

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 2014 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); 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>BETHESDA RETIREMENT PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1973</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1973</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/1973</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>BETHESDA, INC.</u> <u>619 OAK ST</u> <u>CINCINNATI, OH 45206-1613</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>31-1108895</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>513-569-6251</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>622000</u></td> </tr> <tr> <td style="height: 40px;"></td> </tr> </table>	2b Employer Identification Number (EIN) <u>31-1108895</u>	2c Plan Sponsor's telephone number <u>513-569-6251</u>	2d Business code (see instructions) <u>622000</u>	
2b Employer Identification Number (EIN) <u>31-1108895</u>					
2c Plan Sponsor's telephone number <u>513-569-6251</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	Filed with authorized/valid electronic signature.	10/11/2015	BRIAN KRAUSE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/11/2015	BRIAN KRAUSE
	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
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 7105
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 3502 6a(2) 3417 6b 835 6c 2700 6d 6952 6e 81 6f 7033 6g 6h 73
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A 1C 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE 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 2014 This Form is Open to Public Inspection
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For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

▶ 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 BETHESDA RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BETHESDA, INC.	D Employer Identification Number (EIN) 31-1108895

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 01 Day 01 Year 2014			
2 Assets:			
a Market value	2a	251944176	
b Actuarial value	2b	240991250	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	874	34428124	34428124
b For terminated vested participants.....	2729	67275500	67275500
c For active participants.....	3502	109486637	116812881
d Total.....	7105	211190261	218516505
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	6.28%	
6 Target normal cost	6	6065364	

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

SIGN HERE		09/18/2015
Signature of actuary		Date
TRISHA L. TREML		14-06986
Type or print name of actuary		Most recent enrollment number
HEWITT ASSOCIATES LLC		847-295-5000
Firm name		Telephone number (including area code)
4 OVERLOOK POINT LINCOLNSHIRE, IL 60069-3258		
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 ☐

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)	2201943	8335661
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)	2201943	8335661
10 Interest on line 9 using prior year's actual return of 11.56%	254545	963602
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		16135293
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.14%		990707
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		17126000
d Portion of (c) to be added to prefunding balance		4649120
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)	2456488	13948383

Part III Funding Percentages		
14 Funding target attainment percentage	14	102.77 %
15 Adjusted funding target attainment percentage	15	110.28 %
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	95.04 %
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
06/15/2015	4500000				
			Totals ►	18(b)	4500000
				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	4119110
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No	
c If line 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
0	0	0
		(4) 4th
		0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.99 %	2nd segment: 6.32 %	3rd segment: 6.99 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 0
22 Weighted average retirement age				22 63
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 subject to 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	6065364										
b Excess assets, if applicable, but not greater than line 31a	31b	6065364										
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	0										
		Carryover balance	Prefunding balance									
35 Balances elected for use to offset funding requirement.....	0	0	0									
36 Additional cash requirement (line 34 minus line 35).....	36	0										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	4119110										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	4119110										
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 an election was made to use PRA 2010 funding relief for this plan:			
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		

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
		2014
		This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan BETHESDA RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BETHESDA, INC.	D Employer Identification Number (EIN) 31-1108895

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
ABERDEEN ASSET MANAGEMENT
51-0368279

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
BLACKROCK INSTITUTIONAL TRUST CO
94-3112180

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
BLUECREST CAPITAL MANAGEMENT
98-0607511

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
CAXTON ASSOCIATES LP
22-3430173

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

DODGE AND COX

94-1441976

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

GMO

72-1566419

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

JANA PARTNERS LLC

42-1553256

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

KING STREET CAPITAL MANAGEMENT LP

13-3978904

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

KING STREET MASTER ADVISORS LLC

26-3871197

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

PASSPORT CAPITAL LLC

94-3368567

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

PIMCO

33-0629048

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

PORTFOLIO ADVISORS LLC

06-1487853

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

SCHRODER INVESTMENT MGMT

13-4064414

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

SEI TRUST COMPANY

06-1271230

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

SIGULER GUFF ADVISERS LLC

13-3855629

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

STANDARD PACIFIC CAPITAL LLC

94-3222769

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

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

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

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

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

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

AXIOM ASIA PRIVATE CAPITAL

16 COLLYER QUAY
SINGAPORE, REPUBLIC OF SINGAPORE 49318 SG

(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 51	NONE	7500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ERNST AND YOUNG

34-6565596

(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	40800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FISHER INVESTMENTS

20-2480800

(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 31 50 51 55 68 71	NONE	31313	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

FORT WASHINGTON INVESTMENT ADVISORS

31-1301863

(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 51 52 68 71	NONE	76053	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

HEWITT ASSOCIATES LLC

36-2235791

(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 50	NONE	178878	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTEGRITY ASSET MGMT LLC

38-3212521

(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 51 68	NONE	11383	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)

LOOMIS SAYLES AND CO LP

30-0471038

(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 51	NONE	61960	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NEPC

255 STATE STREET
BOSTON, MA 02109

(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?
17 50	NONE	72987	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PERFECTION PRINTING

9560 LESANT DRIVE
FAIRFIELD, OH 45014

(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?
49 50	NONE	5980	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)

STATE STREET BANK

04-1867445

(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?
26 50	NONE	121403	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WELLINGTON TRUST COMPANY

04-2755549

(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 51	NONE	34211	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

WENTWORTH HAUSER AND VIOLICH

91-1631301

(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 51 68	NONE	7234	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

WESTERN ASSET MANAGEMENT

95-2705767

(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 51	NONE	30608	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WESTFIELD CAPITAL MANAGEMENT CO

ONE FINANCIAL CENTER
23RD FLOOR
BOSTON, MA 02111

(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 51	NONE	57334	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>BETHESDA RETIREMENT PLAN</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BETHESDA, INC.</u>		D Employer Identification Number (EIN) <u>31-1108895</u>

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	13200000	4500000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	645596	120629
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	25005793	5724964
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	24354679	14621930
(5) Partnership/joint venture interests	1c(5)	50462424	91273551
(6) Real estate (other than employer real property).....	1c(6)	12243667	9499907
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	61231388	82192793
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	63716881	45629343

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	250860428	253563117

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	133322	111518
i Acquisition indebtedness	1i		
j Other liabilities	1j	2757302	21567
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2890624	133085

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	247969804	253430032
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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)	11600000	
(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)		11600000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	-512	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	37146	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		36634
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	300566	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3490827	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		3791393
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	1101232	
(B) Other	2b(5)(B)	9387210	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		10488442

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-544292
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		25372177

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	15958673	
(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)		15958673
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)	414068	
(2) Contract administrator fees.....	2i(2)	31313	
(3) Investment advisory and management fees.....	2i(3)	291925	
(4) Other.....	2i(4)	356065	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		1093371
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		17052044

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		8320133
l Transfers of assets:			
(1) To this plan.....	2l(1)		93482
(2) From this plan.....	2l(2)		2953387

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: ERNST & YOUNG LLP

(2) EIN: 34-6565596

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

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

Part IV Compliance Questions

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

During the plan year:

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

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.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
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	
4c			
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	
4d			
e Was this plan covered by a fidelity bond?	X		500000
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f			
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	
4g			
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	
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X		
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k			
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			
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)
TRIHEALTH RETIREMENT PLAN	31-1438846	001

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ☒ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

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 2014 This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan <u>BETHESDA RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BETHESDA, INC.</u>	D Employer Identification Number (EIN) <u>31-1108895</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<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>04-3581074</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>289</u>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☒ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (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
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☒ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of 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 line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

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

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

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

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

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

Stock: 6% Investment-Grade Debt: 0% High-Yield Debt: 0% Real Estate: 4% Other: 90%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☒ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate line 19(b)?

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

FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES

Bethesda Retirement Plan
Years Ended December 31, 2014 and 2013
With Report of Independent Auditors

Ernst & Young LLP



Building a better
working world

Bethesda Retirement Plan
Financial Statements and Supplemental Schedules

Years Ended December 31, 2014 and 2013

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Report of Independent Auditors

The Personnel and Pension Committee
Bethesda, Inc. and Subsidiaries

We have audited the accompanying financial statements of the Bethesda Retirement Plan, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in conformity with U.S. generally accepted accounting principles; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free of material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Bethesda Retirement Plan at December 31, 2014, and the changes in its net assets available for benefits for the year then ended, and the financial status of Bethesda Retirement Plan at December 31, 2013, and the changes in its financial status for the year then ended, in conformity with U.S. generally accepted accounting principles.

Supplemental Schedules

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying supplemental schedules of assets (held at end of year) as of December 31, 2014, and reportable transactions for the year then ended, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of management, and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Ernst & Young LLP

October 9, 2015

Bethesda Retirement Plan

Statements of Net Assets Available for Benefits

	December 31	
Assets	2014	2013
Investments, at fair value		
Cash	\$ 15,139	\$ 8,397,870
Money market funds	5,709,825	16,607,923
Domestic equity securities	13,586,847	20,269,701
Foreign equity securities	1,035,083	4,084,978
Mutual funds – fixed income	49,237,030	13,897,481
Mutual funds – equity	956,959	4,259,130
Mutual funds – multi-asset	31,998,804	31,737,011
Limited liability companies	–	20,222,641
Real estate investment trusts	9,499,907	12,243,667
Hedge funds	24,598,926	30,092,741
Private equity funds	19,177,561	19,672,106
Limited partnerships	91,273,551	51,508,076
Commingled fund	1,852,856	4,021,507
Total investments, at fair value	<u>248,942,488</u>	<u>237,014,832</u>
Receivables:		
Contribution from employer	4,500,000	13,200,000
Accrued income	120,629	645,596
Total receivables	<u>4,620,629</u>	<u>13,845,596</u>
Total assets	<u>253,563,117</u>	<u>250,860,428</u>
Liabilities and net assets available for benefits		
Accrued administrative fees	111,518	133,322
Payable for investment purchased	21,567	2,757,302
Total liabilities	<u>133,085</u>	<u>2,890,624</u>
Net assets available for benefits	<u>\$ 253,430,032</u>	<u>\$ 247,969,804</u>

See accompanying notes.

Bethesda Retirement Plan

Statements of Changes in Net Assets Available for Benefits

	December 31	
	2014	2013
Additions		
Employer contributions	\$ 11,600,000	\$ 21,800,000
Transfer from Good Samaritan Retirement Plan	93,482	580,109
Investment income	3,828,027	4,050,760
Total additions	<u>15,521,509</u>	<u>26,430,869</u>
Deductions		
Benefits paid to participants	15,958,673	13,338,302
Administrative expenses	1,093,371	1,255,970
Transfer to TriHealth, Inc. Retirement Plan	2,953,387	851,373
Total deductions	<u>20,005,431</u>	<u>15,445,645</u>
Net appreciation in fair value of investments	<u>9,944,150</u>	22,781,959
Increase in net assets available for benefits	5,460,228	33,767,183
Net assets available for benefits at beginning of the year	<u>247,969,804</u>	214,202,621
Net assets available for benefits at end of the year	<u><u>\$ 253,430,032</u></u>	<u><u>\$ 247,969,804</u></u>

See accompanying notes.

Bethesda Retirement Plan

Notes to Financial Statements

December 31, 2014

1. Description of the Plan

The following description of the Bethesda Retirement Plan (the Plan) provides general information about the Plan's provisions. Bethesda Hospital, Inc. (the Company) is the plan sponsor. Participants should refer to the plan document and summary plan description for a more complete description of the Plan's provisions, copies of which may be obtained from the plan sponsor. The Good Samaritan Hospital of Cincinnati, Ohio, which sponsors the Good Samaritan Retirement Plan, and TriHealth, Inc., which sponsors the TriHealth, Inc. Retirement Plan, are related parties to the Company. The Plan received plan assets of \$93,482 and \$580,109 from the Good Samaritan Retirement Plan during 2014 and 2013, respectively, as the result of personnel transfers between the related plan sponsors. Furthermore, the Plan transferred plan assets of \$2,953,387 and \$851,373 to the TriHealth, Inc. Retirement Plan during 2014 and 2013, respectively, as the result of personnel transfers between the related plan sponsors.

General

The Plan is a non-contributory defined benefit plan which covers substantially all employees of the Company, and certain other subsidiaries of Bethesda, Inc., parent to the Company. The Plan provides for retirement, death, and disability benefits, and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The following description of the Plan outlines only general information. Information about the plan agreement, the vesting and benefit provisions, and the guaranty of the Pension Benefit Guaranty Corporation (PBGC) is contained in the pamphlet, *Bethesda Retirement Plan Summary Plan Description*. Copies of this pamphlet are available from the TriHealth, Inc. Human Resources department.

The Bethesda Retirement Committee is responsible for the general administration of the Plan. State Street Corporation is the trustee of the Plan. The Board of Directors of the Company approved the freeze of the Plan effective January 1, 2015. As a result, the active participants in the Plan will no longer accrue future benefits, but will be provided interest credits until they commence their benefits.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

1. Description of the Plan (continued)

Eligibility and Vesting

An eligible employee becomes a participant in the Plan upon completion of 1,000 hours of service with the Company. Active participants become fully vested upon the earliest of the completion of three years of service or attainment of age 65.

Benefits

Participants are entitled to monthly pension benefits beginning at the age of 55. Under the Plan's formula, a participant's benefit is calculated based on an accumulation of credits that are earned each year based on the participant's age and years of service multiplied by the average five highest consecutive years of compensation through 2014. Participants may also receive an additional benefit if their pay is over the Social Security Covered Compensation limit.

After reaching age 55, terminated participants may elect to receive the value of their accumulated Plan benefits as a lump-sum distribution or as an annuity payable monthly. Terminated participants whose accumulated Plan benefits are less than \$5,000 will automatically receive his or her benefit in the form of a lump-sum payment.

Funding

The Company has agreed to voluntarily contribute such additional amounts as are necessary to provide assets sufficient to meet the benefits to be paid to participants. The Company's present intention is to make annual contributions in amounts sufficient to fund the Plan's current-year service cost, and the initial past service cost plus interest over a period of 30 years. The Plan has met the ERISA minimum funding requirements for both 2014 and 2013.

Plan Termination

Although it has not expressed an intention to do so, the Company reserves the right under the Plan to discontinue its contributions at any time, and to terminate the Plan subject to the provisions of ERISA. Upon termination, the net assets available for benefits of the Plan will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the plan document.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

1. Description of the Plan (continued)

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets available for benefits to provide for accumulated plan benefits, and may also depend on the financial condition of the Company and the level of benefits guaranteed by the PBGC, as well as the priority of those benefits. Some benefits may be fully or partially provided for by the then-existing net assets available for benefits of the Plan and the PBGC guarantee, while other benefits may not be provided for at all.

Payable for Investment Purchase

The Plan follows trade date accounting for the purchase and sale of investments. As a result, at the statements of net assets available for benefits date, certain investment purchases and sale transactions have been initiated but not settled. The payable for investment purchases was \$21,567 and \$2,757,302 as of December 31, 2014, and 2013, respectively.

2. Significant Accounting Policies

Basis of Accounting

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

Payment of Benefits

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles (GAAP) requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes and supplemental schedules. Actual results could differ from those estimates.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is defined under Financial Accounting Standards Board Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, as 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 (an exit price). See Note 4 for further discussion of fair value measurements.

To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1), and the lowest priority to unobservable inputs (Level 3).

In accordance with ASC 820, assets and liabilities measured at fair value are categorized into the following fair value hierarchy:

Level 1 – Fair value is based on unadjusted quoted prices for identical assets or liabilities in an active market that the Plan has the ability to access at the measurement date.

Level 2 – Fair value is based on quoted prices in markets that are not active, quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the asset or liability.

- Quoted prices for similar assets and liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in markets that are not active
- Observable inputs other than quoted prices that are used in the valuation of the asset or liabilities (e.g., interest rate and yield curve quotes at commonly quoted intervals)
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means

Bethesda Retirement Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

Level 3 – Fair value is based on prices or valuation techniques that require inputs that are both significant to the fair value measurements and unobservable. These inputs reflect management's judgment about the assumptions that a market participant would use in pricing the investment, and are based on the best available information, some of which may be internally developed.

The level in the fair value hierarchy within which the fair value measurement is classified is determined based on the lowest level input that is significant to the fair value measure in its entirety.

The TriHealth, Inc. Finance Committee (the Finance Committee) is responsible for determining the Plan's valuation policies and analyzing information provided by the investment custodians and issuers that is used to determine the fair value of the Plan's investments. The Finance Committee is comprised of various committee members and reports to the Audit Committee of the Board of Directors of the Company. For instruments categorized within Level 3 of the fair value hierarchy the Finance Committee information about the Plan's valuation process is required to be disclosed under ASC 820, see Note 4.

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

In order to meet the requirements of ASC 820, the Plan utilizes three basic valuation approaches to determine the fair value of its assets and liabilities required to be recorded at fair value. The first approach is the cost approach. The cost approach is generally the value a market participant would expect to replace the respective asset or liability. The second approach is the market approach. The market approach looks at what a market participant would consider an exact or similar asset or liability to that of the Plan, including those traded on exchanges, to be valued at. The third approach is the income approach. The income approach uses estimation techniques to determine the estimated future cash flows of the Plan's respective asset or liability expected by a market participant, and discounts those cash flows back to present value (more typically referred to as a discounted cash flow approach).

The global financial markets and banking system are subject to volatility, which could adversely impact the Plan. Certain of the Plan's assets and liabilities are exposed to various risks, such as interest rate, market, and credit risks.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

New Accounting Pronouncements

In May 2015, the FASB issued Accounting Standards Update (ASU) 2015-07, *Disclosures for Investments in Certain Entities that Calculate Net Asset Value Per Share (or its Equivalent)*, (ASU 2015-07). ASU 2015-07 removes the requirement to categorize within the fair value hierarchy investments for which fair values are estimated using the net asset value practical expedient provided by – ASC 820. Disclosures about investments in certain entities that calculate net asset value per share are limited under ASU 2015-07 to those investments for which the entity has elected to estimate the fair value using the net asset value practical expedient. ASU 2015-07 is effective for entities (other than public business entities) for fiscal years beginning after December 15, 2016, with retrospective application to all periods presented. Early application is permitted. Management is currently evaluating the effect that the provisions of ASU 2015-07 will have on the Plan's financial statements.

In July 2015, the FASB issued ASU 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient*. Part I of ASU 2015-12 eliminates the requirements to measure the fair value of fully benefit-responsive investment contracts and provide certain disclosures. Contract value is the only required measure for fully benefit-responsive investment contracts. Part II of the ASU 2015-12 eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. It also simplifies the level of disaggregation of investments that are measured using fair value. Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to also disaggregate investments by nature, characteristics and risks. Further, the disclosure of information about fair value measurements shall be provided by general type of plan asset. Part III of the ASU 2015-12 allows a plan with a fiscal year end that doesn't coincide with the end of a calendar month to measure its investments and investment-related accounts using the month end closest to its fiscal year end. The ASU 2015-12 is effective for fiscal years beginning after December 15, 2015. Parts I and II are to be applied retrospectively. Part III is to be applied prospectively. Plans can early adopt any of the ASU 2015-12's three parts without early adopting the other parts. Management is currently evaluating the effect that the provisions of Part II of ASU 2015-12 will have on the Plan's financial statements. Part I and Part III is not applicable to the Plan.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits (Note 3) represent the actuarial present value of estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees to the valuation date. Accumulated plan benefits, which include benefits expected to be paid to retired or terminated employees or their beneficiaries, are based on credits earned using the employee's age and highest five-year average compensation. The accumulated Plan benefits for active employees are based on the average of their five highest consecutive years of compensation through 2014. Participants also receive an additional benefit if their pay is over the Social Security Covered Compensation Limit. Benefits payable under all circumstances – retirement, death, disability, and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

Reclassifications

Certain prior year amounts in the statement of net assets available for benefits have been reclassified to conform to the current year presentation.

3. Accumulated Plan Benefits

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

The accumulated plan benefit information as of December 31, 2013, is as follows:

Actuarial present value of accumulated plan benefits:

Vested benefits:

Participants currently receiving benefits

\$ 33,572,544

Other vested benefits

160,296,673

Total vested benefits

193,869,217

Non-vested benefits

3,438,489

Total actuarial present value of accumulated plan benefits

\$ 197,307,706

Bethesda Retirement Plan

Notes to Financial Statements (continued)

3. Accumulated Plan Benefits (continued)

The changes in accumulated plan benefits between January 1, 2013 and December 31, 2013, were as follows:

Actuarial present value of accumulated plan benefits at January 1, 2013	\$ 190,545,341
Increase during the year attributed to:	
Interest accumulated	13,795,654
Benefits paid	(13,338,302)
Assumption changes	2,438,049
Other changes ^(a)	4,089,796
Net increase	<u>6,762,365</u>
Actuarial present value of accumulated plan benefits at December 31, 2013	<u>\$ 197,307,706</u>

^(a) The other changes component represents the normal operations of the pension plan. It consists primarily of the increase due to ongoing benefit accruals and those items of plan experience that are not associated with plan asset performance.

Significant assumptions underlying the actuarial valuation are as follows:

Assumed rate of return on investments	7.50% (7.50% in 2013)
Mortality basis	RP- 2014 Combined Healthy Mortality Table (RP-2000 Combined Healthy Mortality Table in 2013)
Retirement rate – active participants	Various rates, ranging from 6% at age 55 to 100% at age 70 and over

These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The actuary estimated the accumulated plan benefits as of January 1, 2014. There were no significant changes to the Plan that would have changed the valuations had they been performed as of December 31, 2014.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements

The following tables set forth by level, within the fair value hierarchy, the Plan's assets carried at fair value as of December 31:

	2014			
	Level 1	Level 2	Level 3	Total
Assets				
Cash	\$ 15,139	\$ —	\$ —	\$ 15,139
Money market funds	—	5,709,825	—	5,709,825
Domestic equity securities	13,586,847	—	—	13,586,847
Foreign equity securities	1,035,083	—	—	1,035,083
Mutual funds:				
Fixed income	49,237,030	—	—	49,237,030
Equity	956,959	—	—	956,959
Multi-asset	31,998,804	—	—	31,998,804
Alternative investments:				
Real estate investment trusts ^(b)	—	—	9,499,907	9,499,907
Hedge funds ^(c)	—	24,598,926	—	24,598,926
Private equity funds ^(d)	—	—	19,177,561	19,177,561
Limited partnerships: ^(e)				
Fixed income	—	39,236,971	6,418,870	45,655,841
Multi-asset	—	13,323,673	—	13,323,673
Equity	—	31,471,697	—	31,471,697
Real asset	—	822,340	—	822,340
Commingled fund ^(f)	—	1,852,856	—	1,852,856
Total assets at fair value	<u>\$ 96,829,862</u>	<u>\$ 117,016,288</u>	<u>\$ 35,096,338</u>	<u>\$ 248,942,488</u>

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

	2013			
	Level 1	Level 2	Level 3	Total
Assets				
Cash	\$ 8,397,870	\$ —	\$ —	\$ 8,397,870
Money market funds	—	16,607,923	—	16,607,923
Domestic equity securities	20,269,701	—	—	20,269,701
Foreign equity securities	4,084,978	—	—	4,084,978
Mutual funds:				
Fixed income	13,897,481	—	—	13,897,481
Equity	4,259,130	—	—	4,259,130
Multi-asset	31,737,011	—	—	31,737,011
Alternative investments:				
Limited liability companies ^(a)	—	20,222,641	—	20,222,641
Real estate investment trusts ^(b)	—	—	12,243,667	12,243,667
Hedge funds ^(c)	—	30,092,741	—	30,092,741
Private equity funds ^(d)	—	—	19,672,106	19,672,106
Limited partnerships: ^(e)				
Fixed income	—	9,627,211	5,176,812	14,804,023
Multi-asset	—	7,024,109	—	7,024,109
Equity	—	29,679,944	—	29,679,944
Commingled fund ^(f)	—	4,021,507	—	4,021,507
Total assets at fair value	\$ 82,646,171	\$ 117,276,076	\$ 37,092,585	\$ 237,014,832

^(a)These limited liability companies redeem at NAV as of statement of net assets available for benefits date with monthly redemption option with 10 day notice. There are currently no redemption restrictions on these investments.

^(b)The investment objective is to invest in commercial real estate properties and real estate related assets. These real estate investments trusts investments are locked up for the term of the fund, or deemed no immediate liquidity.

^(c)These hedge funds redeem at NAV as of statement of net assets available for benefits date and have a quarterly redemption option with 45 day notice.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

- ^(d)The investment objective is to achieve long-term capital appreciation through diversified portfolio of leveraged buyout, growth equity, venture capital, structured equity, and distressed debt investment opportunities throughout the globe. These Private equity funds are locked up for the term of the fund, or deemed no immediate liquidity.
- ^(e)The investment objective is to achieve long-term capital growth. These limited partnerships companies redeem at NAV as of balance sheet date with monthly redemption option with 10 day notice. There are currently no redemption restrictions on these investments. The Limited Partnerships stated in Level 3 are locked up for the term of the fund, or deemed no immediate liquidity.
- ^(f)The commingled funds redeem at NAV as of statement of net assets available for benefits date with monthly redemption option with 10 day notice. There are currently no redemption restrictions on these investments.

The following is a description of the valuation methodologies used for plan assets measured at fair value.

The Plan's financial instruments based on quoted market prices in markets that are active, with reasonable levels of price transparency, include marketable equity securities (domestic and foreign), mutual funds (fixed income, equity, and multi-asset), and cash. Such instruments are classified within Level 1 of the fair value hierarchy. The Plan does not adjust the quoted market price for such financial instruments. The types of financial instruments valued based on quoted market prices in markets that are not active, broker or dealer quotations, or alternative pricing sources, including matrix pricing, with reasonable levels of price transparency, include money market funds. Such financial instruments are classified within Level 2 for the fair market value hierarchy.

Alternative investments, which consist of hedge funds, private equity funds, limited partnerships, real estate investment funds, commingled funds, and limited liability companies, are not necessarily readily marketable, and may include short sales on securities and trading in future contracts, options, foreign currency contracts, other derivative instruments, and private equity investments. However, plan management has determined that the net asset value (NAV) is an appropriate estimate of the fair value of its alternative investments based on the fact that the alternative investments are audited and accounted for at fair value by the administrators of the

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

respective alternative investments. If the Plan has the ability to redeem its investment in the respective alternative investment at the NAV with no significant restrictions on the redemption at the statements of net assets available for benefit date, the Plan has categorized the alternative investment as a Level 2 measurement in the fair value hierarchy. If the Plan does not have the ability to redeem the alternative investment at NAV at the statements of net assets available for benefit date, due to significant restrictions, the Plan has categorized the alternative investment as a Level 3 measurement in the fair value hierarchy. These investments are entered in to diversify the portfolio.

Following is the summary of the inputs and valuation techniques, as of December 31, 2014 and 2013, used for valuing Level 2 securities in the portfolio:

Securities	Input	Valuation Technique
Hedge funds	NAV	Market/income
Limited liability companies	NAV	Market/income
Commingled fund	NAV	Market/income
Limited partnerships	NAV	Market/income
Money market funds	Broker/Dealer	Market/income

Following is the summary of the inputs and valuation techniques as of December 31, 2014 and 2013, used for valuing Level 3 securities in the portfolio:

Securities	Input	Valuation Technique
Private equity funds	NAV	Income
Real estate investment trusts	NAV	Income
Limited partnerships	NAV	Income

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets as of December 31:

	2014	2013
Private equity funds		
Balance, beginning of year	\$ 19,672,106	\$ 20,309,057
Unrealized gains relating to instruments still held at the reporting date	4,204,598	2,398,469
Unrealized losses relating to instruments still held at the reporting date	—	(141,338)
Purchases	1,453,579	1,751,443
Sales	(6,152,722)	(4,645,525)
Balance, end of year	<u>\$ 19,177,561</u>	<u>\$ 19,672,106</u>
Limited partnerships		
Balance, beginning of year	\$ 5,176,812	\$ 6,175,541
Unrealized gains relating to instruments still held at the reporting date	499,361	669,033
Purchases	2,737,353	1,276,293
Sales	(1,994,656)	(2,944,055)
Balance, end of year	<u>\$ 6,418,870</u>	<u>\$ 5,176,812</u>
	2014	2013
Real estate investment funds		
Balance, beginning of year	\$ 12,243,667	\$ 12,187,213
Unrealized gains relating to instruments still held at the reporting date	1,104,681	1,466,174
Unrealized losses relating to instruments still held at the reporting date	(3,449)	(50,624)
Purchases	201,080	362,259
Sales	(4,046,072)	(1,721,355)
Balance, end of year	<u>\$ 9,499,907</u>	<u>\$ 12,243,667</u>

Bethesda Retirement Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

The change in unrealized gains (losses) relating to instruments still held at the reporting date is included in net appreciation in fair value of investments.

For Level 3 securities, when observable prices are not available, the investment manager might use one or more valuation techniques, such as the income approach, for which sufficient and reliable data is available. Within Level 3, the use of the income approach generally consists of using either the guideline company method or similar transaction method while the income approach generally consists of the net present value of estimated future cash flows, adjusted as appropriate for liquidity, credit, market, and/or other risk factors. Significant increases (decreases) in any of those observable inputs in isolation would result in a significantly lower (higher) fair value measurement. The impact of these changes would be recognized over a period of time in accordance with applicable accounting guidance.

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

Bethesda Retirement Plan

Notes to Financial Statements (continued)

5. Investments

The fair value of individual investments that represent 5% or more of the Plan's net assets available for benefits at December 31 is as follows:

	2014	2013
Mutual funds – multi-asset:		
Pimco All Asset All Authority	\$ 15,623,602	\$ 15,558,119
GMO Benchmark Free Allocation	16,375,202	16,178,892
Mutual Funds – fixed income:		
Pimco Extended Duration	16,491,400	(a)
Pimco Long Duration	21,542,258	(a)
Pimco Unconstrained Bond Fund	(a)	13,897,481
Money Market:		
State Street Bank & Trust Co	(a)	16,607,923
Hedge funds:		
Drake Capital Offshore Partners	(a)	13,201,160
Limited Partnerships and Other:		
AQR	13,323,673	(a)
GAM	13,981,468	(a)
Loomis Credit	14,299,963	(a)

(a) Investment is less than 5% at respective date.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

5. Investments (continued)

The Plan's investments (including investments bought and sold, as well as held, during the year) appreciated in fair value for the year ended December 31 as follows:

	<u>2014</u>	<u>2013</u>
Domestic equity securities	\$ 1,728,135	\$ 6,493,906
Foreign equity securities	(116,019)	865,762
Mutual funds – fixed income	1,183,754	1,032,578
Mutual funds – equity	126,278	(104,654)
Mutual funds – multi-asset	(1,854,324)	2,872,164
Limited liability companies	194,171	618,364
Real estate investment trusts	1,101,232	1,415,550
Hedge funds	1,092,733	1,702,583
Private equity funds	4,204,598	2,257,131
Limited partnerships	2,476,311	5,877,985
Commingled fund	(192,719)	(213,410)
	<u>\$ 9,944,150</u>	<u>\$ 22,781,959</u>

At December 31, 2014, the Plan has committed capital yet to be called of \$15,047,586 to private equity funds over the next one to three years.

6. Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS), dated March 31, 2012, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, the related trust is exempt from taxation. Subsequent to this determination by the IRS, the Plan was amended and restated. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan Administrator believes the Plan is being operated in compliance with the applicable requirements of the Code, and therefore believes the Plan, as amended and restated, is qualified, and the related trust is tax exempt.

Bethesda Retirement Plan

Notes to Financial Statements (continued)

6. Tax Status (continued)

GAAP requires plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2014 and 2013, there are no uncertain positions taken or expected to be taken. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2011.

7. Related-Party Transactions

Certain of the Plan's assets are invested in funds managed by the trustee of the Plan. These transactions qualify as party-in-interest transactions; however, they are exempt from the prohibited transactions rules under ERISA.

8. Administrative Expenses

The Plan incurs administrative expenses directly related to the Plan, which consist primarily of trustee fees for investments, PBGC fees, and actuarial fees. These expenses are reported on the statements of changes in net assets available for benefits as administrative expenses. Expenses relating to purchases, sales, or transfers of the Plan's investments are charged to the particular investment fund to which the expenses relate. All other administrative expenses are paid by the Company on behalf of the Plan.

9. Risks and Uncertainties

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

Bethesda Retirement Plan

Notes to Financial Statements (continued)

9. Risks and Uncertainties (continued)

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

10. Subsequent Events

Management has evaluated and disclosed subsequent events through October 9, 2015, which is the date the accompanying financial statements were issued and made available. No recognized or non-recognized subsequent events were identified for recognition or disclosure in the accompanying financial statements, except as disclosed below.

Supplemental Schedules

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
CASH			
US DOLLAR	\$ 15,109	\$ 15,109	\$ 15,109
US DOLLAR	30	30	30
TOTAL CASH		15,139	15,139
MONEY MARKET FUNDS			
STATE STREET BANK + TRUST CO	119,415	119,415	119,415
STATE STREET BANK + TRUST CO	243	243	243
STATE STREET BANK + TRUST CO	3,887,292	3,887,292	3,887,292
STATE STREET BANK + TRUST CO	494,687	494,687	494,687
STATE STREET BANK + TRUST CO	4,949	4,949	4,949
STATE STREET BANK + TRUST CO	647,685	647,685	647,685
STATE STREET BANK + TRUST CO	4,601	4,601	4,601
STATE STREET BANK + TRUST CO	550,953	550,953	550,953
TOTAL MONEY MARKET FUNDS		5,709,825	5,709,825
DOMESTIC EQUITY SECURITIES			
SIGNET JEWELERS LTD	970	75,117	127,623
JAZZ PHARMACEUTICALS PLC	735	97,671	120,342
ENDO INTERNATIONAL PLC	2,140	140,319	154,337
ACTAVIS PLC	860	139,865	221,373
TEVA PHARMACEUTICAL SP ADR	2,980	139,822	171,380
SHIRE PLC ADR	860	156,799	182,784
LIBERTY GLOBAL PLC SERIES C	2,580	105,571	124,640
HELEN OF TROY LTD	1,446	64,676	94,077
AGRIUM INC	1,566	137,913	148,332
SCHLUMBERGER LTD	1,419	124,321	121,197
ORANGE SPON ADR	8,607	114,421	145,630
CARNIVAL CORP	4,107	142,271	186,170
ROYAL CARIBBEAN CRUISES LTD	2,279	77,230	187,858
NOVARTIS AG SPONSORED ADR	2,277	196,333	210,987
ALEXANDER + BALDWIN INC	1,910	76,610	74,987
F5 NETWORKS INC	430	51,783	56,100
VF CORP	1,050	69,524	78,645

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
COPART INC	2,750	\$ 100,281	\$ 100,348
STERIS CORP	2,260	128,682	146,561
FACEBOOK INC A	1,520	84,497	118,590
MICROSOFT CORP	4,230	194,869	196,484
APPLE INC	3,444	281,892	380,149
QUALCOMM INC	1,150	86,587	85,480
RED HAT INC	1,250	66,059	86,425
PALO ALTO NETWORKS INC	840	70,764	102,959
VISA INC CLASS A SHARES	475	99,620	124,545
ARIAD PHARMACEUTICALS INC	5,420	36,855	37,235
CAVIUM INC	1,400	66,607	86,548
SALESFORCE.COM INC	1,760	97,095	104,386
STARBUCKS CORP	1,350	103,474	110,768
SERVICENOW INC	1,640	102,623	111,274
GOOGLE INC CL C	230	126,181	121,072
GOOGLE INC CL A	230	126,966	122,052
CUBIST PHARMACEUTICALS INC	2,340	159,410	235,521
COSTCO WHOLESALE CORP	790	103,164	111,983
PRICELINE GROUP INC/THE	116	138,150	132,264
ON SEMICONDUCTOR CORP	5,670	57,356	57,437
CITIGROUP INC	1,310	73,635	70,884
AMERIPRISE FINANCIAL INC	550	61,496	72,737
JACK IN THE BOX INC	980	68,327	78,361
B+G FOODS INC	2,630	86,413	78,637
AUTODESK INC	1,340	66,263	80,480
VERIFONE SYSTEMS INC	2,290	65,203	85,188
CONSOL ENERGY INC	2,750	105,135	92,978
EASTMAN CHEMICAL CO	1,340	103,094	101,652
JARDEN CORP	2,150	90,999	102,942
NATIONAL OILWELL VARCO INC	1,600	113,307	104,848
EMC CORP/MA	3,570	109,333	106,172
POLARIS INDUSTRIES INC	720	100,282	108,893
MEAD JOHNSON NUTRITION CO	1,090	108,334	109,589
CBRE GROUP INC A	3,210	82,818	109,943
IHS INC CLASS A	995	117,392	113,311

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
DANAHER CORP	1,400	\$ 107,156	\$ 119,994
ALLIANCE DATA SYSTEMS CORP	440	110,295	125,862
WALT DISNEY CO/THE	1,380	99,912	129,982
TWENTY FIRST CENTURY FOX A	3,510	118,150	134,802
UNITED CONTINENTAL HOLDINGS	2,030	86,220	135,787
MONSANTO CO	1,200	135,745	143,364
COMCAST CORP CLASS A	2,830	152,403	164,168
CELGENE CORP	2,850	238,734	318,801
HOME DEPOT INC	1,160	97,697	121,765
VERIZON COMMUNICATIONS INC	1,800	87,107	84,204
COOPER COS INC/THE	680	86,360	110,221
TESORO CORP	1,770	98,621	131,600
THERMO FISHER SCIENTIFIC INC	640	69,485	80,186
CATERPILLAR INC	930	82,705	85,123
PACCAR INC	1,490	90,995	101,335
STARWOOD PROPERTY TRUST INC	3,080	85,778	71,579
II VI INC	6,584	108,491	89,872
JM SMUCKER CO/THE	1,275	132,906	128,750
RELIANCE STEEL + ALUMINUM	2,392	174,048	146,558
ABBOTT LABORATORIES	5,677	202,972	255,579
MONDELEZ INTERNATIONAL INC A	7,675	214,893	278,794
MICROSOFT CORP	3,028	108,805	140,651
APPLE INC	1,738	141,765	191,840
BIO RAD LABORATORIES A	1,165	138,068	140,451
ALTERA CORP	1,866	57,510	68,930
GOOGLE INC CL C	203	77,175	106,859
GOOGLE INC CL A	203	77,654	107,724
CISCO SYSTEMS INC	6,559	149,960	182,438
TIME WARNER CABLE	314	21,386	47,746
WESCO INTERNATIONAL INC	1,401	115,841	106,770
NATIONAL OILWELL VARCO INC	2,078	139,950	136,171
ORACLE CORP	3,052	118,259	137,248
AMAZON.COM INC	465	146,359	144,313
BERRY PLASTICS GROUP INC	4,700	109,688	148,285
WORLD FUEL SERVICES CORP	3,279	128,155	153,883

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
AGCO CORP	3,769	\$ 202,948	\$ 170,359
GOLDMAN SACHS GROUP INC	1,595	244,562	309,158
BANK OF NEW YORK MELLON CORP	9,101	250,220	369,227
BANK OF AMERICA CORP	20,773	400,161	371,628
GENERAL ELECTRIC CO	8,195	210,563	207,088
DEVON ENERGY CORP	1,566	99,737	95,855
JOY GLOBAL INC	2,359	122,561	109,741
AVNET INC	3,722	139,715	160,120
SYSCO CORP	5,192	164,796	206,070
KENNAMETAL INC	4,421	182,686	158,227
OWENS + MINOR INC	5,309	167,617	186,399
HALLIBURTON CO	1,937	77,501	76,182
TOTAL DOMESTIC EQUITY SECURITIES		11,867,724	13,586,847
FOREIGN EQUITY SECURITIES			
COMMONWEALTH BK AUS SP ADR	90	5,597	6,274
CSL LTD SPONSORED ADR	710	17,848	25,099
ANHEUSER BUSCH INBEV SPN ADR	200	14,530	22,464
CIELO SA SPONSORED ADR	777	9,541	12,214
AMBEV SA ADR	945	6,303	5,878
ROGERS COMMUNICATIONS INC B	120	5,751	4,663
TORONTO DOMINION BANK	155	6,346	7,406
CANADIAN NATL RAILWAY CO	164	8,395	11,301
SANDS CHINA LTD UNSPONS ADR	330	13,930	16,251
TENCENT HOLDINGS LTD UNS ADR	2,115	15,192	30,689
BAIDU INC SPON ADR	39	6,892	8,891
PING AN INSURANCE ADR	485	6,429	9,889
NOVO NORDISK A/S SPONS ADR	800	24,123	33,856
DANONE SPONS ADR	310	3,926	4,035
COMPAGNIE DE SAINT UNSP ADR	1,555	16,752	12,969
L OREAL UNSPONSORED ADR	590	14,867	19,665
SANOFI ADR	440	20,058	20,068
LVMH MOET HENNESSY UNSP ADR	660	23,888	22,727
DASSAULT SYSTEMES S SPON ADR	165	7,049	10,065
ADIDAS AG SPONSORED ADR	195	7,555	6,728

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
BMW UNSPONSORED ADR	335	\$ 9,548	\$ 11,933
BASF SE SPON ADR	155	14,823	12,925
DAIMLER AG SPN ADR	210	14,602	17,386
DEUTSCHE POST AG SPON ADR	554	17,096	17,977
SAP SE SPONSORED ADR	295	18,228	20,547
SIEMENS AG SPONS ADR	224	23,687	25,088
BAYER AG SPONSORED ADR	234	18,812	32,021
HONG KONG EXCHANGES UNSP ADR	420	7,548	9,337
LENOVO GROUP LTD ADR	1,180	21,365	30,940
INFOSYS LTD SP ADR	350	8,834	11,011
BANK MANDIRI TBK UNSPON ADR	1,155	11,903	10,025
LUXOTTICA GROUP SPA SPON ADR	295	9,613	16,069
MITSUBISHI UFJ FINL SPON ADR	1,545	7,385	8,544
RAKUTEN INC ADR	715	10,808	9,956
TOYOTA MOTOR CORP SPON ADR	103	12,833	12,924
FANUC CORP UNSP ADR	830	23,718	22,850
EXPERIAN PLC SPONS ADR	1,430	28,769	24,024
SHIRE PLC ADR	129	13,844	27,418
WPP PLC SPONSORED ADR	278	17,637	28,940
SAMSUNG ELECTR GDR	29	16,173	17,545
WALMART DE MEXICO SPON ADR V	180	5,208	3,859
FOMENTO ECONOMICO MEX SP ADR	125	9,080	11,004
ROYAL DUTCH SHELL SPON ADR A	170	11,676	11,382
ASML HOLDING NV NY REG SHS	328	13,960	35,368
MAGNIT PJSC SPON GDR REGS	144	4,392	6,538
ERICSSON (LM) TEL SP ADR	1,460	19,801	17,666
SWISS RE LTD SPN ADR	190	14,543	16,068
CIE FINANCIERE RICH UNSP ADR	2,785	18,400	24,703
NOVARTIS AG SPONSORED ADR	270	16,961	25,018
ROCHE HOLDINGS LTD SPONS ADR	755	19,866	25,662
UBS GROUP AG	1,150	22,934	19,608
TAIWAN SEMICONDUCTOR SP ADR	1,285	17,438	28,758
INDIVIOR PLC SPON ADR	46	365	520
ASOS PLC UNSP ADR	110	10,903	4,386
LEGAL + GEN GROUP SPON ADR	325	4,854	6,261

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
VODAFONE GROUP PLC SP ADR	274	\$ 13,172	\$ 9,363
PRUDENTIAL PLC ADR	215	8,350	9,926
HSBC HOLDINGS PLC SPONS ADR	320	14,189	15,114
DIAGEO PLC SPONSORED ADR	135	14,492	15,402
GLAXOSMITHKLINE PLC SPON ADR	375	18,418	16,027
RECKITT BENCKISER SPON ADR	1,150	12,926	19,055
LLOYDS BANKING GROUP PLC ADR	5,375	27,546	24,940
ARM HOLDINGS PLC SPONS ADR	645	19,115	29,863
TOTAL FOREIGN EQUITY SECURITIES		860,787	1,035,083
MUTUAL FUNDS – FIXED INCOME			
PIMCO EXTENDED DURATION INST	1,935,610	15,066,889	16,491,400
PIMCO LONG DURATION TOT R IS	1,795,188	20,737,359	21,542,258
ASHMORE	1,367,933	12,381,750	11,203,372
TOTAL MUTUAL FUNDS – FIXED INCOME		48,185,998	49,237,030
MUTUAL FUNDS – EQUITY			
DODGE + COX INTERNATIONAL STOC	22,725	942,152	956,959
TOTAL MUTUAL FUNDS – EQUITY		942,152	956,959
MUTUAL FUNDS – MULTI-ASSET			
GMO BENCHMARK FREE ALLOCATION	629,331	17,067,716	16,375,202
PIMCO ALL ASSET ALL AUTHORITY	1,711,238	17,407,362	15,623,602
TOTAL MUTUAL FUNDS – MULTI-ASSET		34,475,078	31,998,804
REAL ESTATE INVESTMENT FUNDS			
AETHER REAL ASSETS III, LP	128,541	128,541	125,092
AEW PARTNERS VI	705,140	705,140	2,017,309
BLUE VISTA EQUITY	730,320	730,320	1,674,476
INLAND AMERICAN REAL ESTATE TR □	445,744	4,423,070	3,093,466
WCP REAL ESTATE FUND II	1,774,193	1,774,193	2,589,564
TOTAL REAL ESTATE INVESTMENT FUNDS		7,761,264	9,499,907

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
HEDGE FUNDS			
BLUE TREND FUND LTD	1,275,000	\$ 1,275,000	\$ 1,367,102
CAXTON GLOBAL INV. LTD.	2,350	2,350,000	2,400,445
CRITERION CAPITAL PARTNERS	25,250	2,525,000	2,695,872
GCA CREDIT OPPS OFFSHORE	2,175	2,175,000	2,200,248
GLEACHER DIVERSIFIED STRAT FND	41	50,056	52,544
HUDSON BAY INTL FUND LTD	1,800	1,800,000	1,752,835
JANA OFFSHORE PARTNERS	2,900	2,900,000	2,980,487
KING STREET CAPITAL LP	17,190	2,799,170	2,877,727
KING STREET CAPITAL, LTD	53	5,295	5,281
KING STREET CAPITAL, LTD	202	20,182	20,053
KING STREET CAPITAL, LTD	668	66,755	66,669
KING STREET CAPITAL, LTD.	114	11,435	11,055
LIBREMAX OFFSHORE FUND, LTD	2,175	2,175,000	2,308,032
MOON CAP GLBL EQ OFSH	15	15,253	20,001
MOON CAP GLBL EQ OFSH	130	129,949	170,399
PASSPORT OFFSHORE LTD	2,000	2,746,423	2,679,518
PASSPORT SPV GSII OFFSHORE LTD	13	13,134	8,553
STANDARD PACIFIC CAP. OFFSHORE	23,881	2,900,000	2,982,105
TOTAL HEDGE FUNDS		23,957,652	24,598,926
PRIVATE EQUITY FUNDS			
AXIOM ASIA PRIVATE CAP FND III	918,062	918,062	916,555
FORT WASHINGTON PVT EQUITY III	1,781,333	1,781,333	2,904,244
FORT WASHINGTON PVT EQUITY IV	240,000	240,000	249,211
GOLDMAN SACHS PRV	1,944,949	1,944,949	2,799,221
KAYNE ANDERSON ENERGY	6,711	6,711	1,911,301
OAKTREE MEZZANINE FUND	140,524	140,524	240,267
OAKTREE MEZZANINE FUND	672,101	672,101	908,223
PORTFOLIO AD PVT	394,935	394,935	604,943
PORTFOLIO AD PVT	515,333	515,333	706,058
PORTFOLIO AD PVT	644,173	644,173	1,310,921
PRIVATE EQUITY INVESTMENT	881,434	881,434	1,306,183
SIGULER GUFF BRIC OPPORT	1,505,023	1,505,023	1,766,633
SIGULER GUFF DIST	375,055	375,055	363,790
SIGULER GUFF DOF	1,040,282	1,040,282	1,914,106
SPECIAL SITUATION PARTNERS	1,014,329	1,014,329	1,275,905
TOTAL PRIVATE EQUITY FUNDS		12,074,244	19,177,561

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
LIMITED PARTNERSHIPS			
ALCENTRA	1,526,287	\$ 1,526,287	\$ 1,576,360
AQR GRP EL OFFSHORE FUND LTD	125	13,000,000	13,323,673
ARTISAN GLOBAL OPP TRUST	761,491	10,135,451	10,767,489
BLACKROCK ACWI EX U S SUPERFUN	54,383	1,250,000	1,233,292
BLACKROCK EQUITY INDEX FUND	4,438	2,640,029	3,068,878
BLACKROCK RUSSELL 2000 IDX FD	70,429	2,500,000	2,719,752
GAM	142,552	14,000,000	13,981,468
LOOMIS CREDIT	746,734	13,968,784	14,299,963
LOOMIS SAYLES MULTISECTOR FULL	514,464	7,580,715	9,193,479
MARATHON EUROPEAN CREDIT OPPOR	1,384	1,527,130	1,762,061
OHA EUROPEAN STRATEGIC CREDIT	1,650,121	1,650,121	2,042,720
OHA STRUCTURED PRODUCTS	13,377	13,377	897,738
POLUNIN	586,510	6,000,000	5,982,405
REGIMENT CAP SPECIAL SITUATION	1,488,454	1,488,454	1,902,053
SCHROEDER CAPITAL MGMT	370	2,841,257	3,399,115
ABERDEEN EMERGING MARKETS FUND	83,176	4,300,765	4,300,765
THE ONSHORE ETAP FUND LLC (GRESHAM)	1,000,000	1,000,000	822,340
TOTAL LIMITED PARTNERSHIPS		85,422,370	91,273,551
COMMINGLED FUND			
WELLINGTON DIVER INFLAT HEDGES	147,286	2,425,397	1,852,856
TOTAL COMMINGLED FUND		2,425,397	1,852,856
TOTAL INVESTMENTS		\$ 233,697,630	\$ 248,942,488

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2014

Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Gain (Loss)
Category (i) – Single transaction exceeds 5% of value						
Drake Capital Offshore Partners	Hedge Fund	\$ –	\$ 13,409,678	\$ 11,227,061	\$ 13,409,678	\$ 2,182,617
GAM Unconstrained Bond	Limited Partnership	14,000,000	–	–	14,000,000	–
State Street Bank + Trust Co	Money Market Fund	12,676,294	–	–	12,676,294	–
State Street Bank + Trust Co	Money Market Fund	–	12,719,223	12,719,223	12,719,223	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	–	15,066,889	15,066,889	15,066,889	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	15,066,889	–	15,066,889	–	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	–	13,236,228	13,427,408	13,236,228	(191,180)
Loomis Sayle Credit Asset	Limited Partnership	11,995,794	–	–	11,995,794	–
Loomis Sayle Credit Asset	Limited Partnership	12,000,000	–	–	12,000,000	–
Loomis Sayle Credit Asset	Limited Partnership	–	11,995,794	11,995,794	11,995,794	–
Category (ii) – A series of transactions with the same broker in excess of 5% of plan assets						
*** NO TRANSACTIONS QUALIFIED FOR THIS SECTION ***						
Category (iii) – A series of transactions in same security in excess of 5% of plan assets						
Franklin Templeton Global	Limited Partnership	–	12,140,424	8,673,283	12,140,424	3,467,141
State Street Bank + Trust Co	Money Market Fund	170,256,959	181,155,297	181,155,300	351,412,256	(3)
Drake Capital Offshore Partners	Hedge Fund	–	13,409,678	–	11,227,061	2,182,617
GAM Unconstrained Bond	Limited Partnership	14,000,000	–	–	14,000,000	–
Ashmore Emerging Markets Total	Mutual Fund - Fixed Income	12,381,750	–	–	12,381,750	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	30,133,779	15,066,889	15,066,889	45,200,668	–
Pimco Long Duration Total Return	Mutual Fund - Fixed Income	20,737,359	–	–	20,737,359	–
Pimco Unconstrained Bond Fund	Mutual Fund - Fixed Income	206,024	14,236,228	14,432,878	14,442,253	(196,650)
Loomis Sayle Credit Asset	Limited Partnership	25,995,794	12,027,698	12,027,010	38,023,492	687

Category (iv) – A single transaction with one broker exceeds 5% of plan assets

***** NO TRANSACTIONS QUALIFIED FOR THIS SECTION *****

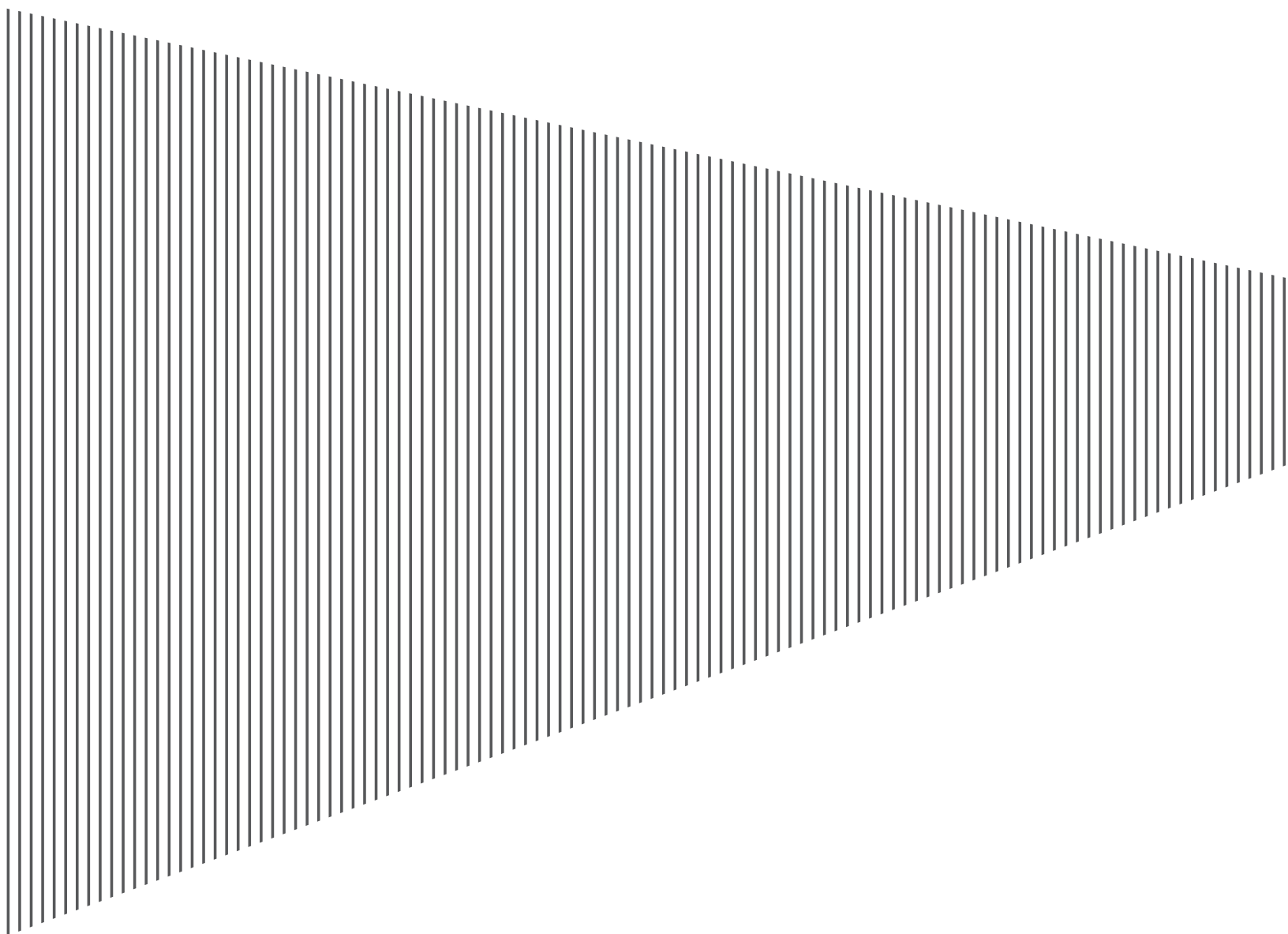
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**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

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

2014**This Form is Open to Public
Inspection**For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014► **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 planBethesda Retirement Plan**B** Three-digit
plan number (PN) ►001**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SFBethesda, Inc.**D** Employer Identification Number (EIN)31-1108895**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 2014**2** Assets:**a** Market value **2a** 251,944,176**b** Actuarial value **2b** 240,991,250**3** Funding target/participant count breakdown(1) Number of
participants(2) Vested Funding
Target(3) Total Funding
Target**a** For retired participants and beneficiaries receiving payment..... 874 34,428,124 34,428,124**b** For terminated vested participants..... 2,729 67,275,500 67,275,500**c** For active participants..... 3,502 109,486,637 116,812,881**d** Total..... 7,105 211,190,261 218,516,505**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** 6.28 %**6** Target normal cost **6** 6,065,364**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**Trisha L. Trembl

Signature of actuary

09/18/2015

Date

Trisha L. Trembl

Type or print name of actuary

14-06986

Most recent enrollment number

Hewitt Associates LLC

Firm name

(847) 295-5000

Telephone number (including area code)

4 Overlook PointLincolnshireIL 60069-3258

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) 2014
v. 140124

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)	2,201,943	8,335,661
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)	2,201,943	8,335,661
10 Interest on line 9 using prior year's actual return of <u>11.56%</u>	254545	963602
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		16135293
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.14%</u>		990707
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		17126000
d Portion of (c) to be added to prefunding balance		4649120
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)	2,456,488	13948383

Part III Funding Percentages

14 Funding target attainment percentage	14	102.77 %
15 Adjusted funding target attainment percentage	15	110.28 %
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	95.04 %
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
06/15/2015	4,500,000				
Totals ▶			18(b)	4,500,000	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	4,119,110

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c** If line 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: 4.99 %	2nd segment: 6.32 %	3rd segment: 6.99 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 0
22 Weighted average retirement age			22 63
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 subject to 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	6,065,364
b Excess assets, if applicable, but not greater than line 31a		31b	6,065,364
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	0
	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	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37	4,119,110
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	4,119,110
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 an election was made to use PRA 2010 funding relief for this plan:			
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	

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2014

Date	Amount	Days to Discount to 1/1/2014 at 6.28%	Interest Adjusted Contribution
June 15, 2015	\$ 4,500,000	530	\$ 4,119,110
Total Contribution	\$ 4,500,000		\$ 4,119,110

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 22—Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at beginning of year. This represents the retirement assumption for active participants.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55	6.00%	1.0000	3.30
56	6.00%	0.9400	3.16
57	6.00%	0.8836	3.02
58	6.00%	0.8306	2.89
59	6.00%	0.7807	2.76
60	6.00%	0.7339	2.64
61	11.00%	0.6899	4.63
62	11.00%	0.6140	4.19
63	11.00%	0.5464	3.79
64	20.00%	0.4863	6.23
65	25.00%	0.3891	6.32
66	25.00%	0.2918	4.81
67	25.00%	0.2189	3.67
68	25.00%	0.1641	2.79
69	25.00%	0.1231	2.12
70	100.00%	0.0923	6.46
Weighted Average			62.78

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods

Interest Rates for Minimum Funding Purposes

Based on segment rates with no lookback (as of January 2014), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA

1st Segment Rate	4.99%
2nd Segment Rate	6.32%
3rd Segment Rate	6.99%

Interest Rates for Maximum Tax Purposes

Based on segment rates with no lookback (as of January 2014), without regard to interest rate stabilization

1st Segment Rate	1.25%
2nd Segment Rate	4.06%
3rd Segment Rate	5.08%

Salary Increases

Varies by age according to the following schedule.

Rate of Age	Rate of Compensation Increase
15-24	9.00%
25-29	5.50%
30-34	5.00%
35-39	4.50%
40-44	4.00%
45-49	3.50%
50+	3.00%

Social Security Wage Base Increases

Future wage indices are based on a national wage increase of 4.50% per year.

Optional Payment Form Election Percentage

Lump sum, if eligible. Else, life annuity

Projection of Retirement Account at 30-Year Treasury Rate

4.50%

Retirement Age

Active Participants

Based on probability by age. See Table 1. 80% of retirement eligible participants are assumed to commence payment upon retirement; the remaining 20% are assumed to commence at age 60.

Current Terminated Vested Participants

Based on probability by age. See Table 1.

Future Terminated Vested Participants

Commence at Age 60.

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Mortality Rates

Healthy and Disabled

2014 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e)

Withdrawal Rates

Based on probability by age and service. See Table 2.

Disability Rates

See Table 3

Surviving Spouse Benefit

It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are three years older than their spouses.

Valuation Compensation

Compensation has been limited to \$260,000 based upon the provision of IRC Section 401(a)(17).

Benefit and Compensation Limits

Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of \$210,000 and the IRC section 401(a)(17) compensation limit of \$260,000.

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Expected Return on Assets

2012 Plan Year

8.00%, limited to 7.52%

2013 Plan Year

7.50%, limited to 6.76%

Trust Expenses Included in Target Normal Cost

\$1,000,000. Based on prior year's administrative expenses, rounded.

Actuarial Method

Standard unit credit cost method

Valuation Date

January 1, 2014

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Table 1

Retirement Rates—Active Participants

<u>Age</u>	<u>Rate</u>
55	6.00%
56	6.00%
57	6.00%
58	6.00%
59	6.00%
60	6.00%
61	11.00%
62	11.00%
63	11.00%
64	20.00%
65	25.00%
66	25.00%
67	25.00%
68	25.00%
69	25.00%
70+	100.00%

Retirement Rates—Terminated Vested Participants

<u>Age</u>	<u>Rate</u>
55	10.00%
56	7.00%
57	7.00%
58	7.00%
59	7.00%
60	7.00%
61	10.00%
62	10.00%
63	10.00%
64	35.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2014 Plan Year
 Bethesda Retirement Plan
 EIN: 31-1108895 PN: 001

Table 2

Withdrawal Rates

Age	Years of Service					
	0	1	2	3	4	5+
15-29	18.00%	18.00%	18.00%	16.00%	14.00%	9.00%
30-34	18.00%	18.00%	18.00%	16.00%	14.00%	8.00%
35-39	14.00%	14.00%	14.00%	16.00%	12.00%	7.00%
40-44	12.00%	12.00%	12.00%	12.00%	10.00%	4.00%
45+	9.00%	9.00%	9.00%	9.00%	9.00%	4.00%

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Table 3

Disability Rates

Age	<u>Annual Number of Disabilities per 1,000 Participants</u>	
	Male	Female
15-27	0.15	0.15
28	0.15	0.20
29	0.15	0.20
30	0.15	0.20
31	0.15	0.25
32	0.15	0.25
33	0.15	0.30
34	0.15	0.30
35	0.20	0.35
36	0.20	0.40
37	0.25	0.45
38	0.30	0.50
39	0.35	0.60
40	0.40	0.65
41	0.45	0.75
42	0.50	0.85
43	0.60	0.95
44	0.70	1.10
45	0.80	1.20
46	0.90	1.35
47	1.05	1.50
48	1.25	1.65
49	1.40	1.80
50	1.65	2.00
51	1.95	2.20
52	2.30	2.45
53	2.65	2.70
54	3.05	2.95
55	3.45	3.20
56	3.85	3.45
57	4.30	3.70
58	4.75	4.00
59	5.25	4.25
60	5.75	4.50
61	6.30	4.80
62	6.90	5.05
63	7.55	5.25
64	8.20	5.45
65+	0.00	0.00

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 24—Change in Actuarial Assumptions

The funding valuation reflects the following non-prescribed assumption changes:

- A change in the assumed salary increase schedule for active participants to better reflect plan experience.
- A change in the rates of assumed retirement age and payment commencement age for active participants to better reflect plan experience.
- A change in the rates of assumed retirement age for current terminated vested participants to better reflect plan experience.
- A change in the rates of assumed withdrawal age for active participants to better reflect plan experience.

These changes were made to better reflect anticipated plan experience. Because the changes to the non-prescribed assumptions did not decrease the funding shortfall by the greater of \$5 million or 5% of the funding target liability, nor by \$50 million, approval is not required.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, Part V—Summary of Plan Provisions

This section highlights key plan provisions reflected in the January 1, 2014 valuation. Reference should be made to the Plan Document for additional clarification and details.

Status of Plan	The plan was open with ongoing service and pay accruals as of January 1, 2014. The plan was frozen to future service and pay accruals effective December 31, 2014; this amendment will first be reflected in the January 1, 2015 valuation.
Effective Date	Originally established as of January 1, 1973. Plan was amended and restated as of January 1, 2011.
Eligibility for Participation	All employees of Bethesda Hospital, Inc. and Consolidated Health Services are covered by the plan from their date of hire, upon completion of at least 1,000 hours (800 hours for years before 2011) of service in one year. Certain "Optional Employees" of Consolidated Health Services as defined by the employer and the Plan Document are not eligible to participate. Effective December 31, 2010, all Consolidated Health Services participants were terminated from the plan due to the sale of that group to Catholic Health Initiatives.
Normal Retirement Eligibility	Age 65.
Benefit	The annual normal retirement benefit, payable monthly, is the Retirement Account converted to an actuarially equivalent annuity. In no event will the benefit be less than the benefit accrued as of June 30, 1999 under the prior plan formula.
Early Retirement Eligibility	Age 55 and five years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of retirement.
Vested Termination Eligibility	Three years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of termination. Payments may begin any time after eligibility for early retirement. Interest on the Retirement Account will accrue at the Applicable 30-Year Treasury Rate until benefits commence.

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Disability Eligibility	Total and permanent disability and three years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of disability. Payments may begin immediately.
Preretirement Death Eligibility	Three years Vesting Service.
Benefit	<i>Without Spouse:</i> Retirement Account at the date of death. <i>With Spouse:</i> Retirement Account at date of death or an actuarially equivalent life annuity to surviving spouse.
Normal Form of Annuity	<i>Without Spouse:</i> Life Annuity. <i>With Spouse:</i> Joint and survivor annuity actuarially equivalent to the retirement benefit payable for employee's lifetime. Participant receives reduced lifetime benefit and, in the event of participant's death, 50% of the reduced benefit continues to surviving spouse.
Optional Forms of Annuity	Lump sum; life annuity; joint and survivor with spouse beneficiary only (50%, 75%, 100%); 60 or 120 month period certain only; 60 or 120 month period certain and life annuity.
Actuarial Equivalent	A benefit having the same value as the benefit which it replaces, based on the applicable mortality table and the applicable interest rates defined in IRC Section 417(e)(3). For purposes of converting a single life annuity to a qualified joint and survivor annuity or period certain and life annuity, an 8.0% interest rate is used.
Definitions Retirement Account	Highest Average Compensation times Total Annual Credits plus 2% per year of Credited Service times Highest Average Compensation over Social Security Covered Compensation
Highest Average Compensation	Generally, highest five consecutive years of W-2 pay during career (including years at a Joint Operating Entity and excluding years in which a participant does not complete 1,000 hours of Service (800 hours for years before 2011)).

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Total Annual Credits

Accumulated credits (earned at end of each plan year) based on the following table:

Age plus Benefit Service	Annual Credits
<33	2%
33-45	3%
46-58	5%
59-71	7%
72-84	10%
85+	12%

Before 2011:

Age plus Benefit Service	Annual Credits
<30	2%
30-39	4%
40-49	6%
50-59	8%
60-69	10%
70-79	12%
80+	14%

Vesting Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) including hours at a Joint Operating Entity. Used primarily to determine eligibility for benefits.

Benefit Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) including hours at a Joint Operating Entity. Used primarily to determine annual credits.

Credited Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) and employed at the end of the year (or prior to termination). Used primarily to determine how many years of annual credits have been earned under the Plan.

Social Security
Covered Compensation

35-year average of Social Security Wage Bases based on year of birth table.

Applicable 30-Year
Treasury Rate

Interest rate equal to the annual rate of interest on 30-year Treasury securities, determined for the second calendar month preceding the first day of the applicable plan year. Used to credit interest on the Retirement Account prior to commencement.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Joint Operating Entity

Good Samaritan Hospital of Cincinnati, TriHealth, Inc., and any affiliate that participates in the Good Samaritan Hospital Retirement Plan or the TriHealth, Inc., Retirement Plan.

Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

- Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.
- Effective December 31, 2013, assets and liabilities were transferred among the following pension plans: the Bethesda Retirement Plan, the Good Samaritan Hospital Retirement Plan, and the TriHealth, Inc. Retirement Plan. The transfers were made in order to reflect the transfers of employment for active employees during 2013. After the transfer, each active employee's total retirement account will be held within the plan sponsored by the employee's current employer. The asset transfer amounts were determined as of December 31, 2013 in accordance with Internal Revenue Code Section 414(l). We believe the transfer amounts between the Bethesda and Good Samaritan plans to be de minimis in size, considering both the spin-off of assets transferred out of each plan and the merger of assets transferred into each plan.

We believe the transfer amounts between the Bethesda and TriHealth, Inc. plan to be de minimis in size when considering the spin-off of assets transferred out of each plan.

We believe the transfer amounts to be non de minimis in size when considering the merger of assets transferred into the TriHealth, Inc. plan. The asset transfer was treated as a separate cash flow in the development of the Actuarial Value of Plan Assets for each plan.

- The market value of assets as shown on Schedule SB line 2(a), less receivable contributions, is not equal to the net assets shown on Schedule H line I(1)(a), less receivable contributions, for the following reason:
 - The assets shown on Schedule SB line 2(a) reflects the net transfer of assets between plans, as described in the bullet above. Schedule SB 2(a) is shown after the asset transfers in order to maintain consistency between the assets and liabilities on lines 2 and 3 of the Schedule B.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2014.

Number of Participants, Average Compensation and Average Cash Balance Account

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		127 \$24,469 \$849	7							
25-29		225 \$33,933 \$1,425	103 \$39,015 \$5,157	9						
30-34		181 \$38,469 \$2,043	124 \$47,879 \$9,307	50 \$44,959 \$15,358	1					
35-39		143 \$41,766 \$2,875	88 \$48,510 \$11,999	61 \$55,087 \$26,503	21 \$50,181 \$33,500					
40-44		114 \$42,107 \$3,358	121 \$46,648 \$14,547	54 \$53,635 \$31,640	52 \$56,025 \$46,378	24 \$59,304 \$69,657				
45-49		125 \$43,079 \$4,380	128 \$45,621 \$17,390	73 \$51,308 \$33,442	36 \$60,372 \$63,034	37 \$63,094 \$86,857	30 \$67,499 \$113,475	2		
50-54		134 \$39,494 \$4,894	111 \$45,372 \$19,796	77 \$59,903 \$47,446	39 \$52,486 \$64,123	45 \$65,885 \$105,105	54 \$62,057 \$119,035	54 \$60,211 \$134,564	6	
55-59		103 \$44,086 \$6,035	125 \$52,329 \$26,098	82 \$58,132 \$54,144	50 \$63,040 \$85,249	49 \$60,124 \$109,168	35 \$57,295 \$123,241	43 \$58,536 \$159,140	44 \$72,364 \$218,358	1
60-64		67 \$41,062 \$6,264	80 \$50,356 \$29,930	52 \$63,373 \$64,947	37 \$55,025 \$82,824	27 \$66,447 \$133,674	36 \$67,845 \$186,596	30 \$48,736 \$149,868	40 \$60,764 \$210,269	14
65-69		15	15	16	7	8	7	10	10	5
70+		12	9	7	4	1	2	1	1	1

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Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2014

Date	Amount	Days to Discount to 1/1/2014 at 6.28%	Interest Adjusted Contribution
June 15, 2015	\$ 4,500,000	530	\$ 4,119,110
Total Contribution	\$ 4,500,000		\$ 4,119,110

Schedule SB Attachment (Form 5500)—2014 Plan Year
 Bethesda Retirement Plan
 EIN: 31-1108895 PN: 001

Schedule SB, line 22—Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at beginning of year. This represents the retirement assumption for active participants.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55	6.00%	1.0000	3.30
56	6.00%	0.9400	3.16
57	6.00%	0.8836	3.02
58	6.00%	0.8306	2.89
59	6.00%	0.7807	2.76
60	6.00%	0.7339	2.64
61	11.00%	0.6899	4.63
62	11.00%	0.6140	4.19
63	11.00%	0.5464	3.79
64	20.00%	0.4863	6.23
65	25.00%	0.3891	6.32
66	25.00%	0.2918	4.81
67	25.00%	0.2189	3.67
68	25.00%	0.1641	2.79
69	25.00%	0.1231	2.12
70	100.00%	0.0923	6.46
Weighted Average			62.78

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Schedule SB, Part V—Statement of Actuarial Assumptions/Methods

Interest Rates for Minimum Funding Purposes

Based on segment rates with no lookback (as of January 2014), each adjusted as needed to fall within the 25-year average interest rate corridor under HATFA

1st Segment Rate	4.99%
2nd Segment Rate	6.32%
3rd Segment Rate	6.99%

Interest Rates for Maximum Tax Purposes

Based on segment rates with no lookback (as of January 2014), without regard to interest rate stabilization

1st Segment Rate	1.25%
2nd Segment Rate	4.06%
3rd Segment Rate	5.08%

Salary Increases

Varies by age according to the following schedule.

Rate of Age	Rate of Compensation Increase
15-24	9.00%
25-29	5.50%
30-34	5.00%
35-39	4.50%
40-44	4.00%
45-49	3.50%
50+	3.00%

Social Security Wage Base Increases

Future wage indices are based on a national wage increase of 4.50% per year.

Optional Payment Form Election Percentage

Lump sum, if eligible. Else, life annuity

Projection of Retirement Account at 30-Year Treasury Rate

4.50%

Retirement Age

Active Participants

Based on probability by age. See Table 1. 80% of retirement eligible participants are assumed to commence payment upon retirement; the remaining 20% are assumed to commence at age 60.

Current Terminated Vested Participants

Based on probability by age. See Table 1.

Future Terminated Vested Participants

Commence at Age 60.

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Mortality Rates

Healthy and Disabled

2014 static mortality table for annuitants and non-annuitants per §1.430(h)(3)-1(e)

Withdrawal Rates

Based on probability by age and service. See Table 2.

Disability Rates

See Table 3

Surviving Spouse Benefit

It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are three years older than their spouses.

Valuation Compensation

Compensation has been limited to \$260,000 based upon the provision of IRC Section 401(a)(17).

Benefit and Compensation Limits

Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of \$210,000 and the IRC section 401(a)(17) compensation limit of \$260,000.

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Expected Return on Assets

2012 Plan Year

8.00%, limited to 7.52%

2013 Plan Year

7.50%, limited to 6.76%

Trust Expenses Included in Target Normal Cost

\$1,000,000. Based on prior year's administrative expenses, rounded.

Actuarial Method

Standard unit credit cost method

Valuation Date

January 1, 2014

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Table 1

Retirement Rates—Active Participants

<u>Age</u>	<u>Rate</u>
55	6.00%
56	6.00%
57	6.00%
58	6.00%
59	6.00%
60	6.00%
61	11.00%
62	11.00%
63	11.00%
64	20.00%
65	25.00%
66	25.00%
67	25.00%
68	25.00%
69	25.00%
70+	100.00%

Retirement Rates—Terminated Vested Participants

<u>Age</u>	<u>Rate</u>
55	10.00%
56	7.00%
57	7.00%
58	7.00%
59	7.00%
60	7.00%
61	10.00%
62	10.00%
63	10.00%
64	35.00%
65+	100.00%

Schedule SB Attachment (Form 5500)—2014 Plan Year
 Bethesda Retirement Plan
 EIN: 31-1108895 PN: 001

Table 2

Withdrawal Rates

Age	Years of Service					
	0	1	2	3	4	5+
15-29	18.00%	18.00%	18.00%	16.00%	14.00%	9.00%
30-34	18.00%	18.00%	18.00%	16.00%	14.00%	8.00%
35-39	14.00%	14.00%	14.00%	16.00%	12.00%	7.00%
40-44	12.00%	12.00%	12.00%	12.00%	10.00%	4.00%
45+	9.00%	9.00%	9.00%	9.00%	9.00%	4.00%

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Table 3

Disability Rates

Age	<u>Annual Number of Disabilities per 1,000 Participants</u>	
	Male	Female
15-27	0.15	0.15
28	0.15	0.20
29	0.15	0.20
30	0.15	0.20
31	0.15	0.25
32	0.15	0.25
33	0.15	0.30
34	0.15	0.30
35	0.20	0.35
36	0.20	0.40
37	0.25	0.45
38	0.30	0.50
39	0.35	0.60
40	0.40	0.65
41	0.45	0.75
42	0.50	0.85
43	0.60	0.95
44	0.70	1.10
45	0.80	1.20
46	0.90	1.35
47	1.05	1.50
48	1.25	1.65
49	1.40	1.80
50	1.65	2.00
51	1.95	2.20
52	2.30	2.45
53	2.65	2.70
54	3.05	2.95
55	3.45	3.20
56	3.85	3.45
57	4.30	3.70
58	4.75	4.00
59	5.25	4.25
60	5.75	4.50
61	6.30	4.80
62	6.90	5.05
63	7.55	5.25
64	8.20	5.45
65+	0.00	0.00

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, Part V—Summary of Plan Provisions

This section highlights key plan provisions reflected in the January 1, 2014 valuation. Reference should be made to the Plan Document for additional clarification and details.

Status of Plan	The plan was open with ongoing service and pay accruals as of January 1, 2014. The plan was frozen to future service and pay accruals effective December 31, 2014; this amendment will first be reflected in the January 1, 2015 valuation.
Effective Date	Originally established as of January 1, 1973. Plan was amended and restated as of January 1, 2011.
Eligibility for Participation	All employees of Bethesda Hospital, Inc. and Consolidated Health Services are covered by the plan from their date of hire, upon completion of at least 1,000 hours (800 hours for years before 2011) of service in one year. Certain "Optional Employees" of Consolidated Health Services as defined by the employer and the Plan Document are not eligible to participate. Effective December 31, 2010, all Consolidated Health Services participants were terminated from the plan due to the sale of that group to Catholic Health Initiatives.
Normal Retirement Eligibility	Age 65.
Benefit	The annual normal retirement benefit, payable monthly, is the Retirement Account converted to an actuarially equivalent annuity. In no event will the benefit be less than the benefit accrued as of June 30, 1999 under the prior plan formula.
Early Retirement Eligibility	Age 55 and five years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of retirement.
Vested Termination Eligibility	Three years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of termination. Payments may begin any time after eligibility for early retirement. Interest on the Retirement Account will accrue at the Applicable 30-Year Treasury Rate until benefits commence.

Schedule SB Attachment (Form 5500)—2014 Plan Year

Bethesda Retirement Plan

EIN: 31-1108895 PN: 001

Disability Eligibility	Total and permanent disability and three years of Vesting Service.
Benefit	Same as the normal retirement benefit based on the Retirement Account at the date of disability. Payments may begin immediately.
Preretirement Death Eligibility	Three years Vesting Service.
Benefit	<i>Without Spouse:</i> Retirement Account at the date of death. <i>With Spouse:</i> Retirement Account at date of death or an actuarially equivalent life annuity to surviving spouse.
Normal Form of Annuity	<i>Without Spouse:</i> Life Annuity. <i>With Spouse:</i> Joint and survivor annuity actuarially equivalent to the retirement benefit payable for employee's lifetime. Participant receives reduced lifetime benefit and, in the event of participant's death, 50% of the reduced benefit continues to surviving spouse.
Optional Forms of Annuity	Lump sum; life annuity; joint and survivor with spouse beneficiary only (50%, 75%, 100%); 60 or 120 month period certain only; 60 or 120 month period certain and life annuity.
Actuarial Equivalent	A benefit having the same value as the benefit which it replaces, based on the applicable mortality table and the applicable interest rates defined in IRC Section 417(e)(3). For purposes of converting a single life annuity to a qualified joint and survivor annuity or period certain and life annuity, an 8.0% interest rate is used.
Definitions Retirement Account	Highest Average Compensation times Total Annual Credits plus 2% per year of Credited Service times Highest Average Compensation over Social Security Covered Compensation
Highest Average Compensation	Generally, highest five consecutive years of W-2 pay during career (including years at a Joint Operating Entity and excluding years in which a participant does not complete 1,000 hours of Service (800 hours for years before 2011)).

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Total Annual Credits

Accumulated credits (earned at end of each plan year) based on the following table:

Age plus Benefit Service	Annual Credits
<33	2%
33-45	3%
46-58	5%
59-71	7%
72-84	10%
85+	12%

Before 2011:

Age plus Benefit Service	Annual Credits
<30	2%
30-39	4%
40-49	6%
50-59	8%
60-69	10%
70-79	12%
80+	14%

Vesting Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) including hours at a Joint Operating Entity. Used primarily to determine eligibility for benefits.

Benefit Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) including hours at a Joint Operating Entity. Used primarily to determine annual credits.

Credited Service

Generally, one year of service is earned for each year the participant is paid for at least 1,000 hours (800 hours for years before 2011) and employed at the end of the year (or prior to termination). Used primarily to determine how many years of annual credits have been earned under the Plan.

Social Security
Covered Compensation

35-year average of Social Security Wage Bases based on year of birth table.

Applicable 30-Year
Treasury Rate

Interest rate equal to the annual rate of interest on 30-year Treasury securities, determined for the second calendar month preceding the first day of the applicable plan year. Used to credit interest on the Retirement Account prior to commencement.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Joint Operating Entity

Good Samaritan Hospital of Cincinnati, TriHealth, Inc., and any affiliate that participates in the Good Samaritan Hospital Retirement Plan or the TriHealth, Inc., Retirement Plan.

Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

- Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.
- Effective December 31, 2013, assets and liabilities were transferred among the following pension plans: the Bethesda Retirement Plan, the Good Samaritan Hospital Retirement Plan, and the TriHealth, Inc. Retirement Plan. The transfers were made in order to reflect the transfers of employment for active employees during 2013. After the transfer, each active employee's total retirement account will be held within the plan sponsored by the employee's current employer. The asset transfer amounts were determined as of December 31, 2013 in accordance with Internal Revenue Code Section 414(l). We believe the transfer amounts between the Bethesda and Good Samaritan plans to be de minimis in size, considering both the spin-off of assets transferred out of each plan and the merger of assets transferred into each plan.

We believe the transfer amounts between the Bethesda and TriHealth, Inc. plan to be de minimis in size when considering the spin-off of assets transferred out of each plan.

We believe the transfer amounts to be non de minimis in size when considering the merger of assets transferred into the TriHealth, Inc. plan. The asset transfer was treated as a separate cash flow in the development of the Actuarial Value of Plan Assets for each plan.

- The market value of assets as shown on Schedule SB line 2(a), less receivable contributions, is not equal to the net assets shown on Schedule H line I(1)(a), less receivable contributions, for the following reason:
 - The assets shown on Schedule SB line 2(a) reflects the net transfer of assets between plans, as described in the bullet above. Schedule SB 2(a) is shown after the asset transfers in order to maintain consistency between the assets and liabilities on lines 2 and 3 of the Schedule B.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 24—Change in Actuarial Assumptions

The funding valuation reflects the following non-prescribed assumption changes:

- A change in the assumed salary increase schedule for active participants to better reflect plan experience.
- A change in the rates of assumed retirement age and payment commencement age for active participants to better reflect plan experience.
- A change in the rates of assumed retirement age for current terminated vested participants to better reflect plan experience.
- A change in the rates of assumed withdrawal age for active participants to better reflect plan experience.

These changes were made to better reflect anticipated plan experience. Because the changes to the non-prescribed assumptions did not decrease the funding shortfall by the greater of \$5 million or 5% of the funding target liability, nor by \$50 million, approval is not required.

Schedule SB Attachment (Form 5500)—2014 Plan Year
Bethesda Retirement Plan
EIN: 31-1108895 PN: 001

Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2014.

Number of Participants, Average Compensation and Average Cash Balance Account

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		127 \$24,469 \$849	7							
25-29		225 \$33,933 \$1,425	103 \$39,015 \$5,157	9						
30-34		181 \$38,469 \$2,043	124 \$47,879 \$9,307	50 \$44,959 \$15,358	1					
35-39		143 \$41,766 \$2,875	88 \$48,510 \$11,999	61 \$55,087 \$26,503	21 \$50,181 \$33,500					
40-44		114 \$42,107 \$3,358	121 \$46,648 \$14,547	54 \$53,635 \$31,640	52 \$56,025 \$46,378	24 \$59,304 \$69,657				
45-49		125 \$43,079 \$4,380	128 \$45,621 \$17,390	73 \$51,308 \$33,442	36 \$60,372 \$63,034	37 \$63,094 \$86,857	30 \$67,499 \$113,475	2		
50-54		134 \$39,494 \$4,894	111 \$45,372 \$19,796	77 \$59,903 \$47,446	39 \$52,486 \$64,123	45 \$65,885 \$105,105	54 \$62,057 \$119,035	54 \$60,211 \$134,564	6	
55-59		103 \$44,086 \$6,035	125 \$52,329 \$26,098	82 \$58,132 \$54,144	50 \$63,040 \$85,249	49 \$60,124 \$109,168	35 \$57,295 \$123,241	43 \$58,536 \$159,140	44 \$72,364 \$218,358	1
60-64		67 \$41,062 \$6,264	80 \$50,356 \$29,930	52 \$63,373 \$64,947	37 \$55,025 \$82,824	27 \$66,447 \$133,674	36 \$67,845 \$186,596	30 \$48,736 \$149,868	40 \$60,764 \$210,269	14
65-69		15	15	16	7	8	7	10	10	5
70+		12	9	7	4	1	2	1	1	1

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Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
CASH			
US DOLLAR	\$ 15,109	\$ 15,109	\$ 15,109
US DOLLAR	30	30	30
TOTAL CASH		15,139	15,139
MONEY MARKET FUNDS			
STATE STREET BANK + TRUST CO	119,415	119,415	119,415
STATE STREET BANK + TRUST CO	243	243	243
STATE STREET BANK + TRUST CO	3,887,292	3,887,292	3,887,292
STATE STREET BANK + TRUST CO	494,687	494,687	494,687
STATE STREET BANK + TRUST CO	4,949	4,949	4,949
STATE STREET BANK + TRUST CO	647,685	647,685	647,685
STATE STREET BANK + TRUST CO	4,601	4,601	4,601
STATE STREET BANK + TRUST CO	550,953	550,953	550,953
TOTAL MONEY MARKET FUNDS		5,709,825	5,709,825
DOMESTIC EQUITY SECURITIES			
SIGNET JEWELERS LTD	970	75,117	127,623
JAZZ PHARMACEUTICALS PLC	735	97,671	120,342
ENDO INTERNATIONAL PLC	2,140	140,319	154,337
ACTAVIS PLC	860	139,865	221,373
TEVA PHARMACEUTICAL SP ADR	2,980	139,822	171,380
SHIRE PLC ADR	860	156,799	182,784
LIBERTY GLOBAL PLC SERIES C	2,580	105,571	124,640
HELEN OF TROY LTD	1,446	64,676	94,077
AGRIUM INC	1,566	137,913	148,332
SCHLUMBERGER LTD	1,419	124,321	121,197
ORANGE SPON ADR	8,607	114,421	145,630
CARNIVAL CORP	4,107	142,271	186,170
ROYAL CARIBBEAN CRUISES LTD	2,279	77,230	187,858
NOVARTIS AG SPONSORED ADR	2,277	196,333	210,987
ALEXANDER + BALDWIN INC	1,910	76,610	74,987
F5 NETWORKS INC	430	51,783	56,100
VF CORP	1,050	69,524	78,645

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
COPART INC	2,750	\$ 100,281	\$ 100,348
STERIS CORP	2,260	128,682	146,561
FACEBOOK INC A	1,520	84,497	118,590
MICROSOFT CORP	4,230	194,869	196,484
APPLE INC	3,444	281,892	380,149
QUALCOMM INC	1,150	86,587	85,480
RED HAT INC	1,250	66,059	86,425
PALO ALTO NETWORKS INC	840	70,764	102,959
VISA INC CLASS A SHARES	475	99,620	124,545
ARIAD PHARMACEUTICALS INC	5,420	36,855	37,235
CAVIUM INC	1,400	66,607	86,548
SALESFORCE.COM INC	1,760	97,095	104,386
STARBUCKS CORP	1,350	103,474	110,768
SERVICENOW INC	1,640	102,623	111,274
GOOGLE INC CL C	230	126,181	121,072
GOOGLE INC CL A	230	126,966	122,052
CUBIST PHARMACEUTICALS INC	2,340	159,410	235,521
COSTCO WHOLESALE CORP	790	103,164	111,983
PRICELINE GROUP INC/THE	116	138,150	132,264
ON SEMICONDUCTOR CORP	5,670	57,356	57,437
CITIGROUP INC	1,310	73,635	70,884
AMERIPRISE FINANCIAL INC	550	61,496	72,737
JACK IN THE BOX INC	980	68,327	78,361
B+G FOODS INC	2,630	86,413	78,637
AUTODESK INC	1,340	66,263	80,480
VERIFONE SYSTEMS INC	2,290	65,203	85,188
CONSOL ENERGY INC	2,750	105,135	92,978
EASTMAN CHEMICAL CO	1,340	103,094	101,652
JARDEN CORP	2,150	90,999	102,942
NATIONAL OILWELL VARCO INC	1,600	113,307	104,848
EMC CORP/MA	3,570	109,333	106,172
POLARIS INDUSTRIES INC	720	100,282	108,893
MEAD JOHNSON NUTRITION CO	1,090	108,334	109,589
CBRE GROUP INC A	3,210	82,818	109,943
IHS INC CLASS A	995	117,392	113,311

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
DANAHER CORP	1,400	\$ 107,156	\$ 119,994
ALLIANCE DATA SYSTEMS CORP	440	110,295	125,862
WALT DISNEY CO/THE	1,380	99,912	129,982
TWENTY FIRST CENTURY FOX A	3,510	118,150	134,802
UNITED CONTINENTAL HOLDINGS	2,030	86,220	135,787
MONSANTO CO	1,200	135,745	143,364
COMCAST CORP CLASS A	2,830	152,403	164,168
CELGENE CORP	2,850	238,734	318,801
HOME DEPOT INC	1,160	97,697	121,765
VERIZON COMMUNICATIONS INC	1,800	87,107	84,204
COOPER COS INC/THE	680	86,360	110,221
TESORO CORP	1,770	98,621	131,600
THERMO FISHER SCIENTIFIC INC	640	69,485	80,186
CATERPILLAR INC	930	82,705	85,123
PACCAR INC	1,490	90,995	101,335
STARWOOD PROPERTY TRUST INC	3,080	85,778	71,579
II VI INC	6,584	108,491	89,872
JM SMUCKER CO/THE	1,275	132,906	128,750
RELIANCE STEEL + ALUMINUM	2,392	174,048	146,558
ABBOTT LABORATORIES	5,677	202,972	255,579
MONDELEZ INTERNATIONAL INC A	7,675	214,893	278,794
MICROSOFT CORP	3,028	108,805	140,651
APPLE INC	1,738	141,765	191,840
BIO RAD LABORATORIES A	1,165	138,068	140,451
ALTERA CORP	1,866	57,510	68,930
GOOGLE INC CL C	203	77,175	106,859
GOOGLE INC CL A	203	77,654	107,724
CISCO SYSTEMS INC	6,559	149,960	182,438
TIME WARNER CABLE	314	21,386	47,746
WESCO INTERNATIONAL INC	1,401	115,841	106,770
NATIONAL OILWELL VARCO INC	2,078	139,950	136,171
ORACLE CORP	3,052	118,259	137,248
AMAZON.COM INC	465	146,359	144,313
BERRY PLASTICS GROUP INC	4,700	109,688	148,285
WORLD FUEL SERVICES CORP	3,279	128,155	153,883

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
AGCO CORP	3,769	\$ 202,948	\$ 170,359
GOLDMAN SACHS GROUP INC	1,595	244,562	309,158
BANK OF NEW YORK MELLON CORP	9,101	250,220	369,227
BANK OF AMERICA CORP	20,773	400,161	371,628
GENERAL ELECTRIC CO	8,195	210,563	207,088
DEVON ENERGY CORP	1,566	99,737	95,855
JOY GLOBAL INC	2,359	122,561	109,741
AVNET INC	3,722	139,715	160,120
SYSCO CORP	5,192	164,796	206,070
KENNAMETAL INC	4,421	182,686	158,227
OWENS + MINOR INC	5,309	167,617	186,399
HALLIBURTON CO	1,937	77,501	76,182
TOTAL DOMESTIC EQUITY SECURITIES		11,867,724	13,586,847
FOREIGN EQUITY SECURITIES			
COMMONWEALTH BK AUS SP ADR	90	5,597	6,274
CSL LTD SPONSORED ADR	710	17,848	25,099
ANHEUSER BUSCH INBEV SPN ADR	200	14,530	22,464
CIELO SA SPONSORED ADR	777	9,541	12,214
AMBEV SA ADR	945	6,303	5,878
ROGERS COMMUNICATIONS INC B	120	5,751	4,663
TORONTO DOMINION BANK	155	6,346	7,406
CANADIAN NATL RAILWAY CO	164	8,395	11,301
SANDS CHINA LTD UNSPONS ADR	330	13,930	16,251
TENCENT HOLDINGS LTD UNS ADR	2,115	15,192	30,689
BAIDU INC SPON ADR	39	6,892	8,891
PING AN INSURANCE ADR	485	6,429	9,889
NOVO NORDISK A/S SPONS ADR	800	24,123	33,856
DANONE SPONS ADR	310	3,926	4,035
COMPAGNIE DE SAINT UNSP ADR	1,555	16,752	12,969
L OREAL UNSPONSORED ADR	590	14,867	19,665
SANOFI ADR	440	20,058	20,068
LVMH MOET HENNESSY UNSP ADR	660	23,888	22,727
DASSAULT SYSTEMES S SPON ADR	165	7,049	10,065
ADIDAS AG SPONSORED ADR	195	7,555	6,728

Bethesda Retirement Plan

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
BMW UNSPONSORED ADR	335	\$ 9,548	\$ 11,933
BASF SE SPON ADR	155	14,823	12,925
DAIMLER AG SPN ADR	210	14,602	17,386
DEUTSCHE POST AG SPON ADR	554	17,096	17,977
SAP SE SPONSORED ADR	295	18,228	20,547
SIEMENS AG SPONS ADR	224	23,687	25,088
BAYER AG SPONSORED ADR	234	18,812	32,021
HONG KONG EXCHANGES UNSP ADR	420	7,548	9,337
LENOVO GROUP LTD ADR	1,180	21,365	30,940
INFOSYS LTD SP ADR	350	8,834	11,011
BANK MANDIRI TBK UNSPON ADR	1,155	11,903	10,025
LUXOTTICA GROUP SPA SPON ADR	295	9,613	16,069
MITSUBISHI UFJ FINL SPON ADR	1,545	7,385	8,544
RAKUTEN INC ADR	715	10,808	9,956
TOYOTA MOTOR CORP SPON ADR	103	12,833	12,924
FANUC CORP UNSP ADR	830	23,718	22,850
EXPERIAN PLC SPONS ADR	1,430	28,769	24,024
SHIRE PLC ADR	129	13,844	27,418
WPP PLC SPONSORED ADR	278	17,637	28,940
SAMSUNG ELECTR GDR	29	16,173	17,545
WALMART DE MEXICO SPON ADR V	180	5,208	3,859
FOMENTO ECONOMICO MEX SP ADR	125	9,080	11,004
ROYAL DUTCH SHELL SPON ADR A	170	11,676	11,382
ASML HOLDING NV NY REG SHS	328	13,960	35,368
MAGNIT PJSC SPON GDR REGS	144	4,392	6,538
ERICSSON (LM) TEL SP ADR	1,460	19,801	17,666
SWISS RE LTD SPN ADR	190	14,543	16,068
CIE FINANCIERE RICH UNSP ADR	2,785	18,400	24,703
NOVARTIS AG SPONSORED ADR	270	16,961	25,018
ROCHE HOLDINGS LTD SPONS ADR	755	19,866	25,662
UBS GROUP AG	1,150	22,934	19,608
TAIWAN SEMICONDUCTOR SP ADR	1,285	17,438	28,758
INDIVIOR PLC SPON ADR	46	365	520
ASOS PLC UNSP ADR	110	10,903	4,386
LEGAL + GEN GROUP SPON ADR	325	4,854	6,261

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
VODAFONE GROUP PLC SP ADR	274	\$ 13,172	\$ 9,363
PRUDENTIAL PLC ADR	215	8,350	9,926
HSBC HOLDINGS PLC SPONS ADR	320	14,189	15,114
DIAGEO PLC SPONSORED ADR	135	14,492	15,402
GLAXOSMITHKLINE PLC SPON ADR	375	18,418	16,027
RECKITT BENCKISER SPON ADR	1,150	12,926	19,055
LLOYDS BANKING GROUP PLC ADR	5,375	27,546	24,940
ARM HOLDINGS PLC SPONS ADR	645	19,115	29,863
TOTAL FOREIGN EQUITY SECURITIES		860,787	1,035,083
MUTUAL FUNDS – FIXED INCOME			
PIMCO EXTENDED DURATION INST	1,935,610	15,066,889	16,491,400
PIMCO LONG DURATION TOT R IS	1,795,188	20,737,359	21,542,258
ASHMORE	1,367,933	12,381,750	11,203,372
TOTAL MUTUAL FUNDS – FIXED INCOME		48,185,998	49,237,030
MUTUAL FUNDS – EQUITY			
DODGE + COX INTERNATIONAL STOC	22,725	942,152	956,959
TOTAL MUTUAL FUNDS – EQUITY		942,152	956,959
MUTUAL FUNDS – MULTI-ASSET			
GMO BENCHMARK FREE ALLOCATION	629,331	17,067,716	16,375,202
PIMCO ALL ASSET ALL AUTHORITY	1,711,238	17,407,362	15,623,602
TOTAL MUTUAL FUNDS – MULTI-ASSET		34,475,078	31,998,804
REAL ESTATE INVESTMENT FUNDS			
AETHER REAL ASSETS III, LP	128,541	128,541	125,092
AEW PARTNERS VI	705,140	705,140	2,017,309
BLUE VISTA EQUITY	730,320	730,320	1,674,476
INLAND AMERICAN REAL ESTATE TR □	445,744	4,423,070	3,093,466
WCP REAL ESTATE FUND II	1,774,193	1,774,193	2,589,564
TOTAL REAL ESTATE INVESTMENT FUNDS		7,761,264	9,499,907

Bethesda Retirement Plan

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
HEDGE FUNDS			
BLUE TREND FUND LTD	1,275,000	\$ 1,275,000	\$ 1,367,102
CAXTON GLOBAL INV. LTD.	2,350	2,350,000	2,400,445
CRITERION CAPITAL PARTNERS	25,250	2,525,000	2,695,872
GCA CREDIT OPPS OFFSHORE	2,175	2,175,000	2,200,248
GLEACHER DIVERSIFIED STRAT FND	41	50,056	52,544
HUDSON BAY INTL FUND LTD	1,800	1,800,000	1,752,835
JANA OFFSHORE PARTNERS	2,900	2,900,000	2,980,487
KING STREET CAPITAL LP	17,190	2,799,170	2,877,727
KING STREET CAPITAL, LTD	53	5,295	5,281
KING STREET CAPITAL, LTD	202	20,182	20,053
KING STREET CAPITAL, LTD	668	66,755	66,669
KING STREET CAPITAL, LTD.	114	11,435	11,055
LIBREMAX OFFSHORE FUND, LTD	2,175	2,175,000	2,308,032
MOON CAP GLBL EQ OFSH	15	15,253	20,001
MOON CAP GLBL EQ OFSH	130	129,949	170,399
PASSPORT OFFSHORE LTD	2,000	2,746,423	2,679,518
PASSPORT SPV GSII OFFSHORE LTD	13	13,134	8,553
STANDARD PACIFIC CAP. OFFSHORE	23,881	2,900,000	2,982,105
TOTAL HEDGE FUNDS		23,957,652	24,598,926
PRIVATE EQUITY FUNDS			
AXIOM ASIA PRIVATE CAP FND III	918,062	918,062	916,555
FORT WASHINGTON PVT EQUITY III	1,781,333	1,781,333	2,904,244
FORT WASHINGTON PVT EQUITY IV	240,000	240,000	249,211
GOLDMAN SACHS PRV	1,944,949	1,944,949	2,799,221
KAYNE ANDERSON ENERGY	6,711	6,711	1,911,301
OAKTREE MEZZANINE FUND	140,524	140,524	240,267
OAKTREE MEZZANINE FUND	672,101	672,101	908,223
PORTFOLIO AD PVT	394,935	394,935	604,943
PORTFOLIO AD PVT	515,333	515,333	706,058
PORTFOLIO AD PVT	644,173	644,173	1,310,921
PRIVATE EQUITY INVESTMENT	881,434	881,434	1,306,183
SIGULER GUFF BRIC OPPORT	1,505,023	1,505,023	1,766,633
SIGULER GUFF DIST	375,055	375,055	363,790
SIGULER GUFF DOF	1,040,282	1,040,282	1,914,106
SPECIAL SITUATION PARTNERS	1,014,329	1,014,329	1,275,905
TOTAL PRIVATE EQUITY FUNDS		12,074,244	19,177,561

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

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

December 31, 2014

Identity of Issue, Borrower, Lessor, or Similar Party	Number of Shares or Face Amount	Cost	Current Value
LIMITED PARTNERSHIPS			
ALCENTRA	1,526,287	\$ 1,526,287	\$ 1,576,360
AQR GRP EL OFFSHORE FUND LTD	125	13,000,000	13,323,673
ARTISAN GLOBAL OPP TRUST	761,491	10,135,451	10,767,489
BLACKROCK ACWI EX U S SUPERFUN	54,383	1,250,000	1,233,292
BLACKROCK EQUITY INDEX FUND	4,438	2,640,029	3,068,878
BLACKROCK RUSSELL 2000 IDX FD	70,429	2,500,000	2,719,752
GAM	142,552	14,000,000	13,981,468
LOOMIS CREDIT	746,734	13,968,784	14,299,963
LOOMIS SAYLES MULTISECTOR FULL	514,464	7,580,715	9,193,479
MARATHON EUROPEAN CREDIT OPPOR	1,384	1,527,130	1,762,061
OHA EUROPEAN STRATEGIC CREDIT	1,650,121	1,650,121	2,042,720
OHA STRUCTURED PRODUCTS	13,377	13,377	897,738
POLUNIN	586,510	6,000,000	5,982,405
REGIMENT CAP SPECIAL SITUATION	1,488,454	1,488,454	1,902,053
SCHROEDER CAPITAL MGMT	370	2,841,257	3,399,115
ABERDEEN EMERGING MARKETS FUND	83,176	4,300,765	4,300,765
THE ONSHORE ETAP FUND LLC (GRESHAM)	1,000,000	1,000,000	822,340
TOTAL LIMITED PARTNERSHIPS		85,422,370	91,273,551
COMMINGLED FUND			
WELLINGTON DIVER INFLAT HEDGES	147,286	2,425,397	1,852,856
TOTAL COMMINGLED FUND		2,425,397	1,852,856
TOTAL INVESTMENTS		\$ 233,697,630	\$ 248,942,488

Bethesda Retirement Plan

EIN #31-0537122 Plan #001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2014

Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Gain (Loss)
Category (i) – Single transaction exceeds 5% of value						
Drake Capital Offshore Partners	Hedge Fund	\$ –	\$ 13,409,678	\$ 11,227,061	\$ 13,409,678	\$ 2,182,617
GAM Unconstrained Bond	Limited Partnership	14,000,000	–	–	14,000,000	–
State Street Bank + Trust Co	Money Market Fund	12,676,294	–	–	12,676,294	–
State Street Bank + Trust Co	Money Market Fund	–	12,719,223	12,719,223	12,719,223	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	–	15,066,889	15,066,889	15,066,889	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	15,066,889	–	15,066,889	–	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	–	13,236,228	13,427,408	13,236,228	(191,180)
Loomis Sayle Credit Asset	Limited Partnership	11,995,794	–	–	11,995,794	–
Loomis Sayle Credit Asset	Limited Partnership	12,000,000	–	–	12,000,000	–
Loomis Sayle Credit Asset	Limited Partnership	–	11,995,794	11,995,794	11,995,794	–
Category (ii) – A series of transactions with the same broker in excess of 5% of plan assets						
*** NO TRANSACTIONS QUALIFIED FOR THIS SECTION ***						
Category (iii) – A series of transactions in same security in excess of 5% of plan assets						
Franklin Templeton Global	Limited Partnership	–	12,140,424	8,673,283	12,140,424	3,467,141
State Street Bank + Trust Co	Money Market Fund	170,256,959	181,155,297	181,155,300	351,412,256	(3)
Drake Capital Offshore Partners	Hedge Fund	–	13,409,678	–	11,227,061	2,182,617
GAM Unconstrained Bond	Limited Partnership	14,000,000	–	–	14,000,000	–
Ashmore Emerging Markets Total	Mutual Fund - Fixed Income	12,381,750	–	–	12,381,750	–
Pimco Extended Duration Fund	Mutual Fund - Fixed Income	30,133,779	15,066,889	15,066,889	45,200,668	–
Pimco Long Duration Total Return	Mutual Fund - Fixed Income	20,737,359	–	–	20,737,359	–
Pimco Unconstrained Bond Fund	Mutual Fund - Fixed Income	206,024	14,236,228	14,432,878	14,442,253	(196,650)
Loomis Sayle Credit Asset	Limited Partnership	25,995,794	12,027,698	12,027,010	38,023,492	687

Category (iv) – A single transaction with one broker exceeds 5% of plan assets

***** NO TRANSACTIONS QUALIFIED FOR THIS SECTION *****