

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 2015 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</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>PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
	1c Effective date of plan <u>07/01/1958</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>PARKVIEW HEALTH SYSTEM, INC.</u> <u>10501 CORPORATE DRIVE</u> <u>FORT WAYNE, IN 46845</u>	2b Employer Identification Number (EIN) <u>35-1972384</u> 2c Plan Sponsor's telephone number <u>260-373-4000</u> 2d Business code (see instructions) <u>622000</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/04/2016</u>	<u>STANTON E. RISSER</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

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

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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 5781
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year.....	6a(1) 2628
a(2) Total number of active participants at the end of the plan year	6a(2) 2482
b Retired or separated participants receiving benefits.....	6b 1583
c Other retired or separated participants entitled to future benefits.....	6c 1571
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 5636
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e 112
f Total. Add lines 6d and 6e	6f 5748
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h
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	
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) ☒ <u>1</u> 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 2015 Form M-1 annual report. If the plan was not required to file the 2015 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 0

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
LINCOLN NATIONAL LIFE INSURANCE CO

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
35-0472300	65676	GA-00147	5748	01/01/2015	12/31/2015

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end **4** 4938310**5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount **6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year **7b** 5252991**c** Additions: (1) Contributions deposited during the year **7c(1)** 13000000(2) Dividends and credits **7c(2)**(3) Interest credited during the year **7c(3)** 262443(4) Transferred from separate account **7c(4)**(5) Other (specify below) **7c(5)** 6221(6) Total additions **7c(6)** 13268664**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 18521655**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 12982231(2) Administration charge made by carrier **7e(2)** 38742(3) Transferred to separate account **7e(3)**(4) Other (specify below) **7e(4)** 562372(5) Total deductions **7e(5)** 13583345**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 4938310

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).).....		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

▶ 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 PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384

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 2015			
2 Assets:			
a Market value	2a	389709710	
b Actuarial value	2b	389709710	
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	1565	128703112	128703112
b For terminated vested participants	1588	42856828	42856828
c For active participants	2628	135059703	136672632
d Total	5781	306619643	308232572
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	6.33 %	
6 Target normal cost	6	8232928	

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

SIGN HERE		
Signature of actuary	09/28/2016	Date
TIMOTHY J. MAXSON	14-06697	Most recent enrollment number
Type or print name of actuary	260-426-7800	Telephone number (including area code)
BUCK CONSULTANTS, LLC		
Firm name		
110 W. BERRY ST., SUITE 1300 FORT WAYNE, IN 46802-2317		
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)	62107543	11039278
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	
9 Amount remaining (line 7 minus line 8)	62107543	11039278
10 Interest on line 9 using prior year's actual return of <u>4.39</u> %	2726521	484624
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		8384248
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>6.54</u> %		548330
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
c Total available at beginning of current plan year to add to prefunding balance		8932578
d Portion of (c) to be added to prefunding balance		
12 Other reductions in balances due to elections or deemed elections		0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	64834064	11523902

Part III Funding Percentages		
14 Funding target attainment percentage	14	101.66 %
15 Adjusted funding target attainment percentage	15	126.43 %
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	128.18 %
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
Totals ►			18(b)	18(c)	

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	☐ Yes ☒ No	
b If 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

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

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b
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	
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	8232928	
b Excess assets, if applicable, but not greater than line 31a	31b	5119172	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment			
b Waiver amortization installment			
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	3113756	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	3113756	0	3113756
36 Additional cash requirement (line 34 minus line 35)	36		
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37		
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b		
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		

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
A Name of plan PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384	

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

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

LINCOLN NATIONAL LIFE INSURANCE CO

35-0472300

(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?
20	NONE	220513	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☒

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

WELLS FARGO BANK, N.A.

41-0449260

(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	NONE	1329531	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☒

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

BUCK CONSULTANTS

13-3954297

(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	NONE	329517	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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
A Name of plan PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384	

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)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(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)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	384456719	366257342
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	5252991	4938310
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	389709710	371195652

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	389709710	371195652
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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)	0	
(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)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(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)	9530691	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		9530691
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(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)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(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)		-13138094
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-3607403

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	13027093	
(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)		13027093
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)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	1879562	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1879562
j Total expenses. Add all expense amounts in column (b) and enter total	2j		14906655

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-18514058
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: **BKD, LLP**

(2) EIN: **44-0160260**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	N/A	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒		
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	N/A	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		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.				
o Did the plan trust incur unrelated business taxable income?				
p Were in-service distributions made during the plan year?				

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)

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

6a Name of trust	6b Trust's EIN
6c Name of trustee or custodian	6d Trustee's or custodian's telephone number

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 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan <u>PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION 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>PARKVIEW HEALTH SYSTEM, INC.</u>	D Employer Identification Number (EIN) <u>35-1972384</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>35-0472300</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>7</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	<u>0</u>	
b Enter the amount contributed by the employer to the plan for this plan year	6b	<u>0</u>	
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	0

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: 89.5% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: 9.2% Other: 1.3%
- 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): _____

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan?	☐ Yes	☐ No
20b If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	☐ Design-based safe harbor method	☐ ADP/ACP test
20c If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii))?	☐ Yes	☐ No
21a Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	☐ Ratio percentage test	☐ Average benefit test
21b Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	☐ Yes	☐ No
22a Has the plan been timely amended for all required tax law changes?	☐ Yes	☐ No ☐ N/A
22b Date the last plan amendment/restatement for the required tax law changes was adopted ____/____/____. Enter the applicable code _____. (See instructions for tax law changes and codes).		
22c If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter ____/____/____ and the letter's serial number _____.		
22d If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter ____/____/____.		
23 Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	☐ Yes	☐ No

Independent Auditor's Report

Plan Administrator and Finance Committee
Parkview Health System, Inc. Employees' Pension Plan
Fort Wayne, Indiana

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Parkview Health System, Inc. Employees' Pension Plan (Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, 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 accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting our audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph; however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4 which was certified by Lincoln National Life Insurance Company and Wells Fargo Bank, N.A., the custodians of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodians hold the Plan's investment assets and execute investment transactions. The Plan Administrator has obtained certifications from the custodians as of and for the years ended December 31, 2015 and 2014, that the information provided to the Plan Administrator by the custodians is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Emphasis of Matter

As discussed in Note 3 to the financial statements, in 2015, the Plan adopted new accounting guidance for fully benefit-responsive investment contracts. Our opinion is not modified with respect to this matter.

Other Matter

The supplemental schedules listed in the table of contents are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974* and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the custodians, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*.

BKD, LLP

Fort Wayne, Indiana
October 3, 2016

Federal Employer Identification Number: 44-0160260

Parkview Health System, Inc. Employees Pension Plan

EIN / PN: 35-1972384 / 001

Schedule SB, Line 26 - Schedule of Active Participant Data

Attained Age	YEARS OF CREDITED SERVICE*																			
	Under 1		0 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 to 29	0		0		5		0		0		0		0		0		0		0	
30 to 34	0		1		43	42,986	40	45,299	0		0		0		0		0		0	
35 to 39	1		6		25	44,757	46	48,611	13		0		0		0		0		0	
40 to 44	1		7		20	45,412	43	48,424	35	62,161	9		0		0		0		0	
45 to 49	0		6		20	41,153	38	60,766	43	54,496	27	63,999	14		0		0		0	
50 to 54	1		2		14		45	49,737	56	59,102	38	70,588	62	71,949	44	63,129	0		0	
55 to 59	1		4		9		44	55,421	67	75,947	56	54,567	32	67,984	92	66,192	7		0	
60 to 64	0		3		8		43	70,965	66	59,387	33	79,328	25	58,850	22	69,767	36	76,762	0	
65 to 69	1		0		4		6		6		3		0		2		2		0	
70 & up	0		1		3		3		1		0		1		1		0		0	

Attained Age	YEARS OF CREDITED SERVICE**																			
	Under 1		0 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 to 29	0		0		1		0		0		0		0		0		0		0	
30 to 34	2		38	624	3		0		0		0		0		0		0		0	
35 to 39	15		128	1,008	59	2,268	0		0		0		0		0		0		0	
40 to 44	9		100	1,308	131	2,676	31	5,136	2		0		0		0		0		0	
45 to 49	8		69	1,188	97	3,168	55	5,424	22	9,192	0		0		0		0		0	
50 to 54	16		64	1,392	75	3,072	50	6,072	30	8,568	19		1		0		0		0	
55 to 59	10		65	1,452	58	3,012	27	7,080	19		16		1		0		0		0	
60 to 64	10		26	1,260	26	3,324	15		13		5		7		0		0		0	
65 to 69	1		8		4		1		0		0		0		0		0		0	
70 & up	0		1		3		0		0		0		0		0		0		0	

* 1,287 employees who are currently accruing benefits.

**1,341 employees who are not currently accruing benefits.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

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

Prescribed Funding Assumptions and Methods

The following assumptions and methods are prescribed by ERISA.

Funding interest rates

For 2015 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.22%	4.72%
Second Segment Rate	4.11%	6.11%
Third Segment Rate	5.20%	6.81%

Effective Interest Rate
Based on constrained rates 6.33%

For 2014 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.25%	4.99%
Second Segment Rate	4.06%	6.32%
Third Segment Rate	5.08%	6.99%

Effective Interest Rate
Based on constrained rates 6.54%

* Used for maximum tax-deduction purposes

** Used for minimum funding and benefit restriction purposes. See Appendix D under Segment Rate

Mortality

Mortality tables mandated by PPA as specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.

Actuarial cost method

The Funding Target is the present value of accrued benefits and based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan administrative expenses to be paid from plan assets during the year.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under PPA.

The demographic assumptions are based on the plan's anticipated experience. Actual experience is reviewed each year and compared to the assumptions. Changes are made, as appropriate, based on this review.

Salary increase assumption

Current Year:	3.00%
Prior Year:	3.00%

The salary increase assumption is based on prior and anticipated compensation practices of the plan sponsor.

Social Security

Current Year:	2.50%
Prior Year:	2.50%

This assumption reflects the actuary's analysis of approximate historical CPI increases to the Social Security Wage Base over the last 10 years.

Expenses

Expected plan related expenses of \$732,517 based on last year's expenses adjusted for expected increases in the PBGC premium for 2015 were added to the Target Normal Cost. To determine the 2015 expense assumption, we reviewed the administrative expenses paid from the trust over the past few years. The trustee and administration costs have not changed significantly. Except for the increase in the PBGC premium, we estimate no material increase to administration expenses for 2015.

Frequency of optional payment forms

Optional Forms	Assumption
Single Life Annuity	35%
5 year Certain and Life Annuity	10%
10 year Certain and Life Annuity	15%
50% Joint and Survivor Annuity	10%
66.7% Joint and Survivor Annuity	5%
100% Joint and Survivor Annuity	25%

Marital percentage

75% of participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Mortality table

The mortality table is applied on a static basis. Separate annuitant and non-annuitant tables were used.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Withdrawal rates

Table T-8 of the Actuary's Pension Handbook. Sample rates as follows:

Age	Rate of Withdrawal
20	11.9%
30	11.2%
40	9.4%
50	4.8%
60	0.2%

Retirement rates

Current Rates are bases on age and service as follows:

Rates of Retirement		
Age	Less than 20 years of Service	20 or More Years of Service
55	2%	2%
56	2%	2%
57	2%	2%
58	2%	2%
59	5%	5%
60	5%	5%
61	5%	5%
62	10%	50%
63	5%	15%
64	5%	15%
65	100%	100%

Vested terminated participants are assumed to commence benefits at age 65 if employed less than 20 years at termination, or age 62, if employed 20 years or more at termination.

Disability rates

Included in withdrawal rates.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Asset valuation method

Market Value, including the discounted value of accrued contributions.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Summary of Changes from the January 1, 2014 Valuation

- The interest rate basis was updated to the current rates as specified in IRS Regulation 1.430(h)(2)-1. These rates are constrained in accordance with HAFTA.
- The mortality assumption was updated according to the projection specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.
- The expected amount of plan administrative expenses changed from \$651,837 to \$732,517 mainly due to the change in PBGC premiums.
- The above changes in economic assumptions increased plan's Funding Target by approximately \$12.4M.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 2015 This Form Is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

► 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 PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a	389,709,710	
b Actuarial value	2b	389,709,710	
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	1,565	128,703,112	128,703,112
b For terminated vested participants	1,588	42,856,828	42,856,828
c For active participants	2,628	135,059,703	136,672,632
d Total	5,781	306,619,643	308,232,572
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	6.33%	
6 Target normal cost	6	8,232,928	

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

SIGN HERE	 Signature of actuary	<u>09/28/2016</u> Date <u>1406697</u> Most recent enrollment number <u>260-426-7800</u> Telephone number (including area code)
TIMOTHY J. MAXSON Type or print name of actuary BUCK CONSULTANTS, LLC Firm name 110 W. BERRY ST., SUITE 1300 FORT WAYNE IN 46802-2317 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).....	62,107,543	11,039,278
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).....	62,107,543	11,039,278
10 Interest on line 9 using prior year's actual return of <u>4.39%</u>	2,726,521	484,624
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		8,384,248
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>6.54%</u>		548,330
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.....		8,932,578
d Portion of (c) to be added to prefunding balance.....		0
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).....	64,834,064	11,523,902

Part III Funding Percentages

14	Funding target attainment percentage	14	101.66 %
15	Adjusted funding target attainment percentage	15	126.43 %
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	128.18 %
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
			Totals ►	18(b)	0 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	0

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

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

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ 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	8,232,928	
b Excess assets, if applicable, but not greater than line 31a	31b	5,119,172	
32 Amortization installments:	Outstanding Balance		
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	3,113,756	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	3,113,756	0	3,113,756
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	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
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		

Parkview Health System, Inc. Employees Pension Plan

EIN / PN: 35-1972384 / 001

Schedule SB, Line 26 - Schedule of Active Participant Data

Attained Age	YEARS OF CREDITED SERVICE*																			
	Under 1		0 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.	No.	Average Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 to 29	0		0		5		0		0		0		0		0		0		0	
30 to 34	0		1		43	42,986	40	45,299	0		0		0		0		0		0	
35 to 39	1		6		25	44,757	46	48,611	13		0		0		0		0		0	
40 to 44	1		7		20	45,412	43	48,424	35	62,161	9		0		0		0		0	
45 to 49	0		6		20	41,153	38	60,766	43	54,496	27	63,999	14		0		0		0	
50 to 54	1		2		14		45	49,737	56	59,102	38	70,588	62	71,949	44	63,129	0		0	
55 to 59	1		4		9		44	55,421	67	75,947	56	54,567	32	67,984	92	66,192	7		0	
60 to 64	0		3		8		43	70,965	66	59,387	33	79,328	25	58,850	22	69,767	36	76,762	0	
65 to 69	1		0		4		6		6		3		0		2		2		0	
70 & up	0		1		3		3		1		0		1		1		0		0	

Attained Age	YEARS OF CREDITED SERVICE**																			
	Under 1		0 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.	No.	An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 to 29	0		0		1		0		0		0		0		0		0		0	
30 to 34	2		38	624	3		0		0		0		0		0		0		0	
35 to 39	15		128	1,008	59	2,268	0		0		0		0		0		0		0	
40 to 44	9		100	1,308	131	2,676	31	5,136	2		0		0		0		0		0	
45 to 49	8		69	1,188	97	3,168	55	5,424	22	9,192	0		0		0		0		0	
50 to 54	16		64	1,392	75	3,072	50	6,072	30	8,568	19		1		0		0		0	
55 to 59	10		65	1,452	58	3,012	27	7,080	19		16		1		0		0		0	
60 to 64	10		26	1,260	26	3,324	15		13		5		7		0		0		0	
65 to 69	1		8		4		1		0		0		0		0		0		0	
70 & up	0		1		3		0		0		0		0		0		0		0	

* 1,287 employees who are currently accruing benefits.

**1,341 employees who are not currently accruing benefits.

Parkview Health System, Inc. Employees Pension Plan
EIN/PN: 35-1972384 / 001

Schedule SB, Line 22 - Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	1,114.5148	0.0103	11.4706	630.8805
56	1,178.5452	0.0197	23.2524	1,302.1323
57	1,250.4561	0.0198	24.7477	1,410.6161
58	1,333.4451	0.0198	26.3865	1,530.4142
59	1,415.2874	0.0198	27.9934	1,651.6100
60	1,481.9524	0.0495	73.3209	4,399.2555
61	1,504.6905	0.0496	74.5967	4,550.3977
62	1,493.6075	0.4640	693.1062	42,972.5823
63	849.5808	0.1376	116.8711	7,362.8775
64	766.0413	0.1370	104.9125	6,714.4022
65	682.5596	0.9942	678.5774	44,107.5303
66	13.9623	0.8578	11.9769	790.4773
67	11.9747	0.9174	10.9851	735.9987
68	2.9841	1.0000	2.9841	202.9170
69	7.0000	1.0000	7.0000	483.0000
70	2.0000	0.5000	1.0000	70.0000
71	3.9937	0.5008	2.0000	142.0000
72	4.9795	0.6025	3.0000	216.0000
73	3.9621	0.7532	2.9842	217.8435
74	2.9670	0.6741	2.0000	148.0000
75	0.9529	1.0000	0.9529	71.4670
76	3.0000	1.0000	<u>3.0000</u>	<u>228.0000</u>
Total			1,903.1183	119,938.4022
Weighted Average Retirement Age = 119,938.4022 / 1,903.1183				63.02
Rounded Weighted Average Retirement Age				63

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General note: The table presents values rounded to fewer significant digits than used in the calculation.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions

Eligible Employees

All employees hired prior to January 1, 2005 are eligible to participate in the Pension Plan upon meeting Eligibility Requirements. No employees hired subsequent to January 1, 2005 will be eligible for the Plan.

Eligibility Requirements

Attainment of age 21 and one year of service following date of hire are required. A year of service for eligibility is based upon the completion of 1,000 hours.

Compensation

Regular wages or salary, as reported on Form W-2, including bonuses, commissions, overtime and all other forms of special pay, as well as before-tax contributions to any plans referenced by IRC Section 125, 403(b), 401(k) and 457(b). Before-tax contributions to an IRC Section 457(f) plan and payments made to Highly Compensated Employees for various fringe benefit plans are excluded from compensation.

Average Final Compensation

Based upon Compensation of the 60 consecutive months within the 120 months preceding Normal Retirement which produces the highest average.

Vesting Service

An employee is credited with one year of Vesting Service for each plan year in which he works at least 1,000 hours. All years of service while an employee of Parkview, or an entity acquired by Parkview, are included in the calculation of Vesting Service.

Any former employee rehired by Parkview who has accrued a benefit under the plan prior to termination is eligible to earn a year of Vesting Service toward eligibility requirements for vested and early retirement pensions.

Vesting Service is used in the determination for eligibility for vested and early retirement pensions.

Benefit Service

A participant is credited with one year of Benefit Service for each plan year in which he works at least 1,000 hours as a participant in the plan. Only years of service while an employee of Parkview are included in the calculation of Benefit Service, except where noted for former employees of Huntington Memorial Hospital.

Participants, who made an irrevocable waiver to no longer participate in the plan, will not accrue Benefit Service subsequent to January 1, 2005. In addition, any participant who is rehired subsequent to January 1, 2005, will not accrue Benefit Service under the plan.

Benefit Service is used in the calculation of all pension benefits under the plan.

Normal Retirement Date

First day of the month coincident with or next following the later the attainment of age 65 or the fifth anniversary of the date of participation. Former employees of Huntington Memorial Hospital are eligible for Normal Retirement upon attainment of age 65.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions (continued)

Early Retirement Date

Age 55 and 10 years of Vesting Service. Former employees of Huntington Memorial Hospital are eligible for Early Retirement at age 55 and 5 years of Vesting Service.

Eligibility for Vested Pension

100% vesting after five years of Vesting Service.

Eligibility for Surviving Spouse Pension

Death occurring while:

1. Actively employed, with at least 5 years of Vesting Service, or
2. Terminated with a vested deferred pension but before benefit commencement, and
3. Married at time of death.

Eligibility for Disability Pension

Former employees of Huntington Memorial Hospital who retire due to disability after attainment of age 45 and completion of 10 years of Vesting Service.

Accrued Benefit

For those employees who did not irrevocably waive participation in the plan:

Using Average Final Compensation and Social Security covered Compensation as of date of termination:

42.5% of Average Final Compensation reduced by 12.5% of Final Average Compensation not in excess of the Social Security Covered Compensation, reduced for Benefit Service less than 25 at Normal Retirement. The Accrued Benefit is no less than 1.1% of Average Final Compensation multiplied by Benefit Service not to exceed 40 years.

Former employees of Huntington Memorial Hospital will receive the greater of:

1. The Accrued Benefit under the Huntington plan as of December 31, 1997, plus a benefit accrued (as noted above) for Benefit Service earned as a Parkview employee after that date, or
2. A benefit accrued (as noted above) for all years of Benefit Service as a Huntington and Parkview employee.

For those employees who irrevocably waived participation in the Plan:

An Accrued Benefit as calculated above using only Benefit Service and compensation earned through December 31, 2004.

Normal Monthly Retirement Pension

Monthly Accrued Benefit as of Normal Retirement Date. The normal form of payment is the 5 year certain and life annuity. 100% of active participants are assumed to elect the normal form of payment. The other possible form of payment for single participants is a Life only annuity. Other possible forms of payment married participants are: Life only and 100%, 75%, and 50% Joint and Survivor Annuities.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions (continued)

Early Monthly Retirement Pension

Monthly Accrued Benefit as of Early Retirement Date, reduced by $\frac{1}{180}$ for each month of the first 60 months plus $\frac{1}{360}$ for each of the next 60 months by which the Early Retirement Date precedes the Normal Retirement Date.

For a participant who has attained age 62 and has been employed for 20 years, his Accrued Benefit will not be reduced for early retirement.

Postponed Monthly Retirement Pension

The greater of:

1. Monthly Accrued Benefit as of actual retirement date, crediting service and earnings through postponed retirement date, or
2. The actuarial equivalent of the Normal Monthly Retirement Pension.

Deferred Monthly Retirement Benefit for Termination Prior to Retirement

Monthly Accrued Benefit as of date of termination. Pensions that commence prior to age 65 are payable as an Early Monthly Retirement Pension.

Surviving Spouse Monthly Pension

For all married vested participants not yet receiving a pension: 50% of the monthly Accrued Benefit, actuarially adjusted for the joint and 50% survivor payment form and early commencement, if applicable, payable commencing on the earliest date the participant could have retired, to the surviving spouse and continuing for the remaining lifetime of the surviving spouse.

Postretirement Death Benefit

Based upon the form of annuity chosen by the retiree at date of retirement.

Retirement Pension Disability

For former employees of Huntington Memorial Hospital eligible for disability: Accrued Benefit as calculated above payable immediately.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

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

Prescribed Funding Assumptions and Methods

The following assumptions and methods are prescribed by ERISA.

Funding interest rates

For 2015 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.22%	4.72%
Second Segment Rate	4.11%	6.11%
Third Segment Rate	5.20%	6.81%

Effective Interest Rate
Based on constrained rates 6.33%

For 2014 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.25%	4.99%
Second Segment Rate	4.06%	6.32%
Third Segment Rate	5.08%	6.99%

Effective Interest Rate
Based on constrained rates 6.54%

* Used for maximum tax-deduction purposes

** Used for minimum funding and benefit restriction purposes. See Appendix D under Segment Rate

Mortality

Mortality tables mandated by PPA as specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.

Actuarial cost method

The Funding Target is the present value of accrued benefits and based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan administrative expenses to be paid from plan assets during the year.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under PPA.

The demographic assumptions are based on the plan's anticipated experience. Actual experience is reviewed each year and compared to the assumptions. Changes are made, as appropriate, based on this review.

Salary increase assumption

Current Year:	3.00%
Prior Year:	3.00%

The salary increase assumption is based on prior and anticipated compensation practices of the plan sponsor.

Social Security

Current Year:	2.50%
Prior Year:	2.50%

This assumption reflects the actuary's analysis of approximate historical CPI increases to the Social Security Wage Base over the last 10 years.

Expenses

Expected plan related expenses of \$732,517 based on last year's expenses adjusted for expected increases in the PBGC premium for 2015 were added to the Target Normal Cost. To determine the 2015 expense assumption, we reviewed the administrative expenses paid from the trust over the past few years. The trustee and administration costs have not changed significantly. Except for the increase in the PBGC premium, we estimate no material increase to administration expenses for 2015.

Frequency of optional payment forms

Optional Forms	Assumption
Single Life Annuity	35%
5 year Certain and Life Annuity	10%
10 year Certain and Life Annuity	15%
50% Joint and Survivor Annuity	10%
66.7% Joint and Survivor Annuity	5%
100% Joint and Survivor Annuity	25%

Marital percentage

75% of participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Mortality table

The mortality table is applied on a static basis. Separate annuitant and non-annuitant tables were used.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Withdrawal rates

Table T-8 of the Actuary's Pension Handbook. Sample rates as follows:

Age	Rate of Withdrawal
20	11.9%
30	11.2%
40	9.4%
50	4.8%
60	0.2%

Retirement rates

Current Rates are bases on age and service as follows:

Rates of Retirement		
Age	Less than 20 years of Service	20 or More Years of Service
55	2%	2%
56	2%	2%
57	2%	2%
58	2%	2%
59	5%	5%
60	5%	5%
61	5%	5%
62	10%	50%
63	5%	15%
64	5%	15%
65	100%	100%

Vested terminated participants are assumed to commence benefits at age 65 if employed less than 20 years at termination, or age 62, if employed 20 years or more at termination.

Disability rates

Included in withdrawal rates.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Asset valuation method

Market Value, including the discounted value of accrued contributions.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Summary of Changes from the January 1, 2014 Valuation

- The interest rate basis was updated to the current rates as specified in IRS Regulation 1.430(h)(2)-1. These rates are constrained in accordance with HAFTA.
- The mortality assumption was updated according to the projection specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.
- The expected amount of plan administrative expenses changed from \$651,837 to \$732,517 mainly due to the change in PBGC premiums.
- The above changes in economic assumptions increased plan's Funding Target by approximately \$12.4M.



Parkview Health System, Inc. Employees Pension Plan
EIN/PN: 35-1972384 / 001

Schedule SB, Line 24 - Change in Actuarial Assumptions

- Assumed expenses were changed from \$651,837 to \$732,517 mainly due to the change in PBGC premiums.

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 2015 This Form is Open to Public Inspection
--	--	---

For calendar plan year 2015 or fiscal plan year beginning _____ and ending _____

► **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 PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a	389709710	
b Actuarial value	2b	389709710	
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	1565	128703112	128703112
b For terminated vested participants	1588	42856828	42856828
c For active participants	5781	306619643	308232572
d Total	8934	478179583	479792512
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	6.33%	
6 Target normal cost	6	8232928	

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	<div style="text-align: center;"> Signature of actuary TIMOTHY J. MAXSON Type or print name of actuary BUCK CONSULTANTS, LLC Firm name </div>	<div style="text-align: center;"> 09/28/2016 Date 1406697 Most recent enrollment number 260-426-7800 Telephone number (including area code) </div>
------------------	---	--

110 W. BERRY ST., SUITE 1300
FORT WAYNE IN 46802-2317
 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) 2015
v. 150123

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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**2015****This Form is Open to Public Inspection****Part I Annual Report Identification Information**

For calendar plan year 2015 or fiscal plan year beginning

and ending

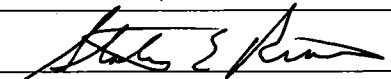
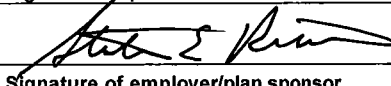
- A** This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or
- ☒ a single-employer plan; ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first 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 PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 07/01/1958
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) PARKVIEW HEALTH SYSTEM, INC. 10501 CORPORATE DRIVE FORT WAYNE IN 46845	2b Employer Identification Number (EIN) 35-1972384
	2c Plan Sponsor's telephone number 260-373-4000
	2d Business code (see instructions) 622000

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		10/04/16	Stanton E. Risser
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/4/16	Stanton E. Risser
	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)			Preparer's telephone number

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

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 5781
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 2628
a(2) Total number of active participants at the end of the plan year	6a(2) 2482
b Retired or separated participants receiving benefits	6b 1583
c Other retired or separated participants entitled to future benefits	6c 1571
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d 5636
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 112
f Total. Add lines 6d and 6e.	6f 5748
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 0.
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.	6h 0.
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 1A

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)	9b Plan benefit arrangement (check all that apply)
(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

- 11c** Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 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 _____

Authorization for BKD, LLP to Electronically Sign Form 5500

Please note the following terms and conditions if you choose to authorize **BKD, LLP** to electronically sign Form 5500 on your behalf:

1. The plan administrator and/or plan sponsor must provide **BKD, LLP** with a signed copy of pages one and two of Form 5500, with the manual signature of the plan administrator and/or plan sponsor on page one.
2. In addition to any other required schedules and attachments, the electronic filing includes a copy of pages one and two of Form 5500 bearing the manual signature of the plan administrator and/or plan sponsor under penalties of perjury.
3. An image of the plan administrator's and/or plan sponsor's manual signature will be included with the rest of the Form 5500. The complete Form 5500, including an image of the signature, will be posted on the Internet for public disclosure by the DOL.
4. **BKD, LLP** will communicate to the plan administrator and/or plan sponsor any inquiries and information received from EFAST2, DOL, IRS or PBGC regarding the return.

Please mark one selection:

- ☒ I authorize **BKD, LLP** to electronically sign Form 5500 on behalf of the plan named below.
- ☐ I do not authorize **BKD, LLP** to electronically sign Form 5500 on behalf of the plan named below.

PARKVIEW HEALTH SYSTEMS EMPLOYEE PENSION PLAN



Signature of Plan Administrator

10/04/16

Date

Stanton E. Risser

Name of Plan Administrator

Please return the signed authorization form to **BKD, LLP**.

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2015

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Aberdeen Global Equity Fund, LLC	\$ -	\$ 27,343,139	\$ -	\$ 25,983,095	\$ 27,343,139	\$ 1,360,044
American Funds Capital World Growth	27,343,139	-	-	27,343,139	27,343,139	-
External Commingled Fund	150,000,000	-	-	150,000,000	150,000,000	-
JPM Core Bond Trust	75,000,000	-	-	75,000,000	75,000,000	-
Vanguard Total Bond Market Index	-	150,410,651	-	149,595,834	150,410,651	814,817
Wells Fargo Short-Term	253,205,737	180,206,903	-	433,412,640	433,412,640	-

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 2015 This Form Is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

► 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 PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF PARKVIEW HEALTH SYSTEM, INC.	D Employer Identification Number (EIN) 35-1972384	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a	389,709,710	
b Actuarial value	2b	389,709,710	
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	1,565	128,703,112	128,703,112
b For terminated vested participants	1,588	42,856,828	42,856,828
c For active participants	2,628	135,059,703	136,672,632
d Total	5,781	306,619,643	308,232,572
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	6.33%	
6 Target normal cost	6	8,232,928	

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

SIGN HERE	 Signature of actuary	<u>09/28/2016</u> Date <u>1406697</u> Most recent enrollment number <u>260-426-7800</u> Telephone number (including area code)
TIMOTHY J. MAXSON Type or print name of actuary BUCK CONSULTANTS, LLC Firm name 110 W. BERRY ST., SUITE 1300 FORT WAYNE IN 46802-2317 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).....	62,107,543	11,039,278
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).....	62,107,543	11,039,278
10 Interest on line 9 using prior year's actual return of <u>4.39%</u>	2,726,521	484,624
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		8,384,248
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>6.54%</u>		548,330
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.....		8,932,578
d Portion of (c) to be added to prefunding balance.....		0
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).....	64,834,064	11,523,902

Part III Funding Percentages

14	Funding target attainment percentage	14	101.66 %
15	Adjusted funding target attainment percentage	15	126.43 %
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	128.18 %
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
			Totals ►	18(b)	0 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	0

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
---------	---------	---------	---------

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

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ 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	8,232,928	
b Excess assets, if applicable, but not greater than line 31a	31b	5,119,172	
32 Amortization installments:	Outstanding Balance		
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	3,113,756	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	3,113,756	0	3,113,756
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	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
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		

Parkview Health System, Inc.
Employees' Pension Plan

EIN 35-1972384 PN 001

Auditor's Report and Financial Statements
December 31, 2015 and 2014



Parkview Health System, Inc. Employees' Pension Plan

December 31, 2015 and 2014

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Independent Auditor's Report

Plan Administrator and Finance Committee
Parkview Health System, Inc. Employees' Pension Plan
Fort Wayne, Indiana

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Parkview Health System, Inc. Employees' Pension Plan (Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, 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 accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting our audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph; however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4 which was certified by Lincoln National Life Insurance Company and Wells Fargo Bank, N.A., the custodians of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodians hold the Plan's investment assets and execute investment transactions. The Plan Administrator has obtained certifications from the custodians as of and for the years ended December 31, 2015 and 2014, that the information provided to the Plan Administrator by the custodians is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Emphasis of Matter

As discussed in Note 3 to the financial statements, in 2015, the Plan adopted new accounting guidance for fully benefit-responsive investment contracts. Our opinion is not modified with respect to this matter.

Other Matter

The supplemental schedules listed in the table of contents are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974* and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on these supplemental schedules.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the custodians, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*.

BKD, LLP

Fort Wayne, Indiana
October 3, 2016

Federal Employer Identification Number: 44-0160260

Parkview Health System, Inc. Employees' Pension Plan

Statements of Net Assets Available for Benefits

December 31, 2015 and 2014

	<u>2015</u>	<u>2014</u>
Assets		
Investments		
At fair value	\$ 366,257,342	\$ 384,456,719
At contract value	4,938,310	5,252,991
Total investments	<u>371,195,652</u>	<u>389,709,710</u>
Net Assets Available for Benefits	<u>\$ 371,195,652</u>	<u>\$ 389,709,710</u>

Parkview Health System, Inc. Employees' Pension Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2015 and 2014

	2015	2014
Investment Income (Loss)		
Net (depreciation) appreciation in fair value of investments	\$ (13,138,094)	\$ 10,713,167
Interest and dividend income	9,530,691	6,943,444
Net investment income (loss)	<u>(3,607,403)</u>	<u>17,656,611</u>
Contributions		
Employer	-	8,500,000
Total additions	<u>(3,607,403)</u>	<u>26,156,611</u>
Deductions		
Benefits paid to participants	13,027,093	11,550,830
Administrative expenses	1,879,562	1,781,471
Total deductions	<u>14,906,655</u>	<u>13,332,301</u>
Net Increase (Decrease)	(18,514,058)	12,824,310
Net Assets Available for Benefits, Beginning of Year	<u>389,709,710</u>	<u>376,885,400</u>
Net Assets Available for Benefits, End of Year	<u><u>\$ 371,195,652</u></u>	<u><u>\$ 389,709,710</u></u>

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Note 1: Description of the Plan

The following description of Parkview Health System, Inc. Employees' Pension Plan (Plan) provides only general information. Participants should refer to the Plan Document and *Summary Plan Description* for more complete information.

General

The Plan is a noncontributory defined benefit plan that covers substantially all employees of Parkview Health System, Inc. and subsidiaries (Corporation) and provides for retirement, death, disability and termination benefits. Participants' benefits vest after five years of credited service. The Plan is subject to provisions of the *Employee Retirement Income Security Act of 1974* (ERISA). Wells Fargo Bank, N.A. is the trustee of the Plan.

Effective January 1, 2005, the Plan was frozen to new participants. The Plan continues to accrue and pay benefits to existing participants.

Contributions

The Corporation has agreed to voluntarily contribute such additional amounts that are necessary to provide assets sufficient to meet the benefits to be paid to Plan participants. The Corporation's present intention is to make contributions in amounts sufficient to annually fund the Plan's current service cost and the initial past-service costs plus interest on them over a period of 30 years. The Plan has met the minimum funding requirements established by the federal government.

Pension Benefits

Pension benefits are paid to participants in either monthly installments or in a lump sum based on defined thresholds upon normal retirement which is defined as 65 years of age. The amounts paid are dependent upon the participant's years of vesting service and salary. The Plan also provides for early retirement (starting at age 55), late retirement, death and disability benefits and joint and survivor benefits and payment options, all of which may affect the amount of participants' benefits.

Vesting

Upon completion of five years of vesting service but prior to becoming eligible for a normal retirement benefit, a participant is entitled to a deferred vested termination benefit equal to a percentage of their accrued retirement benefit. Eligible employees are fully vested upon completion of five years of vesting service.

Plan Termination

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- a. Benefits attributable to employee contributions, taking into account those paid out before termination.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

- b. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan.
- c. Other vested benefits insured by the Pension Benefit Guarantee Corporation (PBGC) up to the applicable limitations discussed below.
- d. Vested benefits not insured by the PBGC.
- e. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

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 to provide for accumulated benefit obligations and may also depend on the financial condition of the Corporation and the level of benefits guaranteed by the PBGC.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets and changes in net assets available for benefits, disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Valuation of Investments and Income Recognition

Quoted market prices, if available, are used to value investments. Common stocks and U.S. government securities are valued at the closing price reported on the active market on which the individual securities are traded. Corporate bonds are valued on the basis of yields currently available on comparable securities of issuers with similar credit ratings. Mutual funds are valued at the net asset value (NAV) quoted market value of shares held by the Plan at year-end.

Commingled (collective trust) funds are valued at NAV based on information reported by the investment advisor using the audited financial statement of the collective trust at year-end.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

The Plan's Finance Committee determines the Plan's valuation policies utilizing information provided by its investment advisers, custodians and insurance companies. See Note 7 for a discussion of fair value measurements.

The guaranteed interest contract is valued at contract value, as estimated by Lincoln National Life Insurance Company (Lincoln). Contract value represents contributions made under the contract, plus interest at contract rate, less funds used to pay retirement benefits.

Real estate investment fund and real estate investment trust fund are valued using the NAV provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by each investee fund rather than actual market transactions and other observable market data.

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

Administrative expenses may be paid by the Corporation or the Plan, at the Corporation's discretion.

Accumulated Plan Benefits

Accumulated plan benefits (see Note 6) are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

- a. Retired or terminated employees or their beneficiaries
- b. Present employees or their beneficiaries

Benefits under the Plan are based on employees' five highest consecutive years of compensation in the last ten years of vested service. 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. Benefits to be provided via annuity contracts excluded from Plan assets are excluded from accumulated plan benefits.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Plan Tax Status

The Plan obtained its latest determination letter on June 22, 2015, in which the Internal Revenue Service stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code and, therefore, not subject to tax.

Note 3: Change in Accounting Principle

In 2015, the Plan changed its method of accounting for fully benefit-responsive investment contracts by adopting the provisions of ASU 2015-12, *Plan Accounting (Topics 962 and 965): Part I: Fully Benefit-Responsive Investment Contracts*. The accounting provided for in ASU 2015-12 allows plans to measure, present and disclose fully benefit-responsive investment contracts at contract value. The effect of the adoption of the ASU is to eliminate the requirement to measure fair value of fully benefit-responsive contracts and to present the reconciliation from fair value to contract value on the statement of net assets. This change was applied retrospectively to all periods presented.

In 2015, the Plan changed its accounting policy on plan accounting disclosures by adopting the provisions of ASU 2015-12, *Plan Accounting (Topics 960, 962 and 965): Part II: Plan Investment Disclosures*. The accounting policy change provided for in ASU 2015-12 changes the Plan's disclosure requirements to eliminate and/or modify certain investment-related disclosures. This change was applied retrospectively for all periods presented.

Note 4: Certification by Plan Custodians

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the custodians have certified the following information included in the accompanying financial statements and supplemental schedules is complete and accurate:

- Investments as shown in the statements of net assets available for benefits and related disclosures as of December 31, 2015 and 2014
- Investment income as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2015 and 2014
- Investment information included in the accompanying schedule of assets (held at end of year) and schedule of reportable transactions as of and for the year ended December 31, 2015

The Plan's independent auditors did not perform procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Note 5: Investment Contract With Insurance Company

In 1958, the Plan entered into a fully benefit-responsive investment contract with Lincoln National Life Insurance Company (Insurer). The Insurer maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate guaranteed to the Plan. The rate was 3 percent for 2015 and 2014.

The guaranteed investment contract is fully benefit responsive; therefore, contract value is the relevant measurement. Contract value, as reported to the Plan by the Insurer, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against the contract value for credit risk of the contract issuer or otherwise.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan Documents (including complete or partial plan termination or merger with another plan), (2) changes to Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan Administrator does not believe the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

The guaranteed investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

The investment contract is a traditional investment contract.

Note 6: Accumulated Plan Benefits

An actuary from Buck Consultants determines the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits 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.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

The accumulated plan benefit information as of January 1, 2015 and 2014, was as follows:

	January 1, 2015	January 1, 2014
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	\$ 122,447,299	\$ 105,161,996
Other participants	160,996,608	162,640,996
	<u>283,443,907</u>	<u>267,802,992</u>
Nonvested benefits	1,395,709	1,429,559
	<u>1,395,709</u>	<u>1,429,559</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 284,839,616</u></u>	<u><u>\$ 269,232,551</u></u>

Changes in the actuarial present value of accumulated plan benefits were as follows:

	January 1, 2015	January 1, 2014
Actuarial present value of accumulated plan benefits, beginning of year	\$ 269,232,551	\$ 228,120,320
Increase during the year attributable to:		
Benefits accumulated	7,383,429	5,642,910
Increase for interest due to the decrease in the discounted period	19,767,377	17,847,821
Assumption changes	-	27,863,654
Benefits paid	<u>(11,543,741)</u>	<u>(10,242,154)</u>
Net increase	<u>15,607,065</u>	<u>41,112,231</u>
Actuarial present value of accumulated plan benefits, end of year	<u><u>\$ 284,839,616</u></u>	<u><u>\$ 269,232,551</u></u>

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 7.50 percent and 8.00 percent for 2015 and 2014, respectively
- Mortality basis: RP-2014 Mortality Tables with Projections specified by IRS Proposed Reg. Section 1.430(h)(3)-1 with separate annuitant and nonannuitant static mortality tables
- Employee turnover: Sarason T-8 Table
- Retirement: At normal retirement age (65) or attained age if later
- Asset valuation: Market

The foregoing 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.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Note 7: Party-in-Interest Transactions

Parties-in-interest are defined under DOL regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer and certain others. Plan investments are held by Lincoln National Life Insurance Company (Lincoln) and Wells Fargo Bank, N.A. (Wells Fargo). Lincoln and Wells Fargo are the custodians of the Plan and, therefore, these transactions qualify as party-in-interest transactions. In addition, the Plan receives management services from an investment advisor. The Plan paid \$1,550,044 and \$1,496,635 of administrative and management fees to the custodians, the investment fund managers and the investment advisor during 2015 and 2014, respectively. The Corporation provides certain administrative services at no cost to the Plan.

Note 8: Fair Value of Plan Assets

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value:

- Level 1** Quoted prices in active markets for identical assets or liabilities
- Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities
- Level 3** Unobservable inputs supported by little or no market activity and are significant to the fair value of the assets or liabilities

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Recurring Measurements

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2015 and 2014:

		Fair Value Measurements Using		
		Quoted Prices in Active Markets for Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
		Fair Value		
December 31, 2015				
Mutual funds	\$ 147,220,534	\$ 147,220,534	\$ -	\$ -
Money market funds	4,348,043	4,348,043	-	-
Common stocks	87,978,378	80,594,962	7,383,416	-
Fixed income	83,838,855		83,838,855	-
Commingled funds (A)	8,888,244	-	-	-
Real estate funds (A)	33,983,288	-	-	-
	<u>\$ 366,257,342</u>	<u>\$ 232,163,539</u>	<u>\$ 91,222,271</u>	<u>\$ -</u>
December 31, 2014				
Mutual funds	\$ 218,872,147	\$ 218,872,147	\$ -	\$ -
Money market funds	1,633,362	1,633,362	-	-
Common stocks	75,937,797	69,373,139	6,564,658	-
Fixed income	15,006,655	-	15,006,655	-
Commingled funds (A)	42,948,091	-	-	-
Real estate funds (A)	30,058,667	-	-	-
	<u>\$ 384,456,719</u>	<u>\$ 289,878,648</u>	<u>\$ 21,571,313</u>	<u>\$ -</u>

(A) In accordance with Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the year ended December 31, 2014. The Plan had no liabilities measured at fair value on a recurring basis. Additionally, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis. For assets classified within Level 3 of the fair value hierarchy, the process used to develop the reported fair value is described below.

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. There are no Level 3 securities.

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2015 and 2014. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan:

	December 31, 2015			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Commingled fund (A)	\$ 8,888,244	\$ —	N/A	None
Real estate investment trust fund (B)	18,130,484	—	N/A	None
Real estate investment fund (C)	15,852,804	—	N/A	None
	December 31, 2014			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Commingled fund (A)	\$ 42,948,091	\$ —	N/A	None
Real estate investment trust fund (B)	14,378,552	—	N/A	None
Real estate investment fund (C)	15,680,115	—	N/A	None

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

- (A) This category includes investments in a fund that seeks to provide returns consistent with US CPI +5% over the long-term by investing in areas that offer strong relative performance in rising inflation environments. In 2014, this category also includes investments in a fund that seeks to invest at least 80% of its assets in equity securities located throughout the world to achieve long-term capital appreciation.
- (B) This category includes investments in a fund that is institutional debt focused. The structure is to invest in participating mortgage loans which are secured primarily by high quality, well leased properties, all of which are located in the U.S.
- (C) This category includes investments in a real estate fund that emphasizes the active management of stable, well located properties among the primary real estate sectors consisting of apartments, industrial, office and retail in major metropolitan markets throughout the U.S.

Note 9: Risks and Uncertainties

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

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 process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Note 10: Subsequent Events

Subsequent events have been evaluated through the date of the Independent Auditor's Report, which is the date the financial statements were available to be issued.

Supplemental Schedules

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds			
American Funds Capital World Grow	656,480 Shares	\$ 28,008,414	\$ 28,458,418
Dodge & Cox Global Stock Fund	2,596,182 Shares	22,992,134	27,156,059
PIMCO All Asset Fd Institutional	1,172,708 Shares	14,017,554	11,736,063
JPM Core Bond Trust	7,193,610 Shares	76,729,424	74,813,543
California St	720,000 Shares	718,510	717,214
Energy N W WA Elec Revenue	530,000 Shares	526,465	521,478
Houston TX Utility Sys Revenue	500,000 Shares	528,315	533,835
New York City NY Transitional F	725,000 Shares	740,029	727,139
New York NY	720,000 Shares	718,078	716,530
New York St Dorm Auth St Perso	720,000 Shares	731,369	723,622
Seattle WA	605,000 Shares	605,000	603,602
Univ of California CA Revenues	520,000 Shares	529,901	513,032
* Money Market Funds			
Wells Fargo Short-Term Investment Fund	4,126,999 Shares	4,126,999	4,126,999
Net Cash	221,029 Shares	221,029	221,029
Common Stocks			
Abbott Labs	10,690 Shares	367,549	480,088
Abbvie Inc	10,315 Shares	449,239	611,061
Adobe Sys Inc	9,000 Shares	294,176	845,460
Advance Auto Pts Inc	828 Shares	125,524	124,622
Aia Group Ltd Usd 1.0	125,600 Shares	537,116	755,206
Air Methods Corp Com	6,967 Shares	289,385	292,126
Akamai Technologies	14,100 Shares	618,334	742,083
Align Technology Inc	7,500 Shares	259,676	493,875
Allergan Plc	2,383 Shares	704,290	744,688
Ally Financial Inc 8.500% Pfd	2,919 Shares	77,383	75,135
Alphabet Inc Cl A	560 Shares	198,531	435,686
Alphabet Inc Cl C	1,604 Shares	876,160	1,217,244
American International Group, Inc	13,115 Shares	638,128	812,737
Ameriprise Finl Inc	5,460 Shares	483,748	581,053
Amphenol Corp Cl A	9,400 Shares	458,167	490,962
Anadarko Petroleum Corp	6,985 Shares	541,264	339,331
Apple Inc	11,403 Shares	1,087,219	1,200,280
Applied Materials Inc	20,035 Shares	371,291	374,053
Arm Holdings Plc - Adr	7,500 Shares	240,378	339,300
Autodesk Inc	16,300 Shares	568,592	993,159
Automatic Data Processing Inc	8,800 Shares	455,877	745,536
Blackrock Inc	1,430 Shares	295,703	486,944
Boeing Co	5,820 Shares	497,620	841,514
Cabelas Inc	12,800 Shares	626,429	598,144

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
CEB Inc	7,100 Shares	\$ 367,313	\$ 435,869
Centurylink, Inc	8,970 Shares	325,836	225,685
Cheesecake Factory Inc Com	5,500 Shares	220,281	253,605
China Mobile Ltd Hkd 0.1	59,500 Shares	626,922	671,761
Cisco Systems Inc	25,100 Shares	480,293	681,591
Cit Group Inc.	9,239 Shares	381,794	366,788
Citigroup Capital Xiii 7.88% Pfd	7,500 Shares	194,160	194,925
Citigroup Inc.	10,325 Shares	506,408	534,319
Citizens Financial Group Inc	17,170 Shares	416,113	449,682
Cme Group Ince	5,365 Shares	389,038	486,069
Cnooc Ltd Hkd 0.02	583,000 Shares	917,023	607,061
Cognex Corp	8,200 Shares	287,025	276,914
Cognizant Tech Solutions Crp Com	11,000 Shares	687,175	660,220
Colgate Palmolive Co	9,500 Shares	506,430	632,890
Compass Group 10.625p	30,800 Shares	494,888	533,406
Core Laboratories N V Com	2,900 Shares	290,346	315,346
CSL Ltd NPV	10,600 Shares	481,274	812,152
CVS Health Corporation	6,360 Shares	437,275	621,817
DBS Group Hldgs	48,283 Shares	570,180	568,035
Denso Corpnv	14,700 Shares	555,310	703,248
Devon Energy Corporation	5,115 Shares	269,507	163,680
Dicks Sporting Goods Inc	7,761 Shares	302,336	274,351
Dolby Laboratories Inc	6,400 Shares	207,186	215,360
Du Pont E I De Nemours & Co	7,055 Shares	343,198	469,863
E*trade Group	13,800 Shares	188,037	409,032
Ecolab Inc	3,300 Shares	249,938	377,454
Edwards Lifesciences Corp	16,600 Shares	774,393	1,311,068
Eog Resources, Inc	8,800 Shares	515,506	622,952
Essilor Intl Eur .35 Rfd	4,500 Shares	421,348	562,402
Ethan Allen Interiors Inc Com	17,700 Shares	443,237	492,414
Factset Resh Sys Inc Com	5,500 Shares	570,703	894,135
Fanuc Co Jpy Ords	3,700 Shares	615,285	634,550
Fidelity Natl Information Svcs In	8,255 Shares	405,101	500,253
First Data Corporation	19,050 Shares	304,448	305,181
FNF Group	8,335 Shares	300,586	288,974
Garmin Ltd	12,900 Shares	530,579	479,493
General Electric Co	22,940 Shares	567,359	714,581
Gentex Corp	38,000 Shares	407,134	608,380
Genuine Parts Co	3,970 Shares	265,407	340,983
Gilead Sciences Inc	12,405 Shares	1,319,014	1,255,262
Graco Inc	4,100 Shares	212,983	295,487
Grainger W W Inc	1,300 Shares	316,310	263,367
Hennes + Mauritz Sek 0.25	14,500 Shares	520,658	516,055
Hexcel Corp New Com	7,125 Shares	289,884	330,956
Home Depot Inc	4,635 Shares	420,219	612,979

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Honda Motor Co Jpy Ords	16,400 Shares	\$ 540,665	\$ 514,304
Hong Kg & China Gas Co Ltd Hkd.25	306,493 Shares	548,373	601,110
IHS Inc	2,000 Shares	210,815	236,860
Industria De Diseno Textil Eur	20,000 Shares	461,710	688,494
Ingersoll-rand Plc	8,870 Shares	400,984	490,422
Intuit Com	14,275 Shares	954,259	1,377,538
Intuitive Surgical Inc	2,740 Shares	1,191,559	1,496,478
Investors Bancorp Inc New	31,704 Shares	359,862	394,398
Jacobs Engr Group Inc	5,435 Shares	260,721	227,998
Jetblue Awys Corp	29,500 Shares	158,923	668,175
Jm Smucker Co	2,480 Shares	299,762	305,883
Johnson & Johnson	7,000 Shares	474,362	719,040
Keyence Co Jpy Ords	1,500 Shares	389,607	833,460
Kohls Corp	5,335 Shares	268,982	254,106
Komatsu Jpy 50.0	26,800 Shares	559,991	436,840
L Brands Inc	11,200 Shares	544,716	1,073,184
Landstar Sys Inc Com	8,000 Shares	400,554	469,200
L'oreal Sa Eur 0.2	3,900 Shares	492,610	657,936
Lvmh Moet Hennessy Loui Eur 0.3 Rfd	3,800 Shares	683,379	598,136
Marsh & McLennan Cos Inc	6,530 Shares	252,047	362,089
Mastercard Inc	8,000 Shares	348,133	778,880
McKesson Corp	3,336 Shares	680,997	657,959
Microchip Technology Inc Com	8,300 Shares	287,223	386,282
Microsoft Corp	37,200 Shares	1,209,683	2,063,856
Middleby Corp	12,400 Shares	1,116,195	1,337,588
Morgan Stanley	14,820 Shares	467,795	471,424
Myriad Genetics Inc Com	11,600 Shares	424,750	500,656
Nestle Sa Chf 0.1	8,400 Shares	525,865	620,676
Nike Inc Cl B	13,800 Shares	342,763	862,500
Noble Corp Plc	16,300 Shares	407,721	171,965
Northern Trust Corp	6,330 Shares	411,573	456,330
Novartis Ag Chf 0.5	7,100 Shares	659,888	617,771
Novo Nordisk A/s Dkk 0.2	11,850 Shares	379,096	679,597
Occidental Pete Corp	7,820 Shares	611,395	528,710
Open Text Corporation	20,450 Shares	655,217	980,169
Oracle Corporation	39,425 Shares	1,294,116	1,440,195
Paychex Inc	5,600 Shares	202,135	296,184
Pepsico Inc	4,785 Shares	371,499	478,117
Plantronics Inc Com	11,600 Shares	445,854	550,072
Plexus Corp Com	22,600 Shares	720,027	789,192
Power Intergrations Inc Com	7,200 Shares	328,370	350,136
PPL Corporation	8,857 Shares	304,586	302,289
Praxair Inc Com	5,700 Shares	621,164	583,680
Qlik Technologies Inc	11,900 Shares	311,968	376,754

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Ralph Lauren Corporation	3,400 Shares	\$ 504,597	\$ 379,032
Realpage Inc	14,200 Shares	247,156	318,790
Reckitt Benckiser Place Gbp	8,000 Shares	455,918	740,608
Roche Hldgs Ag Genussscheine	2,300 Shares	431,909	630,315
Rockwell Collins	5,935 Shares	383,095	547,801
Royal Caribbean Cruise	10,300 Shares	481,333	1,042,463
Schlumberger Ltd	8,700 Shares	641,869	606,825
Seagate Technology	30,600 Shares	1,134,937	1,121,796
Select Comfort Corporation	21,200 Shares	596,219	453,892
Sgs Sa Chf 1.0	220 Shares	461,116	420,000
Shin-etsu Chemical Co Ltd Npv	12,100 Shares	663,754	665,578
Southwestern Energy Co Com	16,900 Shares	279,889	120,159
Starbucks Corp Com	12,837 Shares	653,236	770,605
Stryker Corp	9,100 Shares	491,646	845,754
Suncor Energy Inc New Npv	19,500 Shares	611,638	501,433
Super Micro Computer Inc	15,500 Shares	454,458	379,905
Swatch Group Chf 2.25	560 Shares	308,245	195,916
Synaptics Inc	4,900 Shares	335,950	393,666
Synchrony Financial	14,415 Shares	448,140	438,360
Syngenta Ag	1,550 Shares	547,034	607,458
Taiwan Semiconductor Manufacture	38,800 Shares	564,114	882,700
TCF Financial	15,700 Shares	187,967	221,684
Texas Instruments Inc	8,798 Shares	296,084	482,218
Time Warner Inc	7,270 Shares	342,138	470,151
TJX Companies Inc	40,260 Shares	1,980,466	2,854,837
Tripadvisor Inc	4,100 Shares	277,669	349,525
Tumi Holdings Inc	19,400 Shares	375,241	322,622
Ubiquiti Networks Inc	10,600 Shares	333,374	335,914
Ultra Petroleum Corp	83,300 Shares	544,021	208,250
Unitedhealth Group Inc	6,705 Shares	467,954	788,776
Urban Outfitters Incorporated	7,700 Shares	263,534	175,175
Varian Med Sys Inc	6,600 Shares	420,528	533,280
Vectren Corp	7,980 Shares	268,007	338,512
Viasat Inc	2,000 Shares	75,370	122,020
Visa Inc-Class A Shrs	11,280 Shares	512,194	874,764
Visteon Corp/New	5,160 Shares	325,542	590,820
Voya Financial, Inc.	9,950 Shares	445,006	367,255
Yahoo Inc Com	18,100 Shares	461,267	602,006
U.S. Government and Agency Obligations			
Fed Home LN Bk	800,000 Shares	800,396	798,592
Fed Home LN MTG Corp	86,467 Shares	90,061	88,715
Fed Home LN MTG Corp	110,113 Shares	111,610	110,546
Fed Home LN MTG Corp	106,793 Shares	112,783	110,946

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Fed Home LN MTG Corp	86,697 Shares	\$ 87,455	\$ 87,058
Fed Home LN MTG Corp	91,446 Shares	93,761	93,297
Fed Home LN MTG Corp	1,063,440 Shares	1,173,772	1,157,342
Fed Home LN MTG Corp	1,368,836 Shares	1,417,601	1,401,100
Fed Home LN MTG Corp Pool #G18558	881,580 Shares	931,306	923,702
Fed Natl MTG Assn	84,045 Shares	84,741	84,117
Fed Natl MTG Assn	91,478 Shares	93,879	93,069
Fed Natl MTG Assn Pool #AI8401	592,905 Shares	666,277	661,065
Fed Natl MTG Assn Pool #AP0495	1,310,734 Shares	1,378,728	1,355,181
Fed Natl MTG Assn Pool #AS4170	818,157 Shares	875,300	866,060
Fed Natl MTG Assn Pool #MA1107	587,113 Shares	623,716	613,827
Fed Natl MTG Assn Pool #MA2028	374,721 Shares	409,382	404,709
Fed Natl MTG Assn Pool #MA2158	1,153,518 Shares	1,260,579	1,251,267
Fed Natl MTG Assn Pool #MA2211	1,290,897 Shares	1,394,975	1,379,865
Fed Natl MTG Assn Pool #MA2260	465,559 Shares	490,291	485,522
Fed Natl MTG Assn Pool #MA2279	869,017 Shares	932,564	920,167
Govt Natl MTG Assn	36,609 Shares	37,661	37,319
Govt Natl MTG Assn Pool #711067	448,623 Shares	505,962	496,827
Small Business Administration	415,000 Shares	415,000	416,229
U.S. Treasury Bond	1,485,400 Shares	1,544,212	1,522,416
U.S. Treasury Inflation Index Bond	702,058 Shares	691,292	679,719
U.S. Treasury Inflation Index Bond	633,283 Shares	547,596	552,292
U.S. Treasury Note	130,000 Shares	130,244	129,990
U.S. Treasury Note	685,000 Shares	687,188	685,055
U.S. Treasury Note	905,000 Shares	911,943	906,837
U.S. Treasury Note	885,000 Shares	912,316	899,549
U.S. Treasury Note	560,000 Shares	563,566	561,092
U.S. Treasury Note	590,000 Shares	591,390	589,215
U.S. Treasury Note	595,000 Shares	596,876	594,465
U.S. Treasury Note	820,000 Shares	823,069	820,320
U.S. Treasury Note	685,000 Shares	685,791	684,007
U.S. Treasury Note	700,000 Shares	696,855	696,801
U.S. Treasury Note	720,000 Shares	719,580	719,554
U.S. Treasury Note	269,200 Shares	269,125	268,780
U.S. Treasury Note	1,907,000 Shares	1,899,992	1,882,114
Corporate Bonds			
21st Century Fox America	95,000 Shares	110,366	98,885
21st Century Fox Amer Inc	65,000 Shares	69,295	68,380
Abbey Natl Treasury Serv	150,000 Shares	150,450	149,381
Ace Ina Holdings	65,000 Shares	64,838	66,048
Aercap Ireland Cap Ltd/A	155,000 Shares	156,356	156,163
Alexandria Real Estate E	227,000 Shares	223,786	223,161
Allied World Assurance	216,000 Shares	215,896	212,626

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Ally Financial Inc	250,000 Shares	\$ 248,593	\$ 250,000
Altria Group Inc	170,000 Shares	189,593	182,859
American Express	40,000 Shares	42,180	41,170
American Express Credit	75,000 Shares	75,632	75,137
American Express Credit Accoun	240,000 Shares	240,628	239,786
American Honda Finance	90,000 Shares	89,918	89,476
American Intl Group	195,000 Shares	193,559	188,536
Amgen Inc	75,000 Shares	76,396	75,431
Amphenol Corp	85,000 Shares	85,058	84,567
Aon Corp	75,000 Shares	77,739	75,581
Apollo Management Holdin	190,000 Shares	194,634	187,633
Arc Prop Oper Part LP/CL	200,000 Shares	195,250	198,000
Ares Finance Co LLC	42,000 Shares	41,232	38,958
Aspen Insurance Hldg Ltd	245,000 Shares	255,939	251,012
AT&T Inc	110,000 Shares	113,188	110,727
AT&T Inc	105,000 Shares	104,805	103,406
Athene Global Funding	200,000 Shares	199,864	196,772
Avis Budget Rental Car Funding	750,000 Shares	761,543	752,378
Banc Of America Commercial Mor	575,000 Shares	604,356	586,995
Bank Of America Auto Trust	665 Shares	668	665
Bank Of America Corp	150,000 Shares	156,887	151,881
Bank Of America Corp	155,000 Shares	190,087	180,897
Bank Of America Corp	165,000 Shares	177,293	167,888
Bank Of Nova Scotia	150,000 Shares	151,439	150,330
Berkshire Hathaway Fin	210,000 Shares	235,368	227,936
BMW Vehicle Owner Trust	79,753 Shares	79,753	79,617
BNP Paribas	115,000 Shares	115,456	114,888
Boston Properties LP	147,000 Shares	166,885	163,614
Boston Scientific Corp	191,000 Shares	186,618	188,423
Bp Capital Markets Plc	115,000 Shares	117,973	115,557
Bp Capital Markets Plc	190,000 Shares	190,657	188,885
British Telecom Plc	115,000 Shares	185,267	167,803
Brixmor Operating Part	227,000 Shares	223,635	220,549
Burlingtn North Santa Fe	180,000 Shares	199,193	183,492
Capital One Financial Co	240,000 Shares	235,138	231,994
Capital One Multi-asset Execut	1,390,000 Shares	1,392,360	1,387,998
Capital One Multi-asset Execut	190,000 Shares	188,909	189,054
Carmax Auto Owner Trust	1,100,000 Shares	1,099,970	1,092,113
Carnival Corp	75,000 Shares	75,467	75,023
CBRE Services Inc	225,000 Shares	244,710	227,909
CCO Safari Li LLC	300,000 Shares	300,000	298,953
Celgene Corp	150,000 Shares	149,729	148,869
Centerpoint Energy Transition	66,939 Shares	66,950	66,757
Chase Issuance Trust	210,000 Shares	210,427	209,811

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Chase Issuance Trust	720,000 Shares	\$ 745,791	\$ 731,347
Chesapeake Midstream Pt	149,000 Shares	160,303	140,950
CHS/Community Health Sys	175,000 Shares	179,969	175,875
CIT Group Inc	210,000 Shares	214,330	214,725
Citibank Credit Card Issuance	240,000 Shares	241,603	240,468
Citigroup Commercial Mortgage	479,000 Shares	493,557	481,481
Citigroup Commercial Mortgage	719,000 Shares	774,133	742,993
Citigroup Inc	145,000 Shares	151,461	147,010
Citigroup Inc	350,000 Shares	361,028	355,926
Citigroup Inc	222,000 Shares	222,272	224,222
CMS Energy Corp	255,000 Shares	279,324	251,244
Comcast Corp	280,000 Shares	291,248	277,365
Comm Mortgage Trust	719,000 Shares	786,631	758,660
Comm Mortgage Trust	129,000 Shares	135,880	135,605
Commercial Mortgage Pass-throu	108,000 Shares	107,350	107,056
Commercial Mortgage Pass-throu	599,000 Shares	634,566	613,484
Commercial Mortgage Pass-throu	805,574 Shares	873,812	835,598
Continental Resources	117,000 Shares	123,874	108,505
Cubalmart	205,000 Shares	224,623	218,300
CVS Caremark Corp	145,000 Shares	186,258	169,315
Daimler Finance Na LLC	310,000 Shares	309,879	308,351
Deutsche Bank Ag	110,000 Shares	112,486	110,042
Discover Card Execution Note T	1,100,000 Shares	1,116,801	1,103,762
Enable Midstream Partners LP	170,000 Shares	155,200	100,297
Energy Transfer Partners	195,000 Shares	194,427	160,146
Enlink Midstream Partner	170,000 Shares	169,731	105,414
Enterprise Products Oper	90,000 Shares	99,151	94,667
Enterprise Products Oper	150,000 Shares	174,783	137,781
Erac Usa Finance Company	170,000 Shares	193,811	182,451
Fhlmc Multifamily Structured P	190,000 Shares	201,370	194,602
Fhlmc Multifamily Structured P	220,000 Shares	226,594	219,311
Fifth Third Auto Trust	150,000 Shares	149,730	149,501
First Data Corporation	176,000 Shares	186,340	184,580
Ford Credit Auto Owner Trust	152,791 Shares	152,912	152,638
Ford Credit Auto Owner Trust	165,000 Shares	165,295	164,734
Ford Credit Auto Owner Trust/F	750,000 Shares	764,678	748,770
Ford Motor Company	145,000 Shares	195,486	178,931
Ford Motor Credit Co LLC	355,000 Shares	355,315	350,282
Fortune Brands Home & Se	180,000 Shares	179,950	179,017
General Elec Cap Corp	160,000 Shares	231,483	218,091
General Electric Co	473,720 Shares	450,000	472,536
General Motors Finl Co	180,000 Shares	179,950	177,228
Georgia Power Company	174,000 Shares	161,423	160,708
Glencore Funding LLC	300,000 Shares	300,286	253,140

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Goldman Sachs Group Inc	115,000 Shares	\$ 119,684	\$ 115,292
Goldman Sachs Group Inc	355,000 Shares	359,795	355,525
Goldman Sachs Group Inc	561,000 Shares	557,995	556,714
Goldman Sachs Group Inc	185,000 Shares	233,217	220,668
Greenwich Capital Commercial F	557,010 Shares	587,028	569,420
GS Mortgage Securities Corp Li	605,216 Shares	689,024	667,456
GS Mortgage Securities Corpora	138,417 Shares	144,273	138,179
GS Mtg Secs Tr	183,000 Shares	198,555	190,402
Halliburton Co	127,000 Shares	126,897	124,985
Hanesbrands Inc	134,000 Shares	139,947	138,690
HCP Inc	230,000 Shares	224,446	224,574
Health Care Reit Inc	300,000 Shares	332,457	321,651
Healthcare Trust Of Amer	260,000 Shares	264,677	256,285
Healthcare Trust Of Amer	220,000 Shares	219,232	213,231
Honda Auto Receivables Owner T	56,634 Shares	56,631	56,579
Honda Auto Receivables Owner T	130,000 Shares	129,985	129,678
Horace Mann Educators Co	179,000 Shares	179,447	178,979
Host Hotels & Resorts	190,000 Shares	191,003	183,187
Hsbc Finance Corp	245,000 Shares	288,566	281,182
Humana Inc	155,000 Shares	166,921	153,979
Huntington National Bank	285,000 Shares	284,176	283,205
Hyundai Auto Receivables Trust	18,722 Shares	18,760	18,714
Hyundai Auto Receivables Trust	160,000 Shares	159,831	159,846
Hyundai Capital America	226,000 Shares	225,973	225,299
Intl Paper Co	115,000 Shares	148,197	131,078
Istar Financial Inc	175,000 Shares	173,408	171,588
John Deere Owner Trust	44,298 Shares	44,326	44,272
John Deere Owner Trust	111,169 Shares	111,206	111,022
Johnson Controls Inc	90,000 Shares	93,557	90,097
JPMorgan Chase Commercial Mor	140,000 Shares	141,050	139,091
JPMorgan Chase Commercial Mor	719,000 Shares	771,465	740,426
JPMorgan Chase Commercial Mortag	648,220 Shares	686,303	663,777
JPMorgan Chase & Co	150,000 Shares	150,195	149,699
JPMorgan Chase & Co	415,000 Shares	411,244	412,817
JPMorgan Chase & Co	195,000 Shares	208,065	198,510
Kilroy Realty LP	128,000 Shares	127,288	129,649
Kimco Realty Corp	131,000 Shares	130,108	129,767
KKR Group Finance Co Iii	190,000 Shares	193,555	186,077
Lb-ubs Commercial Mortgage Tru	681,375 Shares	721,006	696,992
Lear Corp	220,000 Shares	229,262	226,050
Liberty Mutual Group	160,000 Shares	197,600	182,400
Louisiana Pacific Corp	170,000 Shares	182,326	176,375
Lowe's Companies Inc	140,000 Shares	176,621	167,761
LSB Industries	155,000 Shares	165,850	128,650

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Lyb Intl Finance Bv	180,000 Shares	\$ 188,874	\$ 164,374
Macquarie Bank Ltd	125,000 Shares	146,998	140,035
Magellan Midstream Partn	165,000 Shares	192,492	180,139
Marathon Petroleum Corp	85,000 Shares	85,422	85,240
Mass Mutual Life Ins Co	115,000 Shares	180,522	166,992
McDonalds Corp Med Term Note	105,000 Shares	112,824	109,400
Medtronic Inc	200,000 Shares	211,218	202,168
Mercedes-Benz Auto Lease Trust	104,666 Shares	104,660	104,634
Mercedes-Benz Auto Receivables Tr	165,000 Shares	164,997	164,622
Merrill Lynch & Co	475,000 Shares	541,761	524,049
Merrill Lynch/countrywide Comm	695,000 Shares	752,589	724,343
Merrill Lynch/countrywide Comm Mt	265,756 Shares	276,848	275,789
Met Life Glob Funding I	160,000 Shares	193,210	185,890
Metlife Inc	120,000 Shares	119,532	120,793
Microsoft Corp	191,000 Shares	190,288	197,838
Morgan Stanley	115,000 Shares	116,535	115,133
Morgan Stanley	475,000 Shares	538,185	520,852
Morgan Stanley	312,000 Shares	299,038	297,682
Morgan Stanley Capital I	129,910 Shares	134,934	130,822
Morgan Stanley Capital I	404,000 Shares	412,064	411,648
Morgan Stanley Capital I	413,182 Shares	424,028	412,959
Morgan Stanley Capital I	62,000 Shares	66,410	64,626
Morgan Stanley Capital I	600,467 Shares	648,551	623,807
Mosaic Co	170,000 Shares	191,714	171,816
MPLX LP	74,000 Shares	68,543	66,230
National Retail Prop Inc	187,000 Shares	186,776	183,658
National Rural Util Coop	75,000 Shares	74,953	74,639
Nationwide Mutual Insura	105,000 Shares	163,261	152,401
New York University	720,000 Shares	709,315	704,340
Nextera Energy Capital	40,000 Shares	40,146	39,857
Nissan Auto Lease Trust	121,058 Shares	121,049	120,888
Nissan Auto Receivables Owner	195,000 Shares	194,985	194,491
Nustar Logistics LP	150,000 Shares	146,805	132,000
Old Republic Intl Corp	230,000 Shares	241,514	235,697
Omnicom Group Inc	160,000 Shares	163,675	158,488
Pacific Lifecorp	180,000 Shares	196,805	183,395
Penske Truck Leasing/PTL	210,000 Shares	209,158	207,894
Pepsico Inc	135,000 Shares	134,957	134,991
Petrologistics LP/FIN	205,000 Shares	221,418	214,225
Phillips 66	150,000 Shares	176,976	150,354
Progress Energy Inc	145,000 Shares	148,062	142,306
Prologis LP	216,000 Shares	222,493	227,275
Prologis LP	67,000 Shares	66,585	66,462
Prudential Financial Inc	170,000 Shares	200,940	191,250

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Pseg Power LLC	220,000 Shares	\$ 223,612	\$ 221,322
Rabobank Nederland Utrec	150,000 Shares	156,600	153,335
Rabobank Nederland Utrec	210,000 Shares	224,540	221,630
Realogy Grp/Sun Grp Fl	183,000 Shares	183,458	183,565
Regency Energy Partners	171,000 Shares	182,858	171,855
Reliance Stand Life Ii	185,000 Shares	184,867	183,907
Republic Services Inc	158,000 Shares	188,304	185,154
Retail Opportunity Inves	175,000 Shares	190,132	178,679
Reynolds American Inc	225,000 Shares	231,255	250,142
Rio Tinto Fin Usa Plc	75,000 Shares	75,794	74,957
Royal Bank Of Canada	160,000 Shares	159,556	159,243
Royal Bank Of Canada	220,000 Shares	224,664	221,778
Royal Bk Scotland Group Plc	170,000 Shares	177,931	176,467
Santander Drive Auto Receivabl	750,000 Shares	754,248	751,103
Santander Drive Auto Receivabl	257,000 Shares	256,970	256,306
Santander Drive Auto Receivabl	845,000 Shares	844,954	844,704
Senior Housing Prop Trus	56,000 Shares	63,815	61,933
Shell International Fin	180,000 Shares	196,533	174,965
Simon Property Group LP	215,000 Shares	277,359	263,839
Southern Power Co	90,000 Shares	89,948	89,961
Standard Chartered Bank	175,000 Shares	192,465	186,036
Statoil Asa	210,000 Shares	239,394	212,986
Symetra Finl Corp	195,000 Shares	201,014	196,539
Teva Pharmaceut Fin BV	75,000 Shares	75,713	75,464
Tiaa Asset Mgmt Fin LLC	345,000 Shares	352,438	345,687
Toll Bros Finance Corp	165,000 Shares	188,008	181,500
Toronto-dominion Bank	150,000 Shares	154,865	151,371
Toyota Auto Receivables Owner	107,435 Shares	107,439	107,345
Toyota Auto Receivables Owner	85,000 Shares	84,993	84,871
Transatlantic Holdings	135,000 Shares	185,209	173,444
United Mexican States	424,000 Shares	432,501	386,264
United Rentals North Am	240,000 Shares	259,990	253,200
Unitedhealth Group Inc	55,000 Shares	54,990	55,002
Unitedhealth Group Inc	143,000 Shares	142,914	144,499
Validus Holdings Ltd	100,000 Shares	138,053	125,027
Ventas Realty LP/Cap Crp	165,000 Shares	191,888	181,249
Verisk Analytics Inc	165,000 Shares	188,946	182,840
Verizon Communications	115,000 Shares	115,040	114,668
Verizon Communications	170,000 Shares	211,448	201,826
Verizon Communications	170,000 Shares	167,487	155,650
Viacom Inc	37,000 Shares	40,376	37,571
Volkswagen Auto Loan Enhanced	128,916 Shares	128,639	128,301
Volkswagen Auto Loan Enhanced	1,174,000 Shares	1,173,551	1,165,582
VR National Rural Ut 4.75	190,000 Shares	192,850	187,416
Wachovia Bank Commercial Mortg	719,000 Shares	741,469	722,739
Wachovia Bank Na	262,000 Shares	273,325	264,646

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Wachovia Corporation	200,000 Shares	\$ 232,532	\$ 222,264
Waste Management Inc	160,000 Shares	155,454	148,805
Wells Fargo & Company	160,000 Shares	162,367	161,587
Wells Fargo & Company	253,000 Shares	252,039	258,447
Wells Fargo Commercial Mortgage	257,000 Shares	264,702	263,127
West Fraser Timber Co	235,000 Shares	229,929	219,025
Westpac Banking Corp	150,000 Shares	150,618	150,009
WF-RBS Commercial Mortgage Trust	719,000 Shares	730,066	718,806
WF-RBS Commercial Mortgage Trust	87,000 Shares	95,279	95,007
White Mountains Re Group	179,000 Shares	192,490	182,850
Xcel Energy Inc	105,000 Shares	104,925	104,467
Xlit Ltd	155,000 Shares	155,512	151,784
Commingled Funds			
Wellington CTF DIH	903,277 Shares	12,741,179	8,888,244
Real Estate Investment Fund			
UBS (US) Trumbull Property Income	1,368 Shares	13,794,622	15,852,804
Real Estate Investment Trust Fund			
RREEF America REIT II, INC LLC	164,189 Shares	14,539,967	18,130,484
		<u>349,868,157</u>	<u>366,257,342</u>
Investment Contract With Insurance Company			
* Lincoln National Life		<u>4,938,310</u>	<u>4,938,310</u>
		<u>\$ 354,806,467</u>	<u>\$ 371,195,652</u>

* Party-in-interest

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2015

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Aberdeen Global Equity Fund, LLC	\$ -	\$ 27,343,139	\$ -	\$ 25,983,095	\$ 27,343,139	\$ 1,360,044
American Funds Capital World Growth	27,343,139	-	-	27,343,139	27,343,139	-
External Commingled Fund	150,000,000	-	-	150,000,000	150,000,000	-
JPM Core Bond Trust	75,000,000	-	-	75,000,000	75,000,000	-
Vanguard Total Bond Market Index	-	150,410,651	-	149,595,834	150,410,651	814,817
Wells Fargo Short-Term	253,205,737	180,206,903	-	433,412,640	433,412,640	-

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions

Eligible Employees

All employees hired prior to January 1, 2005 are eligible to participate in the Pension Plan upon meeting Eligibility Requirements. No employees hired subsequent to January 1, 2005 will be eligible for the Plan.

Eligibility Requirements

Attainment of age 21 and one year of service following date of hire are required. A year of service for eligibility is based upon the completion of 1,000 hours.

Compensation

Regular wages or salary, as reported on Form W-2, including bonuses, commissions, overtime and all other forms of special pay, as well as before-tax contributions to any plans referenced by IRC Section 125, 403(b), 401(k) and 457(b). Before-tax contributions to an IRC Section 457(f) plan and payments made to Highly Compensated Employees for various fringe benefit plans are excluded from compensation.

Average Final Compensation

Based upon Compensation of the 60 consecutive months within the 120 months preceding Normal Retirement which produces the highest average.

Vesting Service

An employee is credited with one year of Vesting Service for each plan year in which he works at least 1,000 hours. All years of service while an employee of Parkview, or an entity acquired by Parkview, are included in the calculation of Vesting Service.

Any former employee rehired by Parkview who has accrued a benefit under the plan prior to termination is eligible to earn a year of Vesting Service toward eligibility requirements for vested and early retirement pensions.

Vesting Service is used in the determination for eligibility for vested and early retirement pensions.

Benefit Service

A participant is credited with one year of Benefit Service for each plan year in which he works at least 1,000 hours as a participant in the plan. Only years of service while an employee of Parkview are included in the calculation of Benefit Service, except where noted for former employees of Huntington Memorial Hospital.

Participants, who made an irrevocable waiver to no longer participate in the plan, will not accrue Benefit Service subsequent to January 1, 2005. In addition, any participant who is rehired subsequent to January 1, 2005, will not accrue Benefit Service under the plan.

Benefit Service is used in the calculation of all pension benefits under the plan.

Normal Retirement Date

First day of the month coincident with or next following the later the attainment of age 65 or the fifth anniversary of the date of participation. Former employees of Huntington Memorial Hospital are eligible for Normal Retirement upon attainment of age 65.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions (continued)

Early Retirement Date

Age 55 and 10 years of Vesting Service. Former employees of Huntington Memorial Hospital are eligible for Early Retirement at age 55 and 5 years of Vesting Service.

Eligibility for Vested Pension

100% vesting after five years of Vesting Service.

Eligibility for Surviving Spouse Pension

Death occurring while:

1. Actively employed, with at least 5 years of Vesting Service, or
2. Terminated with a vested deferred pension but before benefit commencement, and
3. Married at time of death.

Eligibility for Disability Pension

Former employees of Huntington Memorial Hospital who retire due to disability after attainment of age 45 and completion of 10 years of Vesting Service.

Accrued Benefit

For those employees who did not irrevocably waive participation in the plan:

Using Average Final Compensation and Social Security covered Compensation as of date of termination:

42.5% of Average Final Compensation reduced by 12.5% of Final Average Compensation not in excess of the Social Security Covered Compensation, reduced for Benefit Service less than 25 at Normal Retirement. The Accrued Benefit is no less than 1.1% of Average Final Compensation multiplied by Benefit Service not to exceed 40 years.

Former employees of Huntington Memorial Hospital will receive the greater of:

1. The Accrued Benefit under the Huntington plan as of December 31, 1997, plus a benefit accrued (as noted above) for Benefit Service earned as a Parkview employee after that date, or
2. A benefit accrued (as noted above) for all years of Benefit Service as a Huntington and Parkview employee.

For those employees who irrevocably waived participation in the Plan:

An Accrued Benefit as calculated above using only Benefit Service and compensation earned through December 31, 2004.

Normal Monthly Retirement Pension

Monthly Accrued Benefit as of Normal Retirement Date. The normal form of payment is the 5 year certain and life annuity. 100% of active participants are assumed to elect the normal form of payment. The other possible form of payment for single participants is a Life only annuity. Other possible forms of payment married participants are: Life only and 100%, 75%, and 50% Joint and Survivor Annuities.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Part V - Summary of Plan Provisions (continued)

Early Monthly Retirement Pension

Monthly Accrued Benefit as of Early Retirement Date, reduced by $\frac{1}{180}$ for each month of the first 60 months plus $\frac{1}{360}$ for each of the next 60 months by which the Early Retirement Date precedes the Normal Retirement Date.

For a participant who has attained age 62 and has been employed for 20 years, his Accrued Benefit will not be reduced for early retirement.

Postponed Monthly Retirement Pension

The greater of:

1. Monthly Accrued Benefit as of actual retirement date, crediting service and earnings through postponed retirement date, or
2. The actuarial equivalent of the Normal Monthly Retirement Pension.

Deferred Monthly Retirement Benefit for Termination Prior to Retirement

Monthly Accrued Benefit as of date of termination. Pensions that commence prior to age 65 are payable as an Early Monthly Retirement Pension.

Surviving Spouse Monthly Pension

For all married vested participants not yet receiving a pension: 50% of the monthly Accrued Benefit, actuarially adjusted for the joint and 50% survivor payment form and early commencement, if applicable, payable commencing on the earliest date the participant could have retired, to the surviving spouse and continuing for the remaining lifetime of the surviving spouse.

Postretirement Death Benefit

Based upon the form of annuity chosen by the retiree at date of retirement.

Retirement Pension Disability

For former employees of Huntington Memorial Hospital eligible for disability: Accrued Benefit as calculated above payable immediately.

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds			
American Funds Capital World Grow	656,480 Shares	\$ 28,008,414	\$ 28,458,418
Dodge & Cox Global Stock Fund	2,596,182 Shares	22,992,134	27,156,059
PIMCO All Asset Fd Institutional	1,172,708 Shares	14,017,554	11,736,063
JPM Core Bond Trust	7,193,610 Shares	76,729,424	74,813,543
California St	720,000 Shares	718,510	717,214
Energy N W WA Elec Revenue	530,000 Shares	526,465	521,478
Houston TX Utility Sys Revenue	500,000 Shares	528,315	533,835
New York City NY Transitional F	725,000 Shares	740,029	727,139
New York NY	720,000 Shares	718,078	716,530
New York St Dorm Auth St Perso	720,000 Shares	731,369	723,622
Seattle WA	605,000 Shares	605,000	603,602
Univ of California CA Revenues	520,000 Shares	529,901	513,032
* Money Market Funds			
Wells Fargo Short-Term			
Investment Fund	4,126,999 Shares	4,126,999	4,126,999
Net Cash	221,029 Shares	221,029	221,029
Common Stocks			
Abbott Labs	10,690 Shares	367,549	480,088
Abbvie Inc	10,315 Shares	449,239	611,061
Adobe Sys Inc	9,000 Shares	294,176	845,460
Advance Auto Pts Inc	828 Shares	125,524	124,622
Aia Group Ltd Usd 1.0	125,600 Shares	537,116	755,206
Air Methods Corp Com	6,967 Shares	289,385	292,126
Akamai Technologies	14,100 Shares	618,334	742,083
Align Technology Inc	7,500 Shares	259,676	493,875
Allergan Plc	2,383 Shares	704,290	744,688
Ally Financial Inc 8.500% Pfd	2,919 Shares	77,383	75,135
Alphabet Inc Cl A	560 Shares	198,531	435,686
Alphabet Inc Cl C	1,604 Shares	876,160	1,217,244
American International Group, Inc	13,115 Shares	638,128	812,737
Ameriprise Finl Inc	5,460 Shares	483,748	581,053
Amphenol Corp Cl A	9,400 Shares	458,167	490,962
Anadarko Petroleum Corp	6,985 Shares	541,264	339,331
Apple Inc	11,403 Shares	1,087,219	1,200,280
Applied Materials Inc	20,035 Shares	371,291	374,053
Arm Holdings Plc - Adr	7,500 Shares	240,378	339,300
Autodesk Inc	16,300 Shares	568,592	993,159
Automatic Data Processing Inc	8,800 Shares	455,877	745,536
Blackrock Inc	1,430 Shares	295,703	486,944
Boeing Co	5,820 Shares	497,620	841,514
Cabelas Inc	12,800 Shares	626,429	598,144

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
CEB Inc	7,100 Shares	\$ 367,313	\$ 435,869
Centurylink, Inc	8,970 Shares	325,836	225,685
Cheesecake Factory Inc Com	5,500 Shares	220,281	253,605
China Mobile Ltd Hkd 0.1	59,500 Shares	626,922	671,761
Cisco Systems Inc	25,100 Shares	480,293	681,591
Cit Group Inc.	9,239 Shares	381,794	366,788
Citigroup Capital Xiii 7.88% Pfd	7,500 Shares	194,160	194,925
Citigroup Inc.	10,325 Shares	506,408	534,319
Citizens Financial Group Inc	17,170 Shares	416,113	449,682
Cme Group Ince	5,365 Shares	389,038	486,069
Cnooc Ltd Hkd 0.02	583,000 Shares	917,023	607,061
Cognex Corp	8,200 Shares	287,025	276,914
Cognizant Tech Solutions Crp Com	11,000 Shares	687,175	660,220
Colgate Palmolive Co	9,500 Shares	506,430	632,890
Compass Group 10.625p	30,800 Shares	494,888	533,406
Core Laboratories N V Com	2,900 Shares	290,346	315,346
CSL Ltd NPV	10,600 Shares	481,274	812,152
CVS Health Corporation	6,360 Shares	437,275	621,817
DBS Group Hldgs	48,283 Shares	570,180	568,035
Denso Corpnv	14,700 Shares	555,310	703,248
Devon Energy Corporation	5,115 Shares	269,507	163,680
Dicks Sporting Goods Inc	7,761 Shares	302,336	274,351
Dolby Laboratories Inc	6,400 Shares	207,186	215,360
Du Pont E I De Nemours & Co	7,055 Shares	343,198	469,863
E*trade Group	13,800 Shares	188,037	409,032
Ecolab Inc	3,300 Shares	249,938	377,454
Edwards Lifesciences Corp	16,600 Shares	774,393	1,311,068
Eog Resources, Inc	8,800 Shares	515,506	622,952
Essilor Intl Eur .35 Rfd	4,500 Shares	421,348	562,402
Ethan Allen Interiors Inc Com	17,700 Shares	443,237	492,414
Factset Resh Sys Inc Com	5,500 Shares	570,703	894,135
Fanuc Co Jpy Ords	3,700 Shares	615,285	634,550
Fidelity Natl Information Svcs In	8,255 Shares	405,101	500,253
First Data Corporation	19,050 Shares	304,448	305,181
FNF Group	8,335 Shares	300,586	288,974
Garmin Ltd	12,900 Shares	530,579	479,493
General Electric Co	22,940 Shares	567,359	714,581
Gentex Corp	38,000 Shares	407,134	608,380
Genuine Parts Co	3,970 Shares	265,407	340,983
Gilead Sciences Inc	12,405 Shares	1,319,014	1,255,262
Graco Inc	4,100 Shares	212,983	295,487
Grainger W W Inc	1,300 Shares	316,310	263,367
Hennes + Mauritz Sek 0.25	14,500 Shares	520,658	516,055
Hexcel Corp New Com	7,125 Shares	289,884	330,956
Home Depot Inc	4,635 Shares	420,219	612,979

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Honda Motor Co Jpy Ords	16,400 Shares	\$ 540,665	\$ 514,304
Hong Kg & China Gas Co Ltd Hkd.25	306,493 Shares	548,373	601,110
IHS Inc	2,000 Shares	210,815	236,860
Industria De Diseno Textil Eur	20,000 Shares	461,710	688,494
Ingersoll-rand Plc	8,870 Shares	400,984	490,422
Intuit Com	14,275 Shares	954,259	1,377,538
Intuitive Surgical Inc	2,740 Shares	1,191,559	1,496,478
Investors Bancorp Inc New	31,704 Shares	359,862	394,398
Jacobs Engr Group Inc	5,435 Shares	260,721	227,998
Jetblue Awys Corp	29,500 Shares	158,923	668,175
Jm Smucker Co	2,480 Shares	299,762	305,883
Johnson & Johnson	7,000 Shares	474,362	719,040
Keyence Co Jpy Ords	1,500 Shares	389,607	833,460
Kohls Corp	5,335 Shares	268,982	254,106
Komatsu Jpy 50.0	26,800 Shares	559,991	436,840
L Brands Inc	11,200 Shares	544,716	1,073,184
Landstar Sys Inc Com	8,000 Shares	400,554	469,200
L'oreal Sa Eur 0.2	3,900 Shares	492,610	657,936
Lvmh Moet Hennessy Loui Eur 0.3 Rfd	3,800 Shares	683,379	598,136
Marsh & McLennan Cos Inc	6,530 Shares	252,047	362,089
Mastercard Inc	8,000 Shares	348,133	778,880
McKesson Corp	3,336 Shares	680,997	657,959
Microchip Technology Inc Com	8,300 Shares	287,223	386,282
Microsoft Corp	37,200 Shares	1,209,683	2,063,856
Middleby Corp	12,400 Shares	1,116,195	1,337,588
Morgan Stanley	14,820 Shares	467,795	471,424
Myriad Genetics Inc Com	11,600 Shares	424,750	500,656
Nestle Sa Chf 0.1	8,400 Shares	525,865	620,676
Nike Inc Cl B	13,800 Shares	342,763	862,500
Noble Corp Plc	16,300 Shares	407,721	171,965
Northern Trust Corp	6,330 Shares	411,573	456,330
Novartis Ag Chf 0.5	7,100 Shares	659,888	617,771
Novo Nordisk A/s Dkk 0.2	11,850 Shares	379,096	679,597
Occidental Pete Corp	7,820 Shares	611,395	528,710
Open Text Corporation	20,450 Shares	655,217	980,169
Oracle Corporation	39,425 Shares	1,294,116	1,440,195
Paychex Inc	5,600 Shares	202,135	296,184
Pepsico Inc	4,785 Shares	371,499	478,117
Plantronics Inc Com	11,600 Shares	445,854	550,072
Plexus Corp Com	22,600 Shares	720,027	789,192
Power Intergrations Inc Com	7,200 Shares	328,370	350,136
PPL Corporation	8,857 Shares	304,586	302,289
Praxair Inc Com	5,700 Shares	621,164	583,680
Qlik Technologies Inc	11,900 Shares	311,968	376,754

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Ralph Lauren Corporation	3,400 Shares	\$ 504,597	\$ 379,032
Realpage Inc	14,200 Shares	247,156	318,790
Reckitt Benckiser Place Gbp	8,000 Shares	455,918	740,608
Roche Hldgs Ag Genussscheine	2,300 Shares	431,909	630,315
Rockwell Collins	5,935 Shares	383,095	547,801
Royal Caribbean Cruise	10,300 Shares	481,333	1,042,463
Schlumberger Ltd	8,700 Shares	641,869	606,825
Seagate Technology	30,600 Shares	1,134,937	1,121,796
Select Comfort Corporation	21,200 Shares	596,219	453,892
Sgs Sa Chf 1.0	220 Shares	461,116	420,000
Shin-etsu Chemical Co Ltd Npv	12,100 Shares	663,754	665,578
Southwestern Energy Co Com	16,900 Shares	279,889	120,159
Starbucks Corp Com	12,837 Shares	653,236	770,605
Stryker Corp	9,100 Shares	491,646	845,754
Suncor Energy Inc New Npv	19,500 Shares	611,638	501,433
Super Micro Computer Inc	15,500 Shares	454,458	379,905
Swatch Group Chf 2.25	560 Shares	308,245	195,916
Synaptics Inc	4,900 Shares	335,950	393,666
Synchrony Financial	14,415 Shares	448,140	438,360
Syngenta Ag	1,550 Shares	547,034	607,458
Taiwan Semiconductor Manufacture	38,800 Shares	564,114	882,700
TCF Financial	15,700 Shares	187,967	221,684
Texas Instruments Inc	8,798 Shares	296,084	482,218
Time Warner Inc	7,270 Shares	342,138	470,151
TJX Companies Inc	40,260 Shares	1,980,466	2,854,837
Tripadvisor Inc	4,100 Shares	277,669	349,525
Tumi Holdings Inc	19,400 Shares	375,241	322,622
Ubiquiti Networks Inc	10,600 Shares	333,374	335,914
Ultra Petroleum Corp	83,300 Shares	544,021	208,250
Unitedhealth Group Inc	6,705 Shares	467,954	788,776
Urban Outfitters Incorporated	7,700 Shares	263,534	175,175
Varian Med Sys Inc	6,600 Shares	420,528	533,280
Vectren Corp	7,980 Shares	268,007	338,512
Viasat Inc	2,000 Shares	75,370	122,020
Visa Inc-Class A Shrs	11,280 Shares	512,194	874,764
Visteon Corp/New	5,160 Shares	325,542	590,820
Voya Financial, Inc.	9,950 Shares	445,006	367,255
Yahoo Inc Com	18,100 Shares	461,267	602,006
U.S. Government and Agency Obligations			
Fed Home LN Bk	800,000 Shares	800,396	798,592
Fed Home LN MTG Corp	86,467 Shares	90,061	88,715
Fed Home LN MTG Corp	110,113 Shares	111,610	110,546
Fed Home LN MTG Corp	106,793 Shares	112,783	110,946

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Fed Home LN MTG Corp	86,697 Shares	\$ 87,455	\$ 87,058
Fed Home LN MTG Corp	91,446 Shares	93,761	93,297
Fed Home LN MTG Corp	1,063,440 Shares	1,173,772	1,157,342
Fed Home LN MTG Corp	1,368,836 Shares	1,417,601	1,401,100
Fed Home LN MTG Corp Pool #G18558	881,580 Shares	931,306	923,702
Fed Natl MTG Assn	84,045 Shares	84,741	84,117
Fed Natl MTG Assn	91,478 Shares	93,879	93,069
Fed Natl MTG Assn Pool #AI8401	592,905 Shares	666,277	661,065
Fed Natl MTG Assn Pool #AP0495	1,310,734 Shares	1,378,728	1,355,181
Fed Natl MTG Assn Pool #AS4170	818,157 Shares	875,300	866,060
Fed Natl MTG Assn Pool #MA1107	587,113 Shares	623,716	613,827
Fed Natl MTG Assn Pool #MA2028	374,721 Shares	409,382	404,709
Fed Natl MTG Assn Pool #MA2158	1,153,518 Shares	1,260,579	1,251,267
Fed Natl MTG Assn Pool #MA2211	1,290,897 Shares	1,394,975	1,379,865
Fed Natl MTG Assn Pool #MA2260	465,559 Shares	490,291	485,522
Fed Natl MTG Assn Pool #MA2279	869,017 Shares	932,564	920,167
Govt Natl MTG Assn	36,609 Shares	37,661	37,319
Govt Natl MTG Assn Pool #711067	448,623 Shares	505,962	496,827
Small Business Administration	415,000 Shares	415,000	416,229
U.S. Treasury Bond	1,485,400 Shares	1,544,212	1,522,416
U.S. Treasury Inflation Index Bond	702,058 Shares	691,292	679,719
U.S. Treasury Inflation Index Bond	633,283 Shares	547,596	552,292
U.S. Treasury Note	130,000 Shares	130,244	129,990
U.S. Treasury Note	685,000 Shares	687,188	685,055
U.S. Treasury Note	905,000 Shares	911,943	906,837
U.S. Treasury Note	885,000 Shares	912,316	899,549
U.S. Treasury Note	560,000 Shares	563,566	561,092
U.S. Treasury Note	590,000 Shares	591,390	589,215
U.S. Treasury Note	595,000 Shares	596,876	594,465
U.S. Treasury Note	820,000 Shares	823,069	820,320
U.S. Treasury Note	685,000 Shares	685,791	684,007
U.S. Treasury Note	700,000 Shares	696,855	696,801
U.S. Treasury Note	720,000 Shares	719,580	719,554
U.S. Treasury Note	269,200 Shares	269,125	268,780
U.S. Treasury Note	1,907,000 Shares	1,899,992	1,882,114
Corporate Bonds			
21st Century Fox America	95,000 Shares	110,366	98,885
21st Century Fox Amer Inc	65,000 Shares	69,295	68,380
Abbey Natl Treasury Serv	150,000 Shares	150,450	149,381
Ace Ina Holdings	65,000 Shares	64,838	66,048
Aercap Ireland Cap Ltd/A	155,000 Shares	156,356	156,163
Alexandria Real Estate E	227,000 Shares	223,786	223,161
Allied World Assurance	216,000 Shares	215,896	212,626

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Ally Financial Inc	250,000 Shares	\$ 248,593	\$ 250,000
Altria Group Inc	170,000 Shares	189,593	182,859
American Express	40,000 Shares	42,180	41,170
American Express Credit	75,000 Shares	75,632	75,137
American Express Credit Accoun	240,000 Shares	240,628	239,786
American Honda Finance	90,000 Shares	89,918	89,476
American Intl Group	195,000 Shares	193,559	188,536
Amgen Inc	75,000 Shares	76,396	75,431
Amphenol Corp	85,000 Shares	85,058	84,567
Aon Corp	75,000 Shares	77,739	75,581
Apollo Management Holdin	190,000 Shares	194,634	187,633
Arc Prop Oper Part LP/CL	200,000 Shares	195,250	198,000
Ares Finance Co LLC	42,000 Shares	41,232	38,958
Aspen Insurance Hldg Ltd	245,000 Shares	255,939	251,012
AT&T Inc	110,000 Shares	113,188	110,727
AT&T Inc	105,000 Shares	104,805	103,406
Athene Global Funding	200,000 Shares	199,864	196,772
Avis Budget Rental Car Funding	750,000 Shares	761,543	752,378
Banc Of America Commercial Mor	575,000 Shares	604,356	586,995
Bank Of America Auto Trust	665 Shares	668	665
Bank Of America Corp	150,000 Shares	156,887	151,881
Bank Of America Corp	155,000 Shares	190,087	180,897
Bank Of America Corp	165,000 Shares	177,293	167,888
Bank Of Nova Scotia	150,000 Shares	151,439	150,330
Berkshire Hathaway Fin	210,000 Shares	235,368	227,936
BMW Vehicle Owner Trust	79,753 Shares	79,753	79,617
BNP Paribas	115,000 Shares	115,456	114,888
Boston Properties LP	147,000 Shares	166,885	163,614
Boston Scientific Corp	191,000 Shares	186,618	188,423
Bp Capital Markets Plc	115,000 Shares	117,973	115,557
Bp Capital Markets Plc	190,000 Shares	190,657	188,885
British Telecom Plc	115,000 Shares	185,267	167,803
Brixmor Operating Part	227,000 Shares	223,635	220,549
Burlingtn North Santa Fe	180,000 Shares	199,193	183,492
Capital One Financial Co	240,000 Shares	235,138	231,994
Capital One Multi-asset Execut	1,390,000 Shares	1,392,360	1,387,998
Capital One Multi-asset Execut	190,000 Shares	188,909	189,054
Carmax Auto Owner Trust	1,100,000 Shares	1,099,970	1,092,113
Carnival Corp	75,000 Shares	75,467	75,023
CBRE Services Inc	225,000 Shares	244,710	227,909
CCO Safari Li LLC	300,000 Shares	300,000	298,953
Celgene Corp	150,000 Shares	149,729	148,869
Centerpoint Energy Transition	66,939 Shares	66,950	66,757
Chase Issuance Trust	210,000 Shares	210,427	209,811

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Chase Issuance Trust	720,000 Shares	\$ 745,791	\$ 731,347
Chesapeake Midstream Pt	149,000 Shares	160,303	140,950
CHS/Community Health Sys	175,000 Shares	179,969	175,875
CIT Group Inc	210,000 Shares	214,330	214,725
Citibank Credit Card Issuance	240,000 Shares	241,603	240,468
Citigroup Commercial Mortgage	479,000 Shares	493,557	481,481
Citigroup Commercial Mortgage	719,000 Shares	774,133	742,993
Citigroup Inc	145,000 Shares	151,461	147,010
Citigroup Inc	350,000 Shares	361,028	355,926
Citigroup Inc	222,000 Shares	222,272	224,222
CMS Energy Corp	255,000 Shares	279,324	251,244
Comcast Corp	280,000 Shares	291,248	277,365
Comm Mortgage Trust	719,000 Shares	786,631	758,660
Comm Mortgage Trust	129,000 Shares	135,880	135,605
Commercial Mortgage Pass-throu	108,000 Shares	107,350	107,056
Commercial Mortgage Pass-throu	599,000 Shares	634,566	613,484
Commercial Mortgage Pass-throu	805,574 Shares	873,812	835,598
Continental Resources	117,000 Shares	123,874	108,505
Cubesmart	205,000 Shares	224,623	218,300
CVS Caremark Corp	145,000 Shares	186,258	169,315
Daimler Finance Na LLC	310,000 Shares	309,879	308,351
Deutsche Bank Ag	110,000 Shares	112,486	110,042
Discover Card Execution Note T	1,100,000 Shares	1,116,801	1,103,762
Enable Midstream Partners LP	170,000 Shares	155,200	100,297
Energy Transfer Partners	195,000 Shares	194,427	160,146
Enlink Midstream Partner	170,000 Shares	169,731	105,414
Enterprise Products Oper	90,000 Shares	99,151	94,667
Enterprise Products Oper	150,000 Shares	174,783	137,781
Erac Usa Finance Company	170,000 Shares	193,811	182,451
Fhlmc Multifamily Structured P	190,000 Shares	201,370	194,602
Fhlmc Multifamily Structured P	220,000 Shares	226,594	219,311
Fifth Third Auto Trust	150,000 Shares	149,730	149,501
First Data Corporation	176,000 Shares	186,340	184,580
Ford Credit Auto Owner Trust	152,791 Shares	152,912	152,638
Ford Credit Auto Owner Trust	165,000 Shares	165,295	164,734
Ford Credit Auto Owner Trust/F	750,000 Shares	764,678	748,770
Ford Motor Company	145,000 Shares	195,486	178,931
Ford Motor Credit Co LLC	355,000 Shares	355,315	350,282
Fortune Brands Home & Se	180,000 Shares	179,950	179,017
General Elec Cap Corp	160,000 Shares	231,483	218,091
General Electric Co	473,720 Shares	450,000	472,536
General Motors Finl Co	180,000 Shares	179,950	177,228
Georgia Power Company	174,000 Shares	161,423	160,708
Glencore Funding LLC	300,000 Shares	300,286	253,140

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Goldman Sachs Group Inc	115,000 Shares	\$ 119,684	\$ 115,292
Goldman Sachs Group Inc	355,000 Shares	359,795	355,525
Goldman Sachs Group Inc	561,000 Shares	557,995	556,714
Goldman Sachs Group Inc	185,000 Shares	233,217	220,668
Greenwich Capital Commercial F	557,010 Shares	587,028	569,420
GS Mortgage Securities Corp Li	605,216 Shares	689,024	667,456
GS Mortgage Securities Corpora	138,417 Shares	144,273	138,179
GS Mtg Secs Tr	183,000 Shares	198,555	190,402
Halliburton Co	127,000 Shares	126,897	124,985
Hanesbrands Inc	134,000 Shares	139,947	138,690
HCP Inc	230,000 Shares	224,446	224,574
Health Care Reit Inc	300,000 Shares	332,457	321,651
Healthcare Trust Of Amer	260,000 Shares	264,677	256,285
Healthcare Trust Of Amer	220,000 Shares	219,232	213,231
Honda Auto Receivables Owner T	56,634 Shares	56,631	56,579
Honda Auto Receivables Owner T	130,000 Shares	129,985	129,678
Horace Mann Educators Co	179,000 Shares	179,447	178,979
Host Hotels & Resorts	190,000 Shares	191,003	183,187
Hsbc Finance Corp	245,000 Shares	288,566	281,182
Humana Inc	155,000 Shares	166,921	153,979
Huntington National Bank	285,000 Shares	284,176	283,205
Hyundai Auto Receivables Trust	18,722 Shares	18,760	18,714
Hyundai Auto Receivables Trust	160,000 Shares	159,831	159,846
Hyundai Capital America	226,000 Shares	225,973	225,299
Intl Paper Co	115,000 Shares	148,197	131,078
Istar Financial Inc	175,000 Shares	173,408	171,588
John Deere Owner Trust	44,298 Shares	44,326	44,272
John Deere Owner Trust	111,169 Shares	111,206	111,022
Johnson Controls Inc	90,000 Shares	93,557	90,097
JPMorgan Chase Commercial Mor	140,000 Shares	141,050	139,091
JPMorgan Chase Commercial Mor	719,000 Shares	771,465	740,426
JPMorgan Chase Commercial Mortag	648,220 Shares	686,303	663,777
JPMorgan Chase & Co	150,000 Shares	150,195	149,699
JPMorgan Chase & Co	415,000 Shares	411,244	412,817
JPMorgan Chase & Co	195,000 Shares	208,065	198,510
Kilroy Realty LP	128,000 Shares	127,288	129,649
Kimco Realty Corp	131,000 Shares	130,108	129,767
KKR Group Finance Co Iii	190,000 Shares	193,555	186,077
Lb-ubs Commercial Mortgage Tru	681,375 Shares	721,006	696,992
Lear Corp	220,000 Shares	229,262	226,050
Liberty Mutual Group	160,000 Shares	197,600	182,400
Louisiana Pacific Corp	170,000 Shares	182,326	176,375
Lowe's Companies Inc	140,000 Shares	176,621	167,761
LSB Industries	155,000 Shares	165,850	128,650

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Lyb Intl Finance Bv	180,000 Shares	\$ 188,874	\$ 164,374
Macquarie Bank Ltd	125,000 Shares	146,998	140,035
Magellan Midstream Partn	165,000 Shares	192,492	180,139
Marathon Petroleum Corp	85,000 Shares	85,422	85,240
Mass Mutual Life Ins Co	115,000 Shares	180,522	166,992
McDonalds Corp Med Term Note	105,000 Shares	112,824	109,400
Medtronic Inc	200,000 Shares	211,218	202,168
Mercedes-Benz Auto Lease Trust	104,666 Shares	104,660	104,634
Mercedes-Benz Auto Receivables Tr	165,000 Shares	164,997	164,622
Merrill Lynch & Co	475,000 Shares	541,761	524,049
Merrill Lynch/countrywide Comm	695,000 Shares	752,589	724,343
Merrill Lynch/countrywide Comm Mt	265,756 Shares	276,848	275,789
Met Life Glob Funding I	160,000 Shares	193,210	185,890
Metlife Inc	120,000 Shares	119,532	120,793
Microsoft Corp	191,000 Shares	190,288	197,838
Morgan Stanley	115,000 Shares	116,535	115,133
Morgan Stanley	475,000 Shares	538,185	520,852
Morgan Stanley	312,000 Shares	299,038	297,682
Morgan Stanley Capital I	129,910 Shares	134,934	130,822
Morgan Stanley Capital I	404,000 Shares	412,064	411,648
Morgan Stanley Capital I	413,182 Shares	424,028	412,959
Morgan Stanley Capital I	62,000 Shares	66,410	64,626
Morgan Stanley Capital I	600,467 Shares	648,551	623,807
Mosaic Co	170,000 Shares	191,714	171,816
MPLX LP	74,000 Shares	68,543	66,230
National Retail Prop Inc	187,000 Shares	186,776	183,658
National Rural Util Coop	75,000 Shares	74,953	74,639
Nationwide Mutual Insura	105,000 Shares	163,261	152,401
New York University	720,000 Shares	709,315	704,340
Nextera Energy Capital	40,000 Shares	40,146	39,857
Nissan Auto Lease Trust	121,058 Shares	121,049	120,888
Nissan Auto Receivables Owner	195,000 Shares	194,985	194,491
Nustar Logistics LP	150,000 Shares	146,805	132,000
Old Republic Intl Corp	230,000 Shares	241,514	235,697
Omnicom Group Inc	160,000 Shares	163,675	158,488
Pacific Lifecorp	180,000 Shares	196,805	183,395
Penske Truck Leasing/PTL	210,000 Shares	209,158	207,894
Pepsico Inc	135,000 Shares	134,957	134,991
Petrologistics LP/FIN	205,000 Shares	221,418	214,225
Phillips 66	150,000 Shares	176,976	150,354
Progress Energy Inc	145,000 Shares	148,062	142,306
Prologis LP	216,000 Shares	222,493	227,275
Prologis LP	67,000 Shares	66,585	66,462
Prudential Financial Inc	170,000 Shares	200,940	191,250

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Pseg Power LLC	220,000 Shares	\$ 223,612	\$ 221,322
Rabobank Nederland Utrec	150,000 Shares	156,600	153,335
Rabobank Nederland Utrec	210,000 Shares	224,540	221,630
Realogy Grp/Sun Grp Fl	183,000 Shares	183,458	183,565
Regency Energy Partners	171,000 Shares	182,858	171,855
Reliance Stand Life Ii	185,000 Shares	184,867	183,907
Republic Services Inc	158,000 Shares	188,304	185,154
Retail Opportunity Inves	175,000 Shares	190,132	178,679
Reynolds American Inc	225,000 Shares	231,255	250,142
Rio Tinto Fin Usa Plc	75,000 Shares	75,794	74,957
Royal Bank Of Canada	160,000 Shares	159,556	159,243
Royal Bank Of Canada	220,000 Shares	224,664	221,778
Royal Bk Scotland Group Plc	170,000 Shares	177,931	176,467
Santander Drive Auto Receivabl	750,000 Shares	754,248	751,103
Santander Drive Auto Receivabl	257,000 Shares	256,970	256,306
Santander Drive Auto Receivabl	845,000 Shares	844,954	844,704
Senior Housing Prop Trus	56,000 Shares	63,815	61,933
Shell International Fin	180,000 Shares	196,533	174,965
Simon Property Group LP	215,000 Shares	277,359	263,839
Southern Power Co	90,000 Shares	89,948	89,961
Standard Chartered Bank	175,000 Shares	192,465	186,036
Statoil Asa	210,000 Shares	239,394	212,986
Symetra Finl Corp	195,000 Shares	201,014	196,539
Teva Pharmaceut Fin BV	75,000 Shares	75,713	75,464
Tiaa Asset Mgmt Fin LLC	345,000 Shares	352,438	345,687
Toll Bros Finance Corp	165,000 Shares	188,008	181,500
Toronto-dominion Bank	150,000 Shares	154,865	151,371
Toyota Auto Receivables Owner	107,435 Shares	107,439	107,345
Toyota Auto Receivables Owner	85,000 Shares	84,993	84,871
Transatlantic Holdings	135,000 Shares	185,209	173,444
United Mexican States	424,000 Shares	432,501	386,264
United Rentals North Am	240,000 Shares	259,990	253,200
Unitedhealth Group Inc	55,000 Shares	54,990	55,002
Unitedhealth Group Inc	143,000 Shares	142,914	144,499
Validus Holdings Ltd	100,000 Shares	138,053	125,027
Ventas Realty LP/Cap Crp	165,000 Shares	191,888	181,249
Verisk Analytics Inc	165,000 Shares	188,946	182,840
Verizon Communications	115,000 Shares	115,040	114,668
Verizon Communications	170,000 Shares	211,448	201,826
Verizon Communications	170,000 Shares	167,487	155,650
Viacom Inc	37,000 Shares	40,376	37,571
Volkswagen Auto Loan Enhanced	128,916 Shares	128,639	128,301
Volkswagen Auto Loan Enhanced	1,174,000 Shares	1,173,551	1,165,582
VR National Rural Ut 4.75	190,000 Shares	192,850	187,416
Wachovia Bank Commercial Mortg	719,000 Shares	741,469	722,739
Wachovia Bank Na	262,000 Shares	273,325	264,646

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2015

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Wachovia Corporation	200,000 Shares	\$ 232,532	\$ 222,264
Waste Management Inc	160,000 Shares	155,454	148,805
Wells Fargo & Company	160,000 Shares	162,367	161,587
Wells Fargo & Company	253,000 Shares	252,039	258,447
Wells Fargo Commercial Mortgage	257,000 Shares	264,702	263,127
West Fraser Timber Co	235,000 Shares	229,929	219,025
Westpac Banking Corp	150,000 Shares	150,618	150,009
WF-RBS Commercial Mortgage Trust	719,000 Shares	730,066	718,806
WF-RBS Commercial Mortgage Trust	87,000 Shares	95,279	95,007
White Mountains Re Group	179,000 Shares	192,490	182,850
Xcel Energy Inc	105,000 Shares	104,925	104,467
Xlit Ltd	155,000 Shares	155,512	151,784
Commingled Funds			
Wellington CTF DIH	903,277 Shares	12,741,179	8,888,244
Real Estate Investment Fund			
UBS (US) Trumbull Property Income	1,368 Shares	13,794,622	15,852,804
Real Estate Investment Trust Fund			
RREEF America REIT II, INC LLC	164,189 Shares	14,539,967	18,130,484
		<u>349,868,157</u>	<u>366,257,342</u>
Investment Contract With Insurance Company			
* Lincoln National Life		<u>4,938,310</u>	<u>4,938,310</u>
		<u>\$ 354,806,467</u>	<u>\$ 371,195,652</u>

* Party-in-interest



Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Line 24 - Change in Actuarial Assumptions

- Assumed expenses were changed from \$651,837 to \$732,517 mainly due to the change in PBGC premiums.

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

Non-Prescribed Funding Assumptions and Methods

Salary increase assumption

Current Year:	3.00%
Prior Year:	3.50%

Social Security

Current Year:	2.50%
Prior Year:	2.50%

Expenses

Expected plan administrative expenses of \$651,837 were added to the Target Normal Cost.

Frequency of optional payment forms

Optional Forms	Assumption
Single Life Annuity	35.00%
5 year Certain and Life Annuity	10.00%
10 year Certain and Life Annuity	15.00%
50% Joint and Survivor Annuity	10.00%
66.7% Joint and Survivor Annuity	5.00%
100% Joint and Survivor Annuity	25.00%

Marital percentage

75% of participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Mortality table

The mortality table is applied on a static basis. Separate annuitant and non-annuitant tables were used.

Withdrawal rates

Table T-8 of the Actuary's Pension Handbook. Sample rates as follows:

Age	Rate of Withdrawal
20	11.9%
30	11.2%
40	9.4%
50	4.8%
60	0.2%

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

Non-Prescribed Funding Assumptions and Methods (continued)

Retirement rates

Current Rates are based on age and service as follows:

Rates of Retirement		
Age	Less than 20 years of Service	20 or More Years of Service
55	2.0%	2.0%
56	2.0%	2.0%
57	2.0%	2.0%
58	2.0%	2.0%
59	5.0%	5.0%
60	5.0%	5.0%
61	5.0%	5.0%
62	10.0%	50.0%
63	5.0%	15.0%
64	5.0%	15.0%
65	100.0%	100.0%

Vested terminated participants are assumed to commence benefits at age 65 if employed less than 20 years at termination, or age 62, if employed 20 years or more at termination.

Disability rates

Included in withdrawal rates.

Asset valuation method

Market Value, including the discounted value of accrued contributions.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, increases or decreases expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions or applicable law. Because of limited scope, Buck performed no analysis of the potential range of such future differences.

Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Line 22 - Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	1,114.5148	0.0103	11.4706	630.8805
56	1,178.5452	0.0197	23.2524	1,302.1323
57	1,250.4561	0.0198	24.7477	1,410.6161
58	1,333.4451	0.0198	26.3865	1,530.4142
59	1,415.2874	0.0198	27.9934	1,651.6100
60	1,481.9524	0.0495	73.3209	4,399.2555
61	1,504.6905	0.0496	74.5967	4,550.3977
62	1,493.6075	0.4640	693.1062	42,972.5823
63	849.5808	0.1376	116.8711	7,362.8775
64	766.0413	0.1370	104.9125	6,714.4022
65	682.5596	0.9942	678.5774	44,107.5303
66	13.9623	0.8578	11.9769	790.4773
67	11.9747	0.9174	10.9851	735.9987
68	2.9841	1.0000	2.9841	202.9170
69	7.0000	1.0000	7.0000	483.0000
70	2.0000	0.5000	1.0000	70.0000
71	3.9937	0.5008	2.0000	142.0000
72	4.9795	0.6025	3.0000	216.0000
73	3.9621	0.7532	2.9842	217.8435
74	2.9670	0.6741	2.0000	148.0000
75	0.9529	1.0000	0.9529	71.4670
76	3.0000	1.0000	<u>3.0000</u>	<u>228.0000</u>
Total			1,903.1183	119,938.4022
Weighted Average Retirement Age = 119,938.4022 / 1,903.1183				63.02
Rounded Weighted Average Retirement Age				63

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General note: The table presents values rounded to fewer significant digits than used in the calculation.