Fin Corp	5.000%	6/30/2015		57,686	55,846
First Horizon Natl Corp	5.375%	12/15/2015		42,132	40,490
Bunge Ltd Fin Corp	4.100%	3/15/2016		40,188	41,421
BB&T Corp	3.950%	4/29/2016		55,656	59,090
Barrick Gold Corp	2.900%	5/30/2016		40,752	41,054
Sempra Energy	6.500%	6/1/2016		31,728	34,995
Bank of Amer Corp	5.750%	8/15/2016		35,582	32,505
Goldman Sachs Group Inc	5.750%	10/1/2016		42,633	41,474
ConocPhillips	5.625%	10/15/2016		57,194	64,214
Boardwalk Pipelines LLC	5.500%	2/1/2017		37,241	38,163
Genl Elec Cap Corp	5.400%	2/15/2017		41,325	44,442
Wachovia Corp	5.750%	6/15/2017		30,897	33,895
Safeway Inc Notes	6.350%	8/15/2017		46,658	45,353
Starbucks Corp	6.250%	8/15/2017		40,592	41,556
Genl Elec Cap Corp	5.625%	9/15/2017		16,327	16,602
Bear Stearns Cos Inc	6.400%	10/2/2017		79,727	78,206
Prudential Financial Inc	6.000%	12/1/2017		20,055	22,243
Wells Fargo & Co	5.625%	12/11/2017		79,012	79,767
Amer Intl Group	5.850%	1/16/2018		19,979	19,560
AT&T Inc	5.500%	2/1/2018		50,879	57,877
Verizon Wireless	5.500%	2/15/2018		70,683	75,778
Jeffries Group Inc	5.125%	4/13/2018		39,861	35,200
AMB PPTY	7.500%	6/30/2018		33,265	34,029
MetLife Inc	6.817%	8/15/2018		16,498	17,844
Enterprise Products Oper	6.500%	1/31/2019		38,559	40,757
MetLife Inc	7.717%	2/15/2019		42,995	43,888

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Corporate Bonds & Notes (continued)					
Valero Energy Corp	9.375%	3/15/2019		35,706	38,471
Arcelormittal SA	9.850%	6/1/2019		38,539	33,441
Bank of Amer Corp	7.625%	6/1/2019		68,859	62,053
Vale Overseas Ltd	5.625%	9/15/2019		36,596	38,556
Goldman Sachs Group Inc	5.375%	3/15/2020		57,355	54,422
Nordstrom Inc	4.750%	5/1/2020		37,788	38,793
Genl Elec Cap Corp	4.375%	9/16/2020		68,272	71,532
Dow Chemical Co	4.250%	11/15/2020		36,279	36,381
HCP Inc	5.375%	2/1/2021		40,048	41,936
United Health Group Inc	4.700%	2/15/2021		40,060	44,968
Directv Hldgs	5.000%	3/1/2021		72,798	74,915
Alcoa Inc	5.400%	4/15/2021		40,150	40,074
CVS Caremark Corp	4.125%	5/15/2021		66,549	69,977
Total corporate bonds & notes				<u>\$ 2,748,397</u>	<u>\$ 2,779,814</u>
Common Stocks					
Akzo Nobel			744	39,735	35,395
Anheuser Busch			580	31,006	35,374
Aryzta Ag Adr			1,515	39,978	35,799
AXA Adr			1,100	26,298	14,146
Barclays Plc Adr			3,290	60,245	36,157
Basf Se			410	25,232	28,589
Bayer A G Spon Adr			585	47,963	37,323
BCE Inc			630	19,281	26,252
BG Group Plc			370	34,061	39,590
BNP Paribas			620	24,062	12,183
Bridgestone Corp Ltd			400	17,526	18,000
British Amer Tobacco Plc			545	48,462	51,710
Canadian Natural			1,435	50,572	53,626
Carnival Plc Adr			515	18,533	16,959
China Mobile Ltd			600	31,399	29,094
CNOOC Ltd Spon Adr			125	32,325	21,835
Daimler Ag			775	38,509	33,992
DBS Group Hldgs Ltd Spon Adr			985	35,067	34,889
Fanuc Corp Adr			1,310	35,261	33,143
Fletcher Bldg Ltd Spon Adr			2,757	38,579	26,054
Glaxo SmithKline			855	34,402	39,014
Gold Fields Ltd Spon Adr			2,500	29,999	38,125
H Lunbbeck			880	18,499	16,518
HSBC Holdings Plc			1,075	48,155	40,958
Imperial Tobacco Group Plc			425	29,858	32,020

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Common Stocks (continued)			
Indra Sistemas Adr	3,900	39,642	24,492
Itau Unibanco Hldg Sa Adr	1,295	25,131	24,035
Munich RE Group	3,010	44,047	36,963
Murata Mfg Co Ltd	2,800	38,411	35,280
National Grid Plc New Spon Adr	1,215	58,551	59,003
Nestle Sa Spon Adr	1,007	50,177	58,114
Nintendo Ltd Adr New Japan Adr	990	19,316	16,771
Novartis Ag Spon Adr	475	26,653	27,156
NSK Ltd Adr	1,860	25,582	23,436
NTT Docomo Inc	1,525	27,303	27,984
OAQ Gazprom Level 1 Adr	2,200	29,113	23,498
Petroleo Brasileiro	560	20,346	13,916
Publicis Groupe	1,565	32,227	35,792
Reckitt Benckiser Group Plc	3,500	36,107	34,440
Rexam Plc	2,100	63,174	57,225
Royal Dutch Shell Plc	895	46,899	65,416
Sanofi Spon Adr	1,835	71,211	67,051
Schneider Elec Sa Adr	2,580	41,807	27,116
Shin Etsu Chem Co Ltd	1,924	27,436	23,627
Siemens A G Spon Adr	410	40,957	39,200
Teva Pharmaceuticals Ind Ltd Israel Adr	365	19,472	14,731
UBS Ag (USD) New 2006 Ord Chf	1,155	13,753	13,664
Unilever NV N Y Shs New Netherlands	1,295	39,357	44,509
Vodafone Group Plc New Spon	1,890	51,804	52,977
Westfarmers Ltd	3,100	41,675	46,376
Westfield Group Spon Adr	1,100	18,685	17,633
Wheelock & Co Ltd Adr	1,090	44,458	26,781
WPP Plc	340	20,495	17,758
Allergan inc	304	24,995	26,673
Amazon.Com Inc	90	18,566	15,579
Amer Express Co	578	28,905	27,264
Amer Tower Corp	350	15,259	21,004
Apple Inc	141	13,987	57,105
Baidu Inc	55	8,145	6,406
Boeing Company	307	22,886	22,518
Capital One Fincl Corp	777	34,997	32,859
Cisco Systems Inc	716	12,795	12,945
Citigroup Inc	1,122	40,865	29,520
Coach Inc	116	6,157	7,081
CVS Caremark Corp	921	33,764	37,558
DuPont De Nemours	296	12,640	13,551
EMC Corp Mass	1,100	28,835	23,694

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Common Stocks (continued)			
Ensco Intl Ltd Spon Adr	302	13,251	14,170
Express Scripts Inc	342	16,902	15,284
Exxon Mobil Corp	534	45,918	45,262
General Motors Co	543	13,347	11,007
Genl Electric Co	2,287	38,897	40,960
Gilead Sciences Inc	169	6,759	6,917
Google Inc Cl A	114	59,721	73,633
Halliburton Co	411	18,907	14,184
Home Depot Inc	688	24,702	28,924
Intel Corp	533	11,893	12,925
Intl Business Mach	243	29,898	44,683
Johnson & Johnson Com	307	20,442	20,133
JPMorgan Chase & Co	1,091	43,631	36,276
Kraft Foods Inc Cl A	553	19,723	20,660
Mastercard Inc Cl A	75	26,093	27,962
McDonalds Corp	274	21,832	27,490
Merck & Co Inc New Com	357	13,015	13,459
MetLife Inc	1,001	42,383	31,211
Microsoft Corp	1,618	43,583	42,003
Monsanto Co New	182	13,384	12,753
News Corp Inc	2,134	35,025	38,071
Nike Inc Cl B	205	19,003	19,756
Oracle Corp	980	22,700	25,137
Pfizer Inc	1,094	21,810	23,674
Philip Morris Intl Inc	286	19,915	22,445
PNC Financial Services Group	256	13,414	14,764
Precision Castparts Corp	158	17,457	26,037
Procter & Gamble Co	106	7,067	7,071
Qualcomm Inc	642	34,905	35,117
Schlumberger Ltd Netherlands	558	39,337	38,117
The Directv Group Cl A	776	28,922	33,182
Union Pacific Corp	303	17,084	32,100
United Parcel Service Inc	198	13,541	14,492
UnitedHealth Group Inc	280	13,933	14,190
Untd Technologies Corp	405	25,794	29,601
Viacom Inc new Cl B	316	16,196	14,350
Walt Disney Co	406	15,394	15,225
Wellpoint Inc	298	20,813	19,743
Alexion Pharmaceuticals Inc	550	18,276	39,325
Allergan Inc	351	19,791	30,897
Amazon.Com Inc	300	22,323	51,930
Apple Inc	175	22,902	70,875

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Common Stocks (continued)			
ASML Holding NV NY	650	\$ 21,457	\$ 27,164
C H Robinson Worldwide Inc	225	15,641	15,700
Coach Inc	350	21,156	21,364
FMC Technologies Inc	610	14,120	31,860
FS Networks Inc	315	33,384	33,428
Google Inc Cl A	90	39,715	58,131
Grainger W W Inc	150	15,250	28,079
Illumina Inc	665	23,423	20,369
InterContinentalExchange Inc	220	19,952	26,521
Intuitive Surgical Inc New	75	9,481	34,726
Las Vegas Sands Corp	675	8,000	28,843
Natl-Oilwellvarco Inc	425	13,704	28,896
Netflix.Com Inc.	125	25,753	8,661
Nike Inc Cl B	345	20,100	33,248
Opentable Inc	145	14,704	5,674
Praxair Inc	240	21,517	25,656
Priceline.Com Inc New	60	29,148	28,063
Qualcomm Inc	900	37,772	49,230
Regeneron Pharmaceuticals Inc	170	10,021	9,423
Salesforce.Com Inc	510	27,438	51,745
Schlumberger Ltd Netherlands	475	32,828	32,447
Schwab Charles Corp New	1,605	30,697	18,072
Sowstn Energy Co	575	20,893	18,366
Starbucks Corp	805	13,328	37,038
Visa Inc Cl A	751	50,114	76,249
AMC Networks Inc Cl A	300	5,361	11,274
Anadarko Petroleum Corp	700	31,480	53,431
Autodesk Inc	895	29,901	27,145
Biogen Idec Inc	730	33,591	80,237
Broadcom Corp	745	17,248	21,873
Cablevision Systems Corp NY	1,200	13,273	17,064
Citrix Systems Inc	300	17,624	18,216
Comcast Corp	3,300	63,044	77,748
Covidien Plc	460	16,234	20,705
Cree Inc	130	2,973	2,865
Dolby Laboratories Inc	595	20,788	18,153
Fluor Corp	540	19,872	27,135
Forest Laboratories	1,600	66,751	48,416
Freeport-McMoran Copper & Gold Inc	395	7,635	14,532
Human Genome Sciences Inc	495	11,970	3,658
Immunogen Inc	1,300	9,870	15,054
Isis Pharmaceuticals Inc	1,100	9,857	7,931

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Common Stocks (continued)			
L-3 Communications Holdings Corp	520	41,304	34,674
Liberty Media Corp Com	310	4,516	24,196
Liberty Interactive Corp Ser A	1,200	25,137	19,458
Natl-Oilwellvarco Inc	360	14,012	24,476
Nucor Corp	630	26,623	24,929
Pall Corp	580	17,154	33,147
Sandisk Corp	690	16,697	33,955
Seagate Technology	2,400	19,382	39,360
The Connectivity Ltd	1,200	29,477	36,972
The Directv Group Cl A	390	7,553	16,676
Tyco Intl Ltd	1,000	30,709	46,710
UnitedHealth Group Inc	1,600	63,809	81,088
Vertex Pharmaceutical Inc	460	12,487	15,277
Weatherford Intl Ltd	2,445	48,538	35,795
Abbott Labs	595	28,232	33,457
Ace Ltd	435	22,776	30,502
Aetna Inc	1,090	32,203	46,116
Apache Corp	405	39,837	36,685
Applied Materials Inc	3,915	47,869	41,930
Archer Daniels Midland Co	1,465	44,700	41,899
Baker Hughes Inc	505	26,589	24,563
Bank of New York Mellon Corp	1,390	38,158	27,675
Baxter Intl Inc	625	3,443	30,925
Chevron Corp	340	23,502	36,176
Cooper Industries Plc New Cl A	550	20,771	29,783
Corning Inc	2,060	39,142	26,739
CVS Caremark Corp	1,085	33,354	44,246
Devon Energy Corp New	595	37,903	36,890
Eaton Corp	715	33,945	31,124
Flextronics Intl Ltd	6,790	38,361	38,431
Halliburton Co	1,170	39,538	40,377
Hess Corp	655	42,050	37,204
Honeywell Intl Inc	780	31,500	42,393
Hospira Inc	950	34,555	28,852
Ingersoll-Rand Plc	900	27,576	27,423
KBR Inc	1,010	20,586	28,149
Medtronic Inc	1,200	39,161	45,900
MetLife Inc	1,290	45,335	40,222
Mosaic Co	695	45,417	35,049
Natl-Oilwellvarco Inc	560	24,790	38,074
Navistar Intl Corp New	730	33,129	27,652
Norfolk Sthn Corp	390	17,237	28,415

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
EIN: 34-4430716 PN: 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Common Stocks (continued)			
NYSE Euronext	1,035	27,765	27,014
ON Semiconductor Corp	3,810	29,192	29,413
Prudential Financial Inc	545	28,327	27,315
Royal Dutch Shell Plc Cl A	595	41,154	43,489
Target Corp	800	38,453	40,976
Teva Pharmaceuticals Ind Ltd	725	33,933	29,261
Time Warner Inc New	855	19,485	30,900
Unilever N Y Shs New	780	19,447	26,809
Union Pacific Corp	290	16,522	30,723
Vodafone Group Plc New Spon	1,460	41,105	40,924
Western Union Co	2,245	32,186	40,994
Willis Group Holdings Ltd	735	18,210	28,518
Abbott Labs	728	34,627	40,935
Accenture Plc Ireland Cl A	792	28,789	42,158
Ace Ltd	368	22,365	25,804
Air Prod & Chemical Inc	205	15,728	17,464
Altria Group Inc	583	15,576	17,286
Apache Corp	211	20,008	19,112
ASML Holding NV NY Reg Shs New	420	14,234	17,552
AT&T Inc	1,153	29,528	34,867
Bank of New York Mellon Corp	1,944	53,598	38,705
Bank of Amer Corp	2,075	33,027	11,537
Becton Dickinson & Co	292	22,884	21,818
Blackrock Inc	95	18,105	16,933
Chevron Corp	531	38,970	56,498
Comcast Corp New Special Cl A	1,128	25,406	26,576
Danaher Corp	580	27,601	27,283
Diageo Plc New	293	17,298	25,614
Exxon Mobil Corp	556	40,803	47,127
Genl Mills Inc	939	32,892	37,945
Goldman Sachs Group Inc	415	63,733	37,528
Hasbro Inc	907	31,843	28,924
Honeywell Intl Inc	504	21,452	27,392
Intel Corp	676	10,871	16,393
Intl Business Mach	193	25,787	35,489
Johnson Controls Inc	698	24,639	21,819
Johnson & Johnson Com	766	44,939	50,234
JPMorgan Chase & Co	1,726	64,766	57,390
Lockheed Martin Corp	935	71,578	75,642
Medtronic Inc	941	34,189	35,993
Metlife Inc	1,208	42,887	37,665
Nestle A Sponsored Adr	372	14,837	21,468

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
EIN: 34-4430716 PN: 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Common Stocks (continued)			
Northrop Grumman Corp	387	16,950	22,632
Occidental Petroleum Crp	295	28,893	27,642
Oracle Corp	1,916	46,984	49,145
Pepsico Inc	308	16,640	20,436
Pfizer Inc	2,432	42,070	52,628
Philip Morris Intl Inc	997	43,548	78,245
PNC Financial Services Group	497	29,448	28,662
PPG Industries Inc	415	23,382	34,648
Prudential Financial Inc	446	22,524	22,354
St Jude Medical Inc	335	11,124	11,491
Stanley Black & Decker Inc	501	29,332	33,968
Target Corp	866	46,826	44,357
Thermo Fisher Scientific Inc	418	21,920	18,797
Travelers Cos Inc/The	570	29,638	33,727
Tyco Intl Ltd	358	17,051	16,722
Untd Technologies Corp	535	34,201	39,203
Viacom Inc New Cl B	616	27,869	27,973
Vodafone Group Plc New Spon Adr	695	13,198	19,481
Walt Disney Co	281	9,604	10,538
3M Co	330	24,008	26,971
Total common stocks		<u>\$ 7,201,549</u>	<u>\$ 7,876,502</u>
Mutual Funds			
Allianz Fixed Income	55,885	\$ 762,967	\$ 696,886
Allianz Fixed Income	64,495	\$ 697,755	\$ 670,748
BlackRock Global Allocation Fund	114,122	\$ 2,012,991	\$ 2,081,591
Total mutual funds		<u>\$ 3,473,713</u>	<u>\$ 3,449,225</u>
Common/collective trust funds			
Strategic Bond Portfolio	217,922	\$ 5,721,118	\$ 6,960,002
Total common/collective trust funds		<u>\$ 5,721,118</u>	<u>\$ 6,960,002</u>

**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

2011**This Form is Open to Public
Inspection**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

▶ **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

Retirement Plan for Employees of Fisher-Titus Medical Center

B Three-digit
plan number (PN) ▶

001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF

Fisher-Titus Medical Center

D Employer Identification Number (EIN)

34-4430716

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 1 Day 1 Year 2011**2** Assets:

a Market value	2a	28,708,158
b Actuarial value	2b	27,333,543

3 Funding target/participant count breakdown:

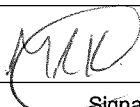
	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a 49	5,717,421
b For terminated vested participants.....	3b 38	1,161,468
c For active participants:		
(1) Non-vested benefits.....	3c(1)	102,818
(2) Vested benefits.....	3c(2)	20,351,803
(3) Total active.....	3c(3) 265	20,454,621
d Total.....	3d 352	27,333,510

4 If the plan is in at-risk status, check the box and complete lines (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 in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b	

5 Effective interest rate **5** 6.38 %**6** Target normal cost **6** 1,522,522**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**

Signature of actuary

Matthew R. Klein, F.S.A.

Type or print name of actuary

FINDLEY DAVIES, INC.

Firm name

1300 EAST NINTH STREET, SUITE 850

CLEVELAND

OH 44114-1516

Address of the firm

9-18-2012

Date

11-06865

Most recent enrollment number

(216) 875-1900

Telephone number (including area code)

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) 2011
v.012611

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 (line 13 from prior year).....	34,006	4,721,233
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8).....	34,006	4,721,233
10 Interest on line 9 using prior year's actual return of <u>8.85</u> %.....	3,010	417,829
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38 from prior year)		953,220
b Interest on (a) using prior year's effective rate of <u>6.66</u> % except as otherwise provided (see instructions).....		63,484
c Total available at beginning of current plan year to add to prefunding balance.....		1,016,704
d Portion of (c) to be added to prefunding balance.....		290,624
12 Other reductions in balances due to elections or deemed elections.....	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	37,016	5,429,686

Part III Funding percentages

14 Funding target attainment percentage	14	80.00 %
15 Adjusted funding target attainment percentage	15	100.00 %
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	86.20 %
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
02/22/2011	200,000		11/07/2011	200,000	
03/14/2011	200,000		12/05/2011	250,000	
06/15/2011	200,000		01/19/2012	200,000	
07/15/2011	200,000		01/31/2012	200,000	
09/12/2011	134,484		03/05/2012	200,000	
10/11/2011	200,000		04/05/2012	200,000	
Totals •			18(b)	3,384,484	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 contributions 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	3,185,715

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: 3.78 %	2nd segment: 6.31 %	3rd segment: 6.57 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 65
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 contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):												
a Target normal cost (line 6)	31a	1,522,522										
b Excess assets, if applicable, but not greater than 31a	31b	0										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment.....</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment	0	0	b Waiver amortization installment.....	0	0
	Outstanding Balance	Installment										
a Net shortfall amortization installment	0	0										
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 (lines 31a - 31b + 32a + 32b - 33)...	34	1,522,522										
		Carryover balance	Prefunding balance									
35 Balances elected for use to offset funding requirement		0	0									
36 Additional cash requirement (line 34 minus line 35)	36	1,522,522										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	3,185,715										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	1,663,193										
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0										
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0										
40 Unpaid minimum required contributions for all years.....	40	0										

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42	0	
43 Excess installment acceleration amount to be carried over to future plan years	43	0	

Continuation of 2011 Form 5500
Schedule SB, line 18 - Contributions Made to the Plan for the Plan Year

Plan Name	Retirement Plan for Employees of Fisher-Titus Medical Center	EIN: 34-4430716
------------------	--	------------------------

Plan Sponsor's Name	Fisher-Titus Medical Center	PN:	001
----------------------------	-----------------------------	------------	-----

[illegible]

Schedule SB, Line 22 – Description of Weighted Average Retirement Age
Retirement Plan for Employees of Fisher-Titus Medical Center
January 1, 2011 Valuation
EIN/PN: 34-4430716 / 001

Rates of Retirement

100% at age 65.

Weighted Average Retirement Age is 65. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

APPENDIX A

SUMMARY OF PRINCIPAL PLAN PROVISIONS

<i>Plan Sponsor</i>	Fisher-Titus Medical Center
<i>EIN/PN</i>	34-4430716/001
<i>Effective Date</i>	October 1, 1967; amended and restated effective January 1, 2002.
<i>Plan Year</i>	The 12-month period beginning each January 1.
<i>Participation</i>	An eligible employee shall become a participant on the first day of the month coincident with or immediately following the date on which he attains age 21 and completes one Year of Service. Any employee whose original hire date is on or after January 1, 1997, shall not be eligible to participate in this Plan.
<i>Compensation</i>	Total wages, salaries, fees for professional services and other amounts received for personal services actually rendered in the course of employment with the Employer while a participant (including commissions, insurance premiums, bonuses and 403(b) deferrals).
<i>Social Security Covered Compensation</i>	Average of the Taxable Wage Bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the participant attains (or will attain) Social Security Retirement Age.
<i>Average Monthly Compensation</i>	Annual Compensation averaged over a period of five (5) consecutive Years of Service chosen from the last ten (10) Years of Service which produces the highest average.
<i>Years of Service</i>	For any period of employment one Year of Service is earned for each plan year in which 1,000 hours are worked.
<i>Accrued Benefit</i>	An annuity for life with 120 monthly payments guaranteed starting at age 65 equal to the greater of: (1) 1.60% of Average Monthly Compensation not exceeding Covered Compensation plus 2.25% of Average Monthly Compensation in excess of Covered Compensation, multiplied by the number of Years of Service (not exceeding 25); and (2) the Accrued Benefit calculated as of December 31, 1989.

APPENDIX A (Continued)

***Accrued Benefit
(continued)***

Multiplied by a fraction not to exceed one, the numerator is the Years of Service and the denominator is the expected Years of Service accumulated at Normal Retirement Date.

***Normal Retirement
Benefit***

Eligibility:

Age 65, or fifth anniversary if later

Monthly Benefit:

The Accrued Benefit

***Early Retirement
Benefit***

Eligibility:

Age 55 and 5 Years of Service.

Monthly Benefit:

The Accrued Benefit at early retirement reduced by 1/15th for each of the first 5 years by which the commencement precedes his Normal Retirement Date, and by 1/30th for each of the next 5 years.

Termination Benefit

Eligibility:

Upon termination of employment prior to retirement after completion of at least five Years of Service.

Monthly Benefit:

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

Death Benefit

Eligibility:

100% vested and married for at least one year.

Monthly Benefit:

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.

APPENDIX A (Continued)

***Optional Forms of
Payments***

10 Year Certain and Continuous
Life Annuity
Joint & Survivor with 50%, 75% or 100% continuation
15 Year Certain and Continuous
Life Annuity Lump Sums (if less than \$7,500)

The conversion factors for the above optional forms are based on the 1984 Unisex Pension Table and an interest rate of 8.00%.

***Benefits Available
As Lump Sums***

This plan pays only small benefit amounts (lump sum less than \$7,500).

***Maximum Benefit
Limit***

The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.

***Plan Compensation
Limit***

The Section 401(a)(17) Maximum Compensation that can be recognized for benefit calculation purposes.

***Changes in Plan
Provisions***

The automatic changes, if any, in the plan compensation limit and maximum benefit limit were recognized as amendments for funding purposes.

APPENDIX B

STATEMENT OF ACTUARIAL ASSUMPTIONS AND METHODS

Interest Rates

Funding: 24-month segment rates averaged through the end of August 2010 and published in September 2010:

- | | | |
|----|---|-------|
| a. | First Rate, Years 1-5 | 3.78% |
| b. | Second Rate, Years 5-20 | 6.31% |
| c. | Third Rate, Years 20+ | 6.57% |
| d. | Effective Interest Rate using the above rates | 6.38% |
| e. | Interest rate for developing expected value of assets, (limited by statute) | 8.00% |

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: 4.00%

Mortality

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

Rates of Retirement

100% at age 65.

Weighted Average Retirement Age is 65. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Disability

50% of the 1971 Society of Actuaries Long-Term Disablement Rates. Sample rates and ages are as follows.

<u>Age(s)</u>	<u>Male Rate</u>	<u>Female Rate</u>
25	.04%	.05%
40	.06	.08
55	.48	.39

APPENDIX B (Continued)

Rates of Turnover

Sarason's T-3. Sample rates and ages as follows:

<u>Age</u>	<u>Rates</u>
25	5.27%
35	4.47
40	3.84
45	3.22
55	0.33

Assumptions Made In Valuing Spouse's Benefit

All employees included in the valuation are assumed to be married. This percentage is used as the probability that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Annual Increases to Maximum Benefits and Plan Compensation Limits

Funding: 0.00%

Annual Increases to Social Security

Funding: Taxable
Wage Base
0.00%

Provision for Expenses

The expected non-investment related expenses expected to be paid from plan assets for the upcoming year were included in the Target Normal Cost for minimum contribution purposes.

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.

Optional Form Election

All employees are assumed to elect the life annuity form of payment.

Employees Valued

Only participants as of the valuation date were valued.

Schedule SB, Line 25 – Change in Method
Retirement Plan for Employees of Fisher-Titus Medical Center
January 1, 2011 Valuation
EIN/PN: 34-4430716 / 001

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

The method for selecting the interest rates was changed from a 0-month lookback on the 24-month segment rates to a 4-month lookback on the 24-month segment rates.

Schedule SB, Line 26 - Schedule of Active Participant Data

January 1, 2011 Valuation
Retirement Plan for Employees of Fisher-Titus Medical Center
(EIN: 34-4430716; 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	-	-	-	-	-	-	-	-	-	-
30 to 34	-	-	3 (*)	4 (*)	-	-	-	-	-	-
35 to 39	2 (*)	2 (*)	3 (*)	7 (*)	8 (*)	1 (*)	-	-	-	-
40 to 44	-	1 (*)	1 (*)	10 (*)	21 (*)	15 (*)	-	-	-	-
45 to 49	2 (*)	1 (*)	3 (*)	6 (*)	16 (*)	13 (*)	10 (*)	3 (*)	-	-
50 to 54	-	2 (*)	1 (*)	3 (*)	8 (*)	12 (*)	12 (*)	7 (*)	1 (*)	-
55 to 59	-	1 (*)	1 (*)	3 (*)	12 (*)	12 (*)	11 (*)	10 (*)	2 (*)	3 (*)
60 to 64	1 (*)	-	1 (*)	-	4 (*)	6 (*)	5 (*)	5 (*)	2 (*)	1 (*)
65 to 69	-	-	-	-	1 (*)	1 (*)	-	2 (*)	1 (*)	-
70 & up	-	-	-	-	2 (*)	-	-	-	-	-

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

Schedule SB, Line 32 – Schedule of Amortization Bases
Retirement Plan for Employees of Fisher-Titus Medical Center
January 1, 2011 Valuation
EIN/PN: 34-4430716 / 001

EXHIBIT VII

SCHEDULE OF AMORTIZATION BASES

Plan Year Beginning

1/01/2011

	Date Established	Present Value of Payments	Remaining Years	Amortization Installment
<i>Shortfall Amortization Bases</i>	1/01/2011	\$ 0	7.00	\$ 0
	1/01/2010	0	6.00	0
	1/01/2009	0	5.00	0
	1/01/2008	<u>0</u>	4.00	<u>0</u>
	Total	\$ 0		\$ 0
<i>Waiver Amortization Bases</i>	1/01/2011	\$ 0		\$ 0

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
EIN: 34-4430716 PN: 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	COUPON INTEREST RATE	MATURITY DATE	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Asset Backed Securities					
Honda Auto Receivables Owner	0.650%	6/17/2013		52,105	\$ 52,110
CFAST	1.100%	8/8/2013		75,202	75,042
Hyundai Auto Receivables	2.030%	8/15/2013		16,097	16,045
USAOT	1.540%	2/18/2014		9,124	9,148
Toyota Auto Receivables Owner	0.530%	4/15/2014		69,999	69,871
Nissan Auto Receivables Owner	0.870%	7/15/2014		49,993	50,055
Toyota Auto Receivables Owner	0.980%	10/15/2014		40,244	40,084
Mercedes-Benz Auto Receivables	0.850%	3/16/2015		39,999	40,031
Honda Auto Receivables Owner	0.940%	3/18/2015		49,998	50,069
WOART	2.210%	5/15/2015		39,999	40,556
Chrysler Financial Auto Security	2.820%	1/15/2016		20,182	19,854
BACCT	0.338%	4/15/2016		79,334	79,836
Comet	0.488%	12/15/2016		84,681	84,810
Honda Auto Receivables	0.940%	12/21/2016		59,892	60,081
CSFB	3.936%	5/15/2038		36,155	35,775
LB-UBS Commercial Mrtge Trust	5.347%	11/15/2038		38,009	37,481
Bear Stearns commercial Morg	5.537%	10/12/2041		43,316	44,906
JPMCC	5.429%	12/12/2043		53,656	53,636
WBCMT	5.308%	11/15/2048		36,909	38,353
JPMCC	5.412%	5/15/2049		42,228	43,242
FNMA PL 913253	5.850%	3/1/2037		44,571	45,449
FNMA Pool SF256749	6.000%	6/1/2037		62,081	67,940
FNMA PL 899717	6.000%	9/1/2037		30,375	31,581
FNMA PL 687984	5.500%	3/1/2033		121,160	121,528
FNMA PL 735288	5.000%	3/1/2035		2,048	2,045
FNMA PL 735676	5.000%	7/1/2035		43,483	43,609
FNMA PL AE0115	5.500%	12/1/2035		58,586	59,594
FNMA PL 745275	5.000%	2/1/2036		61,306	61,973
FNMA PL 745343	5.500%	3/1/2036		5,190	5,214
FNMA PL 745418	5.500%	4/1/2036		3,089	3,074
FHLMC PL G03432	5.500%	11/1/2037		55,988	56,531
FHLMC PL G04913	5.000%	3/1/2038		11,194	11,257
FNMA PL 995722	5.000%	5/1/2038		2,155	2,177
FNMA PL 889697	6.000%	7/1/2038		24,463	24,677
FNMA PL 190391	6.000%	9/1/2038		127,141	128,382
FHLMC PL G04688	5.500%	9/1/2038		9,329	9,391
FNMA PL AE0484	5.500%	12/1/2038		3,873	3,822
FNMA PL 995876	4.500%	5/1/2039		85,212	87,608
FNMA PL AC8720	5.000%	12/1/2039		6,376	6,443
FNMA PL AB1389	4.500%	8/1/2040		56,607	58,797
FHLMC PL A97046	4.500%	2/1/2041		67,954	71,634
FHLMC PL A97047	4.500%	2/1/2041		60,561	63,774

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Asset Backed Securities (continued)					
FNMA PL AE0984	4.500%	2/1/2041		42,504	44,426
FNMA PL AI1969	4.500%	5/1/2041		20,047	20,743
FNMA PL AI1888	4.500%	5/1/2041		3,710	3,744
FNMA PL AI9748	4.500%	8/4/2041		1,998	2,010
Total asset backed securities				<u>\$ 1,948,123</u>	<u>\$ 1,978,408</u>
Government Securities					
US Treasury Note	0.375%	6/30/2013		516,289	516,226
Freddie Mac	1.000%	8/27/2014		167,534	166,605
US Treasury Note	0.500%	10/15/2014		566,944	567,339
Fannie Mae	0.625%	10/30/2014		749,485	748,635
US Treasury Note	2.250%	3/31/2016		107,713	111,997
Freddie Mac	2.500%	5/27/2016		276,026	275,361
US Treasury Note	1.000%	10/31/2016		287,194	287,762
US Treasury Note	2.625%	1/31/2018		314,617	315,851
Freddie Mac	3.750%	3/27/2019		170,022	188,352
US Treasury Note	3.500%	5/15/2020		724,145	770,761
US Treasury Note	0.875%	2/29/2012		151,086	150,199
US Tsy Infl Prot Note	3.000%	7/15/2012		113,799	109,354
US Treasury Note	1.375%	3/15/2013		31,651	31,442
FNMA	0.750%	12/18/2013		77,255	78,298
US Treasury Note	1.500%	7/31/2016		63,283	64,097
US Treasury Note	2.125%	8/15/2021		94,163	95,384
US Tsy Infl Prot Note	3.625%	4/15/2028		58,194	62,453
US Tsy Infl Prot Note	2.500%	1/15/2029		139,403	150,566
Total government securities				<u>\$ 4,608,803</u>	<u>\$ 4,690,682</u>
Corporate Bonds & Notes					
Natl Ruralutilities	7.250%	3/1/2012		19,727	17,179
Peco Energy Co	4.750%	10/1/2012		41,988	41,196
Alabama Power Co	4.850%	12/15/2012		37,671	36,385
Prudential Financial Inc	5.150%	1/15/2013		46,371	46,588
Columbus Stn Power	5.500%	3/1/2013		41,897	41,876
Dominion Resources Inc	5.000%	3/15/2013		30,677	31,461
UnitedHealth Group Inc	4.875%	4/1/2013		34,134	36,569
WMC Fin Ltd	5.125%	5/15/2013		32,309	31,709
John Deere Cptl Corp	1.875%	6/17/2013		40,941	40,724
Heinz H J Co	5.350%	7/15/2013		38,730	37,361
Electronic Data Systems	5.660%	8/1/2013		43,988	42,403
CoCa Cola Enterprises	5.000%	8/15/2013		20,751	21,269

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Corporate Bonds & Notes (continued)					
Vodafone Group Plc	5.000%	12/16/2013		43,420	42,920
Kroger Co	7.500%	1/15/2014		40,144	39,115
Wyeth	5.500%	2/1/2014		31,373	32,888
CoCa Cola Enterprises	7.375%	3/3/2014		23,380	22,717
Shell Intl Fin	4.000%	3/21/2014		42,369	42,994
Conagra Foods Inc	5.875%	4/15/2014		32,542	32,923
Dow Chemical Co	7.600%	5/15/2014		40,678	39,579
Bank of Amer Corp	7.375%	5/15/2014		35,892	36,290
Caterpillar Finl Svcs	1.375%	5/20/2014		40,369	40,501
Schwab Charles Corp New	4.950%	6/1/2014		53,484	54,187
Trgt Corp	1.125%	7/18/2014		40,230	40,294
Arcelormittal Sa	9.000%	2/15/2015		35,837	33,168
Boeing Co	3.500%	2/15/2015		43,228	42,946
U.S. Bancorp	3.150%	3/4/2015		34,993	36,582
Vornado Realty	4.250%	4/1/2015		34,171	36,222
HSBC Fin Corp	5.000%	6/30/2015		57,686	55,846
First Horizon Natl Corp	5.375%	12/15/2015		42,132	40,490
Bunge Ltd Fin Corp	4.100%	3/15/2016		40,188	41,421
BB&T Corp	3.950%	4/29/2016		55,656	59,090
Barrick Gold Corp	2.900%	5/30/2016		40,752	41,054
Sempra Energy	6.500%	6/1/2016		31,728	34,995
Bank of Amer Corp	5.750%	8/15/2016		35,582	32,505
Goldman Sachs Group Inc	5.750%	10/1/2016		42,633	41,474
ConocPhillips	5.625%	10/15/2016		57,194	64,214
Boardwalk Pipelines LLC	5.500%	2/1/2017		37,241	38,163
Genl Elec Cap Corp	5.400%	2/15/2017		41,325	44,442
Wachovia Corp	5.750%	6/15/2017		30,897	33,895
Safeway Inc Notes	6.350%	8/15/2017		46,658	45,353
Starbucks Corp	6.250%	8/15/2017		40,592	41,556
Genl Elec Cap Corp	5.625%	9/15/2017		16,327	16,602
Bear Stearns Cos Inc	6.400%	10/2/2017		79,727	78,206
Prudential Financial Inc	6.000%	12/1/2017		20,055	22,243
Wells Fargo & Co	5.625%	12/11/2017		79,012	79,767
Amer Intl Group	5.850%	1/16/2018		19,979	19,560
AT&T Inc	5.500%	2/1/2018		50,879	57,877
Verizon Wireless	5.500%	2/15/2018		70,683	75,778
Jeffries Group Inc	5.125%	4/13/2018		39,861	35,200
AMB PPTY	7.500%	6/30/2018		33,265	34,029
MetLife Inc	6.817%	8/15/2018		16,498	17,844
Enterprise Products Oper	6.500%	1/31/2019		38,559	40,757
MetLife Inc	7.717%	2/15/2019		42,995	43,888

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Corporate Bonds & Notes (continued)					
Valero Energy Corp	9.375%	3/15/2019		35,706	38,471
Arcelormittal SA	9.850%	6/1/2019		38,539	33,441
Bank of Amer Corp	7.625%	6/1/2019		68,859	62,053
Vale Overseas Ltd	5.625%	9/15/2019		36,596	38,556
Goldman Sachs Group Inc	5.375%	3/15/2020		57,355	54,422
Nordstrom Inc	4.750%	5/1/2020		37,788	38,793
Genl Elec Cap Corp	4.375%	9/16/2020		68,272	71,532
Dow Chemical Co	4.250%	11/15/2020		36,279	36,381
HCP Inc	5.375%	2/1/2021		40,048	41,936
United Health Group Inc	4.700%	2/15/2021		40,060	44,968
Directv Hldgs	5.000%	3/1/2021		72,798	74,915
Alcoa Inc	5.400%	4/15/2021		40,150	40,074
CVS Caremark Corp	4.125%	5/15/2021		66,549	69,977
Total corporate bonds & notes				<u>\$ 2,748,397</u>	<u>\$ 2,779,814</u>
Common Stocks					
Akzo Nobel			744	39,735	35,395
Anheuser Busch			580	31,006	35,374
Aryzta Ag Adr			1,515	39,978	35,799
AXA Adr			1,100	26,298	14,146
Barclays Plc Adr			3,290	60,245	36,157
Basf Se			410	25,232	28,589
Bayer A G Spon Adr			585	47,963	37,323
BCE Inc			630	19,281	26,252
BG Group Plc			370	34,061	39,590
BNP Paribas			620	24,062	12,183
Bridgestone Corp Ltd			400	17,526	18,000
British Amer Tobacco Plc			545	48,462	51,710
Canadian Natural			1,435	50,572	53,626
Carnival Plc Adr			515	18,533	16,959
China Mobile Ltd			600	31,399	29,094
CNOOC Ltd Spon Adr			125	32,325	21,835
Daimler Ag			775	38,509	33,992
DBS Group Hldgs Ltd Spon Adr			985	35,067	34,889
Fanuc Corp Adr			1,310	35,261	33,143
Fletcher Bldg Ltd Spon Adr			2,757	38,579	26,054
Glaxo SmithKline			855	34,402	39,014
Gold Fields Ltd Spon Adr			2,500	29,999	38,125
H Lundbeck			880	18,499	16,518
HSBC Holdings Plc			1,075	48,155	40,958
Imperial Tobacco Group Plc			425	29,858	32,020

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Common Stocks (continued)			
Indra Sistemas Adr	3,900	39,642	24,492
Itau Unibanco Hldg Sa Adr	1,295	25,131	24,035
Munich RE Group	3,010	44,047	36,963
Murata Mfg Co Ltd	2,800	38,411	35,280
National Grid Plc New Spon Adr	1,215	58,551	59,003
Nestle Sa Spon Adr	1,007	50,177	58,114
Nintendo Ltd Adr New Japan Adr	990	19,316	16,771
Novartis Ag Spon Adr	475	26,653	27,156
NSK Ltd Adr	1,860	25,582	23,436
NTT Docomo Inc	1,525	27,303	27,984
OAO Gazprom Level 1 Adr	2,200	29,113	23,498
Petroleo Brasileiro	560	20,346	13,916
Publicis Groupe	1,565	32,227	35,792
Reckitt Benckiser Group Plc	3,500	36,107	34,440
Rexam Plc	2,100	63,174	57,225
Royal Dutch Shell Plc	895	46,899	65,416
Sanofi Spon Adr	1,835	71,211	67,051
Schneider Elec Sa Adr	2,580	41,807	27,116
Shin Etsu Chem Co Ltd	1,924	27,436	23,627
Siemens A G Spon Adr	410	40,957	39,200
Teva Pharmaceuticals Ind Ltd Israel Adr	365	19,472	14,731
UBS Ag (USD) New 2006 Ord Chf	1,155	13,753	13,664
Unilever NV N Y Shs New Netherlands	1,295	39,357	44,509
Vodafone Group Plc New Spon	1,890	51,804	52,977
Westfarmers Ltd	3,100	41,675	46,376
Westfield Group Spon Adr	1,100	18,685	17,633
Wheelock & Co Ltd Adr	1,090	44,458	26,781
WPP Plc	340	20,495	17,758
Allergan inc	304	24,995	26,673
Amazon.Com Inc	90	18,566	15,579
Amer Express Co	578	28,905	27,264
Amer Tower Corp	350	15,259	21,004
Apple Inc	141	13,987	57,105
Baidu Inc	55	8,145	6,406
Boeing Company	307	22,886	22,518
Capital One Fincl Corp	777	34,997	32,859
Cisco Systems Inc	716	12,795	12,945
Citigroup Inc	1,122	40,865	29,520
Coach Inc	116	6,157	7,081
CVS Caremark Corp	921	33,764	37,558
DuPont De Nemours	296	12,640	13,551
EMC Corp Mass	1,100	28,835	23,694

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Common Stocks (continued)			
Ensco Intl Ltd Spon Adr	302	13,251	14,170
Express Scripts Inc	342	16,902	15,284
Exxon Mobil Corp	534	45,918	45,262
General Motors Co	543	13,347	11,007
Genl Electric Co	2,287	38,897	40,960
Gilead Sciences Inc	169	6,759	6,917
Google Inc Cl A	114	59,721	73,633
Halliburton Co	411	18,907	14,184
Home Depot Inc	688	24,702	28,924
Intel Corp	533	11,893	12,925
Intl Business Mach	243	29,898	44,683
Johnson & Johnson Com	307	20,442	20,133
JPMorgan Chase & Co	1,091	43,631	36,276
Kraft Foods Inc Cl A	553	19,723	20,660
Mastercard Inc Cl A	75	26,093	27,962
McDonalds Corp	274	21,832	27,490
Merck & Co Inc New Com	357	13,015	13,459
MetLife Inc	1,001	42,383	31,211
Microsoft Corp	1,618	43,583	42,003
Monsanto Co New	182	13,384	12,753
News Corp Inc	2,134	35,025	38,071
Nike Inc Cl B	205	19,003	19,756
Oracle Corp	980	22,700	25,137
Pfizer Inc	1,094	21,810	23,674
Philip Morris Intl Inc	286	19,915	22,445
PNC Financial Services Group	256	13,414	14,764
Precision Castparts Corp	158	17,457	26,037
Procter & Gamble Co	106	7,067	7,071
Qualcomm Inc	642	34,905	35,117
Schlumberger Ltd Netherlands	558	39,337	38,117
The Directv Group Cl A	776	28,922	33,182
Union Pacific Corp	303	17,084	32,100
United Parcel Service Inc	198	13,541	14,492
UnitedHealth Group Inc	280	13,933	14,190
Untd Technologies Corp	405	25,794	29,601
Viacom Inc new Cl B	316	16,196	14,350
Walt Disney Co	406	15,394	15,225
Wellpoint Inc	298	20,813	19,743
Alexion Pharmaceuticals Inc	550	18,276	39,325
Allergan Inc	351	19,791	30,897
Amazon.Com Inc	300	22,323	51,930
Apple Inc	175	22,902	70,875

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Common Stocks (continued)			
ASML Holding NV NY	650	\$ 21,457	\$ 27,164
C H Robinson Worldwide Inc	225	15,641	15,700
Coach Inc	350	21,156	21,364
FMC Technologies Inc	610	14,120	31,860
FS Networks Inc	315	33,384	33,428
Google Inc Cl A	90	39,715	58,131
Grainger W W Inc	150	15,250	28,079
Illumina Inc	665	23,423	20,369
InternContinentalExchange Inc	220	19,952	26,521
Intuitive Surgical Inc New	75	9,481	34,726
Las Vegas Sands Corp	675	8,000	28,843
Natl-Oilwellvarco Inc	425	13,704	28,896
Netflix.Com Inc.	125	25,753	8,661
Nike Inc Cl B	345	20,100	33,248
Opentable Inc	145	14,704	5,674
Praxair Inc	240	21,517	25,656
Priceline.Com Inc New	60	29,148	28,063
Qualcomm Inc	900	37,772	49,230
Regeneron Pharmaceuticals Inc	170	10,021	9,423
Salesforce.Com Inc	510	27,438	51,745
Schlumberger Ltd Netherlands	475	32,828	32,447
Schwab Charles Corp New	1,605	30,697	18,072
Sowstn Energy Co	575	20,893	18,366
Starbucks Corp	805	13,328	37,038
Visa Inc Cl A	751	50,114	76,249
AMC Networks Inc Cl A	300	5,361	11,274
Anadarko Petroleum Corp	700	31,480	53,431
Autodesk Inc	895	29,901	27,145
Biogen Idec Inc	730	33,591	80,237
Broadcom Corp	745	17,248	21,873
Cablevision Systems Corp NY	1,200	13,273	17,064
Citrix Systems Inc	300	17,624	18,216
Comcast Corp	3,300	63,044	77,748
Covidien Plc	460	16,234	20,705
Cree Inc	130	2,973	2,865
Dolby Laboratories Inc	595	20,788	18,153
Fluor Corp	540	19,872	27,135
Forest Laboratories	1,600	66,751	48,416
Freeport-McMoran Copper & Gold Inc	395	7,635	14,532
Human Genome Sciences Inc	495	11,970	3,658
Immunogen Inc	1,300	9,870	15,054
Isis Pharmaceuticals Inc	1,100	9,857	7,931

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Common Stocks (continued)			
L-3 Communications Holdings Corp	520	41,304	34,674
Liberty Media Corp Com	310	4,516	24,196
Liberty Interactive Corp Ser A	1,200	25,137	19,458
Natl-Oilwellvarco Inc	360	14,012	24,476
Nucor Corp	630	26,623	24,929
Pall Corp	580	17,154	33,147
Sandisk Corp	690	16,697	33,955
Seagate Technology	2,400	19,382	39,360
The Connectivity Ltd	1,200	29,477	36,972
The Directv Group Cl A	390	7,553	16,676
Tyco Intl Ltd	1,000	30,709	46,710
UnitedHealth Group Inc	1,600	63,809	81,088
Vertex Pharmaceutical Inc	460	12,487	15,277
Weatherford Intl Ltd	2,445	48,538	35,795
Abbott Labs	595	28,232	33,457
Ace Ltd	435	22,776	30,502
Aetna Inc	1,090	32,203	46,116
Apache Corp	405	39,837	36,685
Applied Materials Inc	3,915	47,869	41,930
Archer Daniels Midland Co	1,465	44,700	41,899
Baker Hughes Inc	505	26,589	24,563
Bank of New York Mellon Corp	1,390	38,158	27,675
Baxter Intl Inc	625	3,443	30,925
Chevron Corp	340	23,502	36,176
Cooper Industries Plc New Cl A	550	20,771	29,783
Corning Inc	2,060	39,142	26,739
CVS Caremark Corp	1,085	33,354	44,246
Devon Energy Corp New	595	37,903	36,890
Eaton Corp	715	33,945	31,124
Flextronics Intl Ltd	6,790	38,361	38,431
Halliburton Co	1,170	39,538	40,377
Hess Corp	655	42,050	37,204
Honeywell Intl Inc	780	31,500	42,393
Hospira Inc	950	34,555	28,852
Ingersoll-Rand Plc	900	27,576	27,423
KBR Inc	1,010	20,586	28,149
Medtronic Inc	1,200	39,161	45,900
MetLife Inc	1,290	45,335	40,222
Mosaic Co	695	45,417	35,049
Natl-Oilwellvarco Inc	560	24,790	38,074
Navistar Intl Corp New	730	33,129	27,652
Norfolk Sthn Corp	390	17,237	28,415

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Common Stocks (continued)			
NYSE Euronext	1,035	27,765	27,014
ON Semiconductor Corp	3,810	29,192	29,413
Prudential Financial Inc	545	28,327	27,315
Royal Dutch Shell Plc Cl A	595	41,154	43,489
Target Corp	800	38,453	40,976
Teva Pharmaceuticals Ind Ltd	725	33,933	29,261
Time Warner Inc New	855	19,485	30,900
Unilever N Y Shs New	780	19,447	26,809
Union Pacific Corp	290	16,522	30,723
Vodafone Group Plc New Spon	1,460	41,105	40,924
Western Union Co	2,245	32,186	40,994
Willis Group Holdings Ltd	735	18,210	28,518
Abbott Labs	728	34,627	40,935
Accenture Plc Ireland Cl A	792	28,789	42,158
Ace Ltd	368	22,365	25,804
Air Prod & Chemical Inc	205	15,728	17,464
Altria Group Inc	583	15,576	17,286
Apache Corp	211	20,008	19,112
ASML Holding NV NY Reg Shs New	420	14,234	17,552
AT&T Inc	1,153	29,528	34,867
Bank of New York Mellon Corp	1,944	53,598	38,705
Bank of Amer Corp	2,075	33,027	11,537
Becton Dickinson & Co	292	22,884	21,818
Blackrock Inc	95	18,105	16,933
Chevron Corp	531	38,970	56,498
Comcast Corp New Special Cl A	1,128	25,406	26,576
Danaher Corp	580	27,601	27,283
Diageo Plc New	293	17,298	25,614
Exxon Mobil Corp	556	40,803	47,127
Genl Mills Inc	939	32,892	37,945
Goldman Sachs Group Inc	415	63,733	37,528
Hasbro Inc	907	31,843	28,924
Honeywell Intl Inc	504	21,452	27,392
Intel Corp	676	10,871	16,393
Intl Business Mach	193	25,787	35,489
Johnson Controls Inc	698	24,639	21,819
Johnson & Johnson Com	766	44,939	50,234
JPMorgan Chase & Co	1,726	64,766	57,390
Lockheed Martin Corp	935	71,578	75,642
Medtronic Inc	941	34,189	35,993
Metlife Inc	1,208	42,887	37,665
Nestle A Sponsored Adr	372	14,837	21,468

RETIREMENT PLAN FOR EMPLOYEES OF
FISHER-TITUS MEDICAL CENTER
EIN: 34-4430716 PN: 001
FORM 5500, SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS
HELD FOR INVESTMENT
DECEMBER 31, 2011

	PAR OR NUMBER OF SHARES	COST	CURRENT VALUE
Common Stocks (continued)			
Northrop Grumman Corp	387	16,950	22,632
Occidental Petroleum Crp	295	28,893	27,642
Oracle Corp	1,916	46,984	49,145
Pepsico Inc	308	16,640	20,436
Pfizer Inc	2,432	42,070	52,628
Philip Morris Intl Inc	997	43,548	78,245
PNC Financial Services Group	497	29,448	28,662
PPG Industries Inc	415	23,382	34,648
Prudential Financial Inc	446	22,524	22,354
St Jude Medical Inc	335	11,124	11,491
Stanley Black & Decker Inc	501	29,332	33,968
Target Corp	866	46,826	44,357
Thermo Fisher Scientific Inc	418	21,920	18,797
Travelers Cos Inc/The	570	29,638	33,727
Tyco Intl Ltd	358	17,051	16,722
Untd Technologies Corp	535	34,201	39,203
Viacom Inc New Cl B	616	27,869	27,973
Vodafone Group Plc New Spon Adr	695	13,198	19,481
Walt Disney Co	281	9,604	10,538
3M Co	330	24,008	26,971
Total common stocks		<u>\$ 7,201,549</u>	<u>\$ 7,876,502</u>
Mutual Funds			
Allianz Fixed Income	55,885	\$ 762,967	\$ 696,886
Allianz Fixed Income	64,495	\$ 697,755	\$ 670,748
BlackRock Global Allocation Fund	114,122	\$ 2,012,991	\$ 2,081,591
Total mutual funds		<u>\$ 3,473,713</u>	<u>\$ 3,449,225</u>
Common/collective trust funds			
Strategic Bond Portfolio	217,922	\$ 5,721,118	\$ 6,960,002
Total common/collective trust funds		<u>\$ 5,721,118</u>	<u>\$ 6,960,002</u>