

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2016 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information		
For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</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.)	
	☒ 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 ☐ special extension (enter description)	☐ automatic extension ☐ the DFVC program

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	Filed with authorized/valid electronic signature.	10/12/2017	DENA JACQUAY
	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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN
	3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 5748
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) 2482
a(2) Total number of active participants at the end of the plan year	6a(2) 2353
b Retired or separated participants receiving benefits.....	6b 1703
c Other retired or separated participants entitled to future benefits	6c 1533
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 5589
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 129
f Total. Add lines 6d and 6e	6f 5718
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)	9b Plan benefit arrangement (check all that apply)
(1) ☒ Insurance	(1) ☒ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts	(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust	(3) ☒ Trust
(4) ☐ General assets of the sponsor	(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 2016 Form M-1 annual report. If the plan was not required to file the 2016 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration</small> <hr/> <small>Pension Benefit Guaranty Corporation</small>	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 <hr/> 2016 <hr/> This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning **01/01/2016** and ending **12/31/2016**

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	5718	01/01/2016	12/31/2016

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	

(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	

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(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** 2808400**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**

4938310

c Additions: (1) Contributions deposited during the year**7c(1)**

13760160

(2) Dividends and credits.....

7c(2)

(3) Interest credited during the year.....

7c(3)

272279

(4) Transferred from separate account

7c(4)

(5) Other (specify below)

7c(5)

14851

▶

(6) Total additions

7c(6)

14047290

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

18985600

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

14480586

(2) Administration charge made by carrier.....

7e(2)

41045

(3) Transferred to separate account

7e(3)

(4) Other (specify below)

7e(4)

1655569

▶

(5) Total deductions

7e(5)

16177200

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**).....**7f**

2808400

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. Specify nature of costs.	10b	

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. ▶

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 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

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

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

A Name of plan <u>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 or 5500-SF <u>PARKVIEW HEALTH SYSTEM, INC.</u>	D Employer Identification Number (EIN) <u>35-1972384</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2016</u>	
2 Assets:	
a Market value	2a <u>371195652</u>
b Actuarial value	2b <u>371195652</u>
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.....	<u>1674</u> <u>144468787</u> <u>144468787</u>
b For terminated vested participants.....	<u>1592</u> <u>44965478</u> <u>44965478</u>
c For active participants.....	<u>2482</u> <u>140376734</u> <u>141393656</u>
d Total.....	<u>5748</u> <u>329810999</u> <u>330827921</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>6.13%</u>
6 Target normal cost.....	6 <u>9144609</u>

Statement by Enrolled Actuary

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

SIGN HERE		<u>10/06/2017</u>
	Signature of actuary	Date
<u>TIMOTHY J. MAXSON</u>	Type or print name of actuary	<u>17-06697</u>
<u>CONDUENT HR CONSULTING, LLC</u>	Firm name	Most recent enrollment number
<u>110 W. BERRY ST., SUITE 1300</u> <u>FORT WAYNE, IN 46802-2317</u>	Address of the firm	<u>260-426-7800</u>
		Telephone number (including area code)

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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2016
v. 160205

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)	64834064	11523902
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	3113756	
9	Amount remaining (line 7 minus line 8)	61720308	11523902
10	Interest on line 9 using prior year's actual return of <u>-1.24</u> %	-765332	-142896
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		
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>6.33</u> %		0
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		0
d	Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	32347496	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	28607480	11381006

Part III Funding Percentages			
14	Funding target attainment percentage	14	100.11%
15	Adjusted funding target attainment percentage	15	112.20%
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	122.69%
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
09/11/2017	12900000				
Totals ►			18(b)	12900000	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	11665161

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:	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">1st segment: 4.43%</div> <div style="text-align: center;">2nd segment: 5.91%</div> <div style="text-align: center;">3rd segment: 6.65%</div> </div>	☐ 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 9144609
b	Excess assets, if applicable, but not greater than line 31a		31b 379245
32	Amortization installments:		
a	Net shortfall amortization installment		Outstanding Balance
b	Waiver amortization installment		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 8765364
		Carryover balance	Prefunding balance
35	Balances elected for use to offset funding requirement		Total balance
36	Additional cash requirement (line 34 minus line 35)		36 8765364
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37 11665161
38	Present value of excess contributions for current year (see instructions)		
a	Total (excess, if any, of line 37 over line 36)		38a 2899797
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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2016
		This Form is Open to Public Inspection.
For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016		
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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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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

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

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	228122	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	1415747	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	1441632	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
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Internal Revenue Service</small> <small>Department of Labor</small> <small>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> 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>		
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	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		12900000
(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)	366257342	379766282
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	4938310	2808400
(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	371195652	395474682

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	371195652	395474682
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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)	12900000	
(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)		12900000
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)	10186104	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		10186104
(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)		18771022
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		41857126

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	14492595	
(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)		14492595
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)	3085501	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		3085501
j Total expenses. Add all expense amounts in column (b) and enter total	2j		17578096

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		24279030
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:

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

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		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?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4017530. (See instructions.)

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 sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection.
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

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	4

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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2016
v. 160205

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
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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: <u>89.7</u> % Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: <u>9.6</u> % Other: <u>0.7</u> %	
	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
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20a Is the plan a 401(k) plan? If "No," skip b	☐ Yes ☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A
21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:	☐ Ratio percentage test ☐ Average benefit test ☐ N/A
21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules?	☐ Yes ☐ No
22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter / / and the serial number .	
22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter / / .	

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, 2016 and 2015 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 3, which was certified by Lincoln Financial Group, Trust Company, LLC 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, 2016 and 2015, 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.

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*.

Handwritten signature of BKD, LLP in black ink.

Fort Wayne, Indiana
October 9, 2017

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 ¹																			
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		2		0		0		0		0		0		0		0	
30 - 34	0		0		24	39,837	44	49,741	0		0		0		0		0		0	
35 - 39	0		4		19		49	48,670	16		0		0		0		0		0	
40 - 44	2		5		14		40	51,460	41	60,354	8		0		0		0		0	
45 - 49	0		3		15		29	64,709	35	55,541	25	57,075	10		0		0		0	
50 - 54	1		2		5		43	47,306	57	57,461	37	66,718	41	73,716	45	71,130	0		0	
55 - 59	1		3		8		39	49,443	68	66,172	57	54,805	36	64,431	82	62,887	16		0	
60 - 64	0		3		5		29	75,313	63	64,922	35	71,412	27	65,919	30	64,442	38	73,514	3	
65 - 69	0		1		3		4		10		2		0		2		1		0	
70 & up	1		1		1		1		2		0		0		0		1		0	

Attained Age	Years of Credited Service ²																			
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		1		0		0		0		0		0		0		0	
30 - 34	0		19		2		1		0		0		0		0		0		0	
35 - 39	10		134	960	35	2,064	2		0		0		0		0		0		0	
40 - 44	7		86	1,212	129	2,664	22	5,208	1		0		0		0		0		0	
45 - 49	3		79	1,308	105	3,060	58	5,364	15		0		0		0		0		0	
50 - 54	4		66	1,308	81	3,000	49	5,916	37	8,460	16		2		0		0		0	
55 - 59	4		63	1,500	54	3,024	29	6,516	28	10,188	18		1		0		0		0	
60 - 64	5		36	1,416	33	2,964	17		17		5		5		0		0		0	
65 - 69	2		4		2		2		0		0		0		0		0		0	
70 & up	0		1		3		0		0		0		0		0		0		0	

¹ 1,189 employees who are currently accruing benefits.

² 1,293 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 2016 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.41%	4.43%
Second Segment Rate	3.96%	5.91%
Third Segment Rate	4.97%	6.65%
Effective Interest Rate Based on constrained rates		6.13%

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%

* Used for maximum tax-deduction purposes

** Used for minimum funding and benefit restriction purposes.

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 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 increases

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 and Future Years:	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 \$1,856,632 based on last year’s expenses adjusted for expected increases in the PBGC premium for 2016 were added to the Target Normal Cost. To determine the 2016 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 2016.

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 (continued)

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:

Age	Rates of Retirement	
	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.

Asset valuation method

Market Value, including the discounted value of accrued contributions.

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 (continued)

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, 2015 Valuation

- 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 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 above changes in assumptions increased the plan's Funding Target by approximately \$13.0M.

- The expected amount of plan administrative expenses changed from \$732,517 to \$1,856,632 mainly due to the change in PBGC premiums.

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 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

► 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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">B Three-digit plan number (PN) ►</td> <td style="width:40%; text-align: center;">001</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>	B Three-digit plan number (PN) ►	001		
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>2016</u>			
2 Assets:			
a Market value	2a	371,195,652	
b Actuarial value	2b	371,195,652	
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	1,674	144,468,787	144,468,787
b For terminated vested participants	1,592	44,965,478	44,965,478
c For active participants	2,482	140,376,734	141,393,656
d Total	5,748	329,810,999	330,827,921
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	6.13%	
6 Target normal cost	6	9,144,609	

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>10/6/2017</u> Date 1706697 Most recent enrollment number 260-426-7800 Telephone number (including area code)
TIMOTHY J. MAXSON Type or print name of actuary Conduent HR Consulting, 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 ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2016
v. 160205

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).....	64,834,064	11,523,902
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year).....	3,113,756	0
9 Amount remaining (line 7 minus line 8).....	61,720,308	11,523,902
10 Interest on line 9 using prior year's actual return of <u>-1.24%</u>	-765,332	-142,896
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		0
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>6.33%</u>		0
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.....		0
d Portion of (c) to be added to prefunding balance.....		0
12 Other reductions in balances due to elections or deemed elections.....	32,347,496	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12).....	28,607,480	11,381,006

Part III Funding Percentages

14 Funding target attainment percentage.....	14	100.11%
15 Adjusted funding target attainment percentage.....	15	112.20%
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	122.69%
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
09/11/2017	12,900,000	0			
Totals ▶			18(b)	12,900,000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	11,665,161

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: 4.43 %	2nd segment: 5.91 %	3rd segment: 6.65 %	☐ 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	9,144,609										
b Excess assets, if applicable, but not greater than line 31a	31b	379,245										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment	0	0	b Waiver amortization installment	0	0
	Outstanding Balance	Installment										
a Net shortfall amortization installment	0	0										
b Waiver amortization installment	0	0										
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33											
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a + 31b + 32a + 32b - 33)	34	8,765,364										
		Carryover balance	Prefunding balance									
35 Balances elected for use to offset funding requirement		0	0									
36 Additional cash requirement (line 34 minus line 35)	36	8,765,364										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	11,665,161										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	2,899,797										
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 ¹																			
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		2		0		0		0		0		0		0		0	
30 - 34	0		0		24	39,837	44	49,741	0		0		0		0		0		0	
35 - 39	0		4		19		49	48,670	16		0		0		0		0		0	
40 - 44	2		5		14		40	51,460	41	60,354	8		0		0		0		0	
45 - 49	0		3		15		29	64,709	35	55,541	25	57,075	10		0		0		0	
50 - 54	1		2		5		43	47,306	57	57,461	37	66,718	41	73,716	45	71,130	0		0	
55 - 59	1		3		8		39	49,443	68	66,172	57	54,805	36	64,431	82	62,887	16		0	
60 - 64	0		3		5		29	75,313	63	64,922	35	71,412	27	65,919	30	64,442	38	73,514	3	
65 - 69	0		1		3		4		10		2		0		2		1		0	
70 & up	1		1		1		1		2		0		0		0		1		0	

Attained Age	Years of Credited Service ²																			
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		1		0		0		0		0		0		0		0	
30 - 34	0		19		2		1		0		0		0		0		0		0	
35 - 39	10		134	960	35	2,064	2		0		0		0		0		0		0	
40 - 44	7		86	1,212	129	2,664	22	5,208	1		0		0		0		0		0	
45 - 49	3		79	1,308	105	3,060	58	5,364	15		0		0		0		0		0	
50 - 54	4		66	1,308	81	3,000	49	5,916	37	8,460	16		2		0		0		0	
55 - 59	4		63	1,500	54	3,024	29	6,516	28	10,188	18		1		0		0		0	
60 - 64	5		36	1,416	33	2,964	17		17		5		5		0		0		0	
65 - 69	2		4		2		2		0		0		0		0		0		0	
70 & up	0		1		3		0		0		0		0		0		0		0	

¹ 1,189 employees who are currently accruing benefits.

² 1,293 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	1,045.3822	0.0103	10.7463	591.0460
56	1,132.8556	0.0198	22.4282	1,255.9771
57	1,192.7704	0.0198	23.6453	1,347.7831
58	1,259.0483	0.0198	24.9903	1,449.4375
59	1,337.5401	0.0198	26.5409	1,565.9112
60	1,416.9340	0.0497	70.3535	4,221.2070
61	1,437.8938	0.0497	71.4521	4,358.5789
62	1,444.2346	0.4690	677.3003	41,992.6195
63	811.2462	0.1397	113.3033	7,138.1091
64	740.4616	0.1393	103.1503	6,601.6197
65	654.8834	0.9970	652.9145	42,439.4448
66	12.9590	0.9239	11.9729	790.2122
67	6.9809	1.0000	6.9809	467.7189
68	6.0000	1.0000	6.0000	408.0000
69	2.0000	1.0000	2.0000	138.0000
70	4.0000	1.0000	4.0000	280.0000
71	2.0000	0.5000	1.0000	71.0000
72	2.9930	0.3341	1.0000	72.0000
73	3.9757	0.5031	2.0000	146.0000
74	2.9538	0.6704	1.9803	146.5446
75	1.9595	0.5103	1.0000	75.0000
76	0.9418	1.0000	0.9418	71.5735
77	2.0000	1.0000	<u>2.0000</u>	<u>154.0000</u>
Total			1,837.7009	115,781.7831
Weighted Average Retirement Age = 115781.7831 / 1837.7009				63.00
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 1/180 for each month of the first 60 months plus 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.

Summary of Changes from the January 1, 2015 Valuation

None.

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 2016 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.41%	4.43%
Second Segment Rate	3.96%	5.91%
Third Segment Rate	4.97%	6.65%
Effective Interest Rate Based on constrained rates		6.13%

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%

* Used for maximum tax-deduction purposes

** Used for minimum funding and benefit restriction purposes.

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 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 increases

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 and Future Years:	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 \$1,856,632 based on last year’s expenses adjusted for expected increases in the PBGC premium for 2016 were added to the Target Normal Cost. To determine the 2016 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 2016.

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 (continued)

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:

Age	Rates of Retirement	
	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.

Asset valuation method

Market Value, including the discounted value of accrued contributions.

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 (continued)

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, 2015 Valuation

- 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 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 above changes in assumptions increased the plan's Funding Target by approximately \$13.0M.

- The expected amount of plan administrative expenses changed from \$732,517 to \$1,856,632 mainly due to the change in PBGC premiums.

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

Schedule SB, Line 24 – Change in Actuarial Assumptions

- The expected amount of plan administrative expenses changed from \$732,517 to \$1,856,632 mainly due to the change in PBGC premiums.

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2016

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Blackrock Short-term Investment Fund	\$ 61,993,081	\$ -	\$ -	\$ 61,993,081	\$ 61,993,081	\$ -
Blackrock Short-term Investment Fund	-	61,074,874	-	61,074,874	61,074,874	-

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 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

▶ 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	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">B Three-digit plan number (PN) ▶</td> <td style="width:40%; text-align: center;">001</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>	B Three-digit plan number (PN) ▶	001		
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>2016</u>			
2 Assets:			
a Market value	2a	371,195,652	
b Actuarial value	2b	371,195,652	
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	1,674	144,468,787	144,468,787
b For terminated vested participants	1,592	44,965,478	44,965,478
c For active participants	2,482	140,376,734	141,393,656
d Total	5,748	329,810,999	330,827,921
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	6.13%	
6 Target normal cost	6	9,144,609	

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 </div>	<div style="text-align: center;"> <u>10/6/2017</u> Date <u>1706697</u> Most recent enrollment number <u>260-426-7800</u> Telephone number (including area code) </div>
TIMOTHY J. MAXSON Type or print name of actuary		
Conduent HR Consulting, 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 ☐

For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2016
v. 160205

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).....	64,834,064	11,523,902
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year).....	3,113,756	0
9 Amount remaining (line 7 minus line 8).....	61,720,308	11,523,902
10 Interest on line 9 using prior year's actual return of <u>-1.24%</u>	-765,332	-142,896
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		0
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>6.33%</u>		0
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.....		0
d Portion of (c) to be added to prefunding balance.....		0
12 Other reductions in balances due to elections or deemed elections.....	32,347,496	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12).....	28,607,480	11,381,006

Part III Funding Percentages

14 Funding target attainment percentage.....	14	100.11%
15 Adjusted funding target attainment percentage.....	15	112.20%
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	122.69%
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
09/11/2017	12,900,000	0			
Totals ▶			18(b)	12,900,000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	11,665,161

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: 4.43 %	2nd segment: 5.91 %	3rd segment: 6.65 %	☐ 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	9,144,609										
b Excess assets, if applicable, but not greater than line 31a	31b	379,245										
32 Amortization installments:	<table border="1"> <thead> <tr> <th></th> <th>Outstanding Balance</th> <th>Installment</th> </tr> </thead> <tbody> <tr> <td>a Net shortfall amortization installment</td> <td>0</td> <td>0</td> </tr> <tr> <td>b Waiver amortization installment</td> <td>0</td> <td>0</td> </tr> </tbody> </table>				Outstanding Balance	Installment	a Net shortfall amortization installment	0	0	b Waiver amortization installment	0	0
	Outstanding Balance	Installment										
a Net shortfall amortization installment	0	0										
b Waiver amortization installment	0	0										
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33											
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a + 31b + 32a + 32b - 33)	34	8,765,364										
		Carryover balance	Prefunding balance									
35 Balances elected for use to offset funding requirement		0	0									
36 Additional cash requirement (line 34 minus line 35)	36	8,765,364										
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	11,665,161										
38 Present value of excess contributions for current year (see instructions)												
a Total (excess, if any, of line 37 over line 36)	38a	2,899,797										
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 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	1,045.3822	0.0103	10.7463	591.0460
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63	811.2462	0.1397	113.3033	7,138.1091
64	740.4616	0.1393	103.1503	6,601.6197
65	654.8834	0.9970	652.9145	42,439.4448
66	12.9590	0.9239	11.9729	790.2122
67	6.9809	1.0000	6.9809	467.7189
68	6.0000	1.0000	6.0000	408.0000
69	2.0000	1.0000	2.0000	138.0000
70	4.0000	1.0000	4.0000	280.0000
71	2.0000	0.5000	1.0000	71.0000
72	2.9930	0.3341	1.0000	72.0000
73	3.9757	0.5031	2.0000	146.0000
74	2.9538	0.6704	1.9803	146.5446
75	1.9595	0.5103	1.0000	75.0000
76	0.9418	1.0000	0.9418	71.5735
77	2.0000	1.0000	<u>2.0000</u>	<u>154.0000</u>
Total			1,837.7009	115,781.7831
Weighted Average Retirement Age = 115781.7831 / 1837.7009				63.00
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 35-1972384 PN 001

Independent Auditor's Report and Financial Statements
December 31, 2016 and 2015



Parkview Health System, Inc. Employees' Pension Plan

December 31, 2016 and 2015

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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, 2016 and 2015 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 3, which was certified by Lincoln Financial Group, Trust Company, LLC 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, 2016 and 2015, 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.

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 9, 2017

Federal Employer Identification Number: 44-0160260

Parkview Health System, Inc. Employees' Pension Plan

Statements of Net Assets Available for Benefits

December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Assets		
Investments		
At fair value	\$ 379,766,282	\$ 366,257,342
At contract value	2,808,400	4,938,310
Total investments	<u>382,574,682</u>	<u>371,195,652</u>
Receivables		
Employer's contribution	<u>12,900,000</u>	<u>-</u>
Total receivables	<u>12,900,000</u>	<u>-</u>
Net Assets Available for Benefits	<u>\$ 395,474,682</u>	<u>\$ 371,195,652</u>

Parkview Health System, Inc. Employees' Pension Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Investment Income (Loss)		
Net (depreciation) appreciation in fair value of investments	\$ 18,771,022	\$ (13,138,094)
Interest and dividend income	<u>10,186,104</u>	<u>9,530,691</u>
Net investment income (loss)	<u>28,957,126</u>	<u>(3,607,403)</u>
Contributions		
Employer	<u>12,900,000</u>	<u>-</u>
Total additions	<u>41,857,126</u>	<u>(3,607,403)</u>
Deductions		
Benefits paid to participants	14,492,595	13,027,093
Administrative expenses	<u>3,085,501</u>	<u>1,879,562</u>
Total deductions	<u>17,578,096</u>	<u>14,906,655</u>
Net Increase (Decrease)	24,279,030	(18,514,058)
Net Assets Available for Benefits, Beginning of Year	<u>371,195,652</u>	<u>389,709,710</u>
Net Assets Available for Benefits, End of Year	<u><u>\$ 395,474,682</u></u>	<u><u>\$ 371,195,652</u></u>

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2016 and 2015

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, 2016 and 2015

- 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, 2016 and 2015

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.

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.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2016 and 2015

Note 3: 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, 2016 and 2015
- Investment income as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2016 and 2015
- 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, 2016

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.

Note 4: 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 2016 and 2015.

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.

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2016 and 2015

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 5: 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.

The accumulated plan benefit information as of January 1, 2016 and 2015, was as follows:

	January 1, 2016	January 1, 2015
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	\$ 138,750,212	\$ 122,447,299
Other participants	174,239,956	160,996,608
	<u>312,990,168</u>	<u>283,443,907</u>
Nonvested benefits	844,931	1,395,709
	<u>844,931</u>	<u>1,395,709</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 313,835,099</u>	<u>\$ 284,839,616</u>

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

	January 1, 2016	January 1, 2015
Actuarial present value of accumulated plan benefits, beginning of year	<u>\$ 284,839,616</u>	<u>\$ 269,232,551</u>
Increase during the year attributable to:		
Benefits accumulated	7,447,018	7,383,429
Increase for interest due to the decrease in the discounted period	20,883,516	19,767,377
Assumption changes	13,692,042	-
Benefits paid	<u>(13,027,093)</u>	<u>(11,543,741)</u>
Net increase	<u>28,995,483</u>	<u>15,607,065</u>
Actuarial present value of accumulated plan benefits, end of year	<u>\$ 313,835,099</u>	<u>\$ 284,839,616</u>

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 7.00 percent and 7.50 percent for 2016 and 2015, 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

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2016 and 2015

- 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.

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 \$1,670,729 and \$1,550,044 of administrative and management fees to the custodians, the investment fund managers and the investment advisor during 2016 and 2015, 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, 2016 and 2015

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, 2016 and 2015:

		Fair Value Measurements Using		
		Quoted Prices in Active Markets for Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2016	Fair Value			
Mutual funds	\$ 152,166,741	\$ 152,166,741	\$ -	\$ -
Money market funds	5,861,665	5,861,665	-	-
Common stocks	96,153,929	87,034,968	9,118,961	-
Fixed income	78,000,091	-	78,000,091	-
Commingled funds (A)	10,880,408	-	-	-
Real estate funds (A)	36,703,448	-	-	-
	\$ 379,766,282	\$ 245,063,374	\$ 87,119,052	\$ -

		Fair Value Measurements Using		
		Quoted Prices in Active Markets for Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2015	Fair Value			
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>

(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, 2016 and 2015

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, 2016. 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 tables summarize investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2016 and 2015. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan:

	Fair Value	December 31, 2016		Redemption Frequency	Redemption Notice Period
		Unfunded Commitments			
Commingled fund (A) Real estate investment trust fund (B)	\$ 10,880,408	\$ —		N/A	None
Real estate investment fund (C)	19,602,407	—		N/A	None
	17,101,041	—		N/A	None

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2016 and 2015

		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

(A) This category includes investments in a fund that seeks to provide returns consistent with U.S. CPI +5 percent over the long-term by investing in areas that offer strong relative performance in rising inflation environments.

(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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds			
Clark Cnty NV Sch Dist	250,000 Shares	\$ 257,888	\$ 255,110
Massachusetts St	400,000 Shares	403,320	402,136
New York NY	120,000 Shares	123,936	122,827
New York St. Dorm Auth Revenues	75,000 Shares	76,139	75,773
American Funds Capital World Grow	693,952 Shares	29,644,777	30,408,979
Dodge & Cox Global Stock Fund	2,669,895 Shares	23,877,432	31,798,449
PIMCO All Asset Fd Institutional	1,215,876 Shares	14,493,274	13,557,018
JPM Core Bond Trust	6,798,004 Shares	72,471,462	69,883,478
California St	720,000 Shares	718,510	717,790
CmwltH Fing Auth PA	85,000 Shares	85,000	82,504
Energy N W WA Elec Revenue	530,000 Shares	526,465	528,373
Houston TX Utility Sys Revenue	500,000 Shares	528,315	524,495
Illinois St Sales Tax Revenue	230,000 Shares	227,813	215,503
Met Govt Nashville & Davidson	310,000 Shares	310,000	298,431
New York City NY Transitional F	725,000 Shares	740,029	722,680
New York NY	720,000 Shares	718,078	718,783
New York St Dorm Auth St Perso	720,000 Shares	731,369	724,133
Seattle WA	605,000 Shares	605,000	604,564
Univ of California CA Revenues	520,000 Shares	529,901	525,715
* Money Market Funds			
Wells Fargo Short-Term			
Investment Fund	5,045,206 Shares	5,045,206	5,045,206
Commercial Paper	475,000 Shares	471,372	471,372
Net Cash	345,040 Shares	345,040	345,088
Common Stocks			
Abbvie Inc	10,165 Shares	442,707	636,532
Adobe Sys Inc	9,000 Shares	294,176	926,550
Advance Auto Pts Inc	3,282 Shares	483,106	555,052
Air Methods Corp Com	7,697 Shares	316,143	245,149
Akamai Technologies	14,100 Shares	618,334	940,188
Align Technology Inc	7,500 Shares	259,676	720,975
Allergan Plc	3,010 Shares	875,324	632,130
Alphabet Inc Cl A	310 Shares	109,901	245,660
Alphabet Inc Cl C	1,114 Shares	729,307	859,807
Alphabet Inc Cl C	561 Shares	197,707	432,991
American International Group, Inc	12,915 Shares	628,397	843,479
Ameriprise Finl Inc	4,715 Shares	417,742	523,082
Ametek Inc Com	9,696 Shares	456,488	471,226
Amphenol Corp Cl A	12,000 Shares	585,245	806,400
Anadarko Petroleum Corp	6,885 Shares	533,515	480,091
Apple Inc	13,229 Shares	1,303,215	1,532,183
Applied Materials Inc	19,685 Shares	364,805	635,235

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Autodesk Inc	16,300 Shares	\$ 568,592	\$ 1,206,363
Automatic Data Processing Inc	8,800 Shares	455,877	904,464
BB&T Corp Com	7,929 Shares	303,231	372,822
Blackrock Inc	1,380 Shares	285,363	525,145
Boeing Co	5,720 Shares	489,070	890,490
Cabelas Inc	8,500 Shares	415,988	497,675
CEB Inc	7,100 Shares	367,313	430,260
Cerner Corp Com	6,000 Shares	374,987	284,220
Cheesecake Factory Inc Com	5,500 Shares	220,281	329,340
Chubb Limited	3,605 Shares	412,302	476,293
Cisco Systems Inc	25,100 Shares	480,293	758,522
Citizens Financial Group Inc	14,530 Shares	352,133	517,704
CME Group Ince	6,365 Shares	475,058	734,203
Cognex Corp	8,200 Shares	287,025	521,684
Cognizant Tech Solutions Crp Com	12,200 Shares	756,371	683,566
Colgate Palmolive Co	9,500 Shares	506,430	621,680
Comcast Corp Class A	10,379 Shares	621,125	716,670
Core Laboratories N V Com	3,000 Shares	301,076	360,120
Cypress Semiconductor Corp	13,150 Shares	151,451	150,436
Danaher Corp	5,917 Shares	453,524	460,579
Dentsply Sirona Inc	7,797 Shares	480,181	450,121
Discover Financial Services	6,830 Shares	489,316	492,375
Dolby Laboratories Inc	6,400 Shares	207,186	289,216
Du Pont E I De Nemours & Co	6,955 Shares	338,333	510,497
E*trade Group	13,800 Shares	188,037	478,170
Ecolab Inc	3,250 Shares	246,151	380,965
Edwards Lifesciences Corp	18,600 Shares	952,839	1,742,820
EOG Resources, Inc	9,700 Shares	570,282	980,670
Ethan Allen Interiors Inc Com	17,700 Shares	443,237	652,245
F5 Networks Inc	4,340 Shares	407,759	628,085
Factset Resh Sys Inc Com	5,500 Shares	570,703	898,865
Fidelity Natl Information Svcs Inc	8,105 Shares	397,740	613,062
First Data Corporation	25,925 Shares	371,450	367,876
Garmin Ltd	12,900 Shares	530,579	625,521
General Electric Co	25,090 Shares	628,610	792,844
Gentex Corp	38,000 Shares	407,134	748,220
Genuine Parts Co	3,920 Shares	262,064	374,517
Gilead Sciences Inc	6,600 Shares	684,364	472,626
Graco Inc	4,100 Shares	212,983	340,669
Grainger W W Inc	1,300 Shares	316,310	301,925
Hexcel Corp New Com	9,365 Shares	385,573	481,736
Home Depot Inc	3,745 Shares	339,529	502,130
IHS Market LTD	7,113 Shares	233,875	251,871
Ingersoll-rand PLC	8,720 Shares	394,203	654,349
Intuit Com	14,275 Shares	954,259	1,636,058
Intuitive Surgical Inc	1,400 Shares	634,777	887,838

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Intuitive Surgical Inc	1,340 Shares	\$ 556,782	\$ 849,788
Jacobs Engr Group Inc	5,335 Shares	255,924	304,095
Jetblue Awys Corp	29,500 Shares	158,923	661,390
Jm Smucker Co	2,995 Shares	364,920	383,540
Johnson & Johnson	7,000 Shares	474,362	806,470
L Brands Inc	12,100 Shares	606,267	796,664
Landstar Sys Inc Com	8,000 Shares	400,554	682,400
Marsh & McLennan Cos Inc	6,430 Shares	248,187	434,604
Martin Marietta Matls Inc Com	2,200 Shares	386,473	487,366
Mastercard Inc	8,000 Shares	348,133	826,000
McKesson Corp	4,398 Shares	849,230	617,699
Medidata Solutions Inc	500 Shares	16,789	24,835
Microchip Technology Inc Com	8,300 Shares	287,223	532,445
Microsoft Corp	20,550 Shares	695,758	1,276,977
Microsoft Corp	16,300 Shares	502,075	1,012,882
Middleby Corp	12,400 Shares	1,115,606	1,596,738
Myriad Genetics Inc Com	11,600 Shares	424,750	193,372
Nike Inc Cl B	13,800 Shares	342,763	701,454
Occidental Pete Corp	7,670 Shares	598,682	546,334
Open Text Corporation	20,750 Shares	673,435	1,282,558
Oracle Corporation	18,925 Shares	626,952	727,666
Oracle Corporation	20,200 Shares	657,225	776,690
Paychex Inc	5,600 Shares	202,135	340,928
Pepsico Inc	6,730 Shares	564,852	704,160
Plantronics Inc Com	13,175 Shares	510,587	721,463
Plexus Corp Com	22,600 Shares	720,027	1,221,304
Power Intergrations Inc Com	8,300 Shares	374,983	563,155
PPL Corporation	8,707 Shares	299,428	296,473
Praxair Inc Com	5,700 Shares	621,164	667,983
Proctor & Gamble Co	7,907 Shares	687,202	664,821
Proto Labs Inc	7,100 Shares	314,568	364,585
Ralph Lauren Corporation	3,400 Shares	504,597	307,088
Realpage Inc	14,200 Shares	247,156	426,000
Rockwell Collins	3,255 Shares	210,105	301,934
Royal Caribbean Cruise	10,300 Shares	481,333	845,012
Sabre Corp	6,082 Shares	155,451	151,746
Schlumberger Ltd	8,700 Shares	641,869	730,365
Seagate Technology	19,100 Shares	625,712	729,047
Seagate Technology	21,324 Shares	782,440	813,937
Select Comfort Corporation	21,200 Shares	596,219	479,544
Southwestern Energy Co Com	37,400 Shares	404,284	404,668
Starbucks Corp Com	12,837 Shares	653,236	712,710
Stryker Corp	9,100 Shares	491,646	1,090,271
Super Micro Computer Inc	15,500 Shares	454,458	434,775
Synaptics Inc	4,900 Shares	335,950	262,542

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Taiwan Semiconductor Manufacture	38,800 Shares	\$ 564,114	\$ 1,115,500
TCF Financial	15,700 Shares	187,967	307,563
Time Warner Inc	5,632 Shares	277,333	543,657
TJX Companies Inc	22,100 Shares	1,101,441	1,660,373
TJX Companies Inc	6,380 Shares	332,214	479,329
TJX Companies Inc	9,900 Shares	448,917	743,787
Tripadvisor Inc	4,100 Shares	277,669	190,117
Ubiquiti Networks Inc	10,600 Shares	333,374	612,680
Ultra Petroleum Corp	83,300 Shares	544,021	602,259
Unitedhealth Group Inc	6,605 Shares	460,974	1,057,064
Universal Display Corp	6,175 Shares	327,790	347,653
Urban Outfitters Incorporated	7,700 Shares	263,534	219,296
US Bancorp	10,504 Shares	429,352	539,590
Varian Med Sys Inc	6,900 Shares	447,326	619,482
Vectren Corp	7,830 Shares	262,969	408,335
Viasat Inc	2,000 Shares	75,370	132,440
Visa Inc-Class A Shrs	10,157 Shares	461,202	792,449
Visteon Corp/New	5,060 Shares	319,233	406,520
Walt Disney Co	6,500 Shares	611,997	677,430
Yahoo Inc Com	18,100 Shares	461,267	699,927
U.S. Government and Agency Obligations			
Fed Home LN MTG Corp	51,186 Shares	51,882	51,236
Fed Home LN MTG Corp	44,063 Shares	45,179	44,611
Fed Home LN MTG Corp	190,727 Shares	192,083	191,350
Fed Home LN MTG Corp	35,533 Shares	35,843	35,571
Fed Home LN MTG Corp	380,474 Shares	394,029	386,908
Fed Home LN MTG Corp	58,102 Shares	61,361	59,479
Fed Home LN MTG Corp	813,606 Shares	898,017	875,749
Fed Home LN MTG Corp	39,023 Shares	40,645	39,591
Fed Home LN MTG Corp Pool #C91874	407,440 Shares	443,473	433,039
Fed Home LN MTG Corp Pool #C91875	565,108 Shares	597,249	585,797
Fed Home LN MTG Corp Pool #G18558	723,373 Shares	764,176	756,966
Fed Natl MTG Assn	40,042 Shares	40,373	40,006
Fed Natl MTG Assn	43,959 Shares	45,113	44,427
Fresb Multifamily Mortgage Pas	229,917 Shares	230,971	225,295
Fed Natl MTG Assn Pool #AI8401	464,467 Shares	521,945	509,827
Fed Natl MTG Assn Pool #AP0495	1,134,982 Shares	1,193,859	1,170,394
Fed Natl MTG Assn Pool #AS4170	587,590 Shares	628,629	617,868
Fed Natl MTG Assn Pool #AS7568	475,016 Shares	522,592	511,982
Fed Natl MTG Assn Pool #MA1107	472,392 Shares	501,843	491,326
Fed Natl MTG Assn Pool #MA2028	267,634 Shares	292,391	287,927
Fed Natl MTG Assn Pool #MA2158	949,746 Shares	1,037,894	1,022,135
Fed Natl MTG Assn Pool #MA2211	1,056,006 Shares	1,141,147	1,122,365
Fed Natl MTG Assn Pool #MA2260	392,570 Shares	413,425	407,978
Fed Natl MTG Assn Pool #MA2279	635,894 Shares	682,394	668,916

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
U.S. Government and Agency Obligations			
Fhlmc Multifamily Structured P	595,000 Shares	\$ 612,846	\$ 577,858
Govt Natl MTG Assn	17,884 Shares	18,398	18,109
Govt Natl MTG Assn Pool #711067	339,327 Shares	382,678	373,033
Small Business Administration	398,254 Shares	398,254	398,529
U.S. Treasury Bond	1,568,800 Shares	1,736,633	1,589,571
U.S. Treasury Inflation Index Bond	586,126 Shares	498,687	551,509
U.S. Treasury Inflation Index Bond	1,279,413 Shares	1,264,536	1,272,466
U.S. Treasury Note	160,000 Shares	160,300	160,150
U.S. Treasury Note	395,000 Shares	396,748	395,616
U.S. Treasury Note	665,000 Shares	665,886	665,705
U.S. Treasury Note	97,100 Shares	98,014	96,475
U.S. Treasury Note	121,800 Shares	121,719	121,401
U.S. Treasury Note	155,000 Shares	156,096	155,969
U.S. Treasury Note	400,000 Shares	400,060	400,036
U.S. Treasury Note	315,000 Shares	312,219	312,735
U.S. Treasury Note	240,000 Shares	239,888	239,662
U.S. Treasury Note	790,000 Shares	790,402	789,289
U.S. Treasury Note	475,000 Shares	475,056	474,221
U.S. Treasury Note	830,000 Shares	833,608	829,386
U.S. Treasury Note	710,000 Shares	711,969	707,948
U.S. Treasury Note	680,000 Shares	681,679	679,735
Corporate Bonds			
Abbvie Inc	256,000 Shares	257,893	252,864
Actavis Funding SCS	241,000 Shares	247,884	241,284
Aetna Inc	80,000 Shares	80,554	79,926
Aercap Ireland Cap LTD/A	170,000 Shares	172,217	174,675
Aia Group Ltd Usd 1.0	125,600 Shares	537,116	708,744
Alexandria Real Estate E	227,000 Shares	223,786	226,476
Ally Financial Inc	200,000 Shares	198,874	201,500
American Express	35,000 Shares	38,511	37,194
American Express Credit	115,000 Shares	115,850	115,148
American Express Credit Accoun	235,000 Shares	236,382	235,390
American Express Credit Accoun	365,000 Shares	366,269	366,135
American Financial Group	100,000 Shares	99,608	95,779
American Honda Finance	90,000 Shares	89,918	89,915
American Honda Finance	70,000 Shares	69,971	69,851
American Tower Corp	116,000 Shares	125,901	124,482
Amphenol Corp	115,000 Shares	115,062	115,116
Anheuser-Busch Inbev Fin	349,000 Shares	374,389	377,224
Arch Capital Finance LLC	120,000 Shares	120,000	125,807
Aspen Insurance Hldg Ltd	245,000 Shares	255,939	252,169
Assoc Banc-Corp	292,000 Shares	296,056	292,750
AT&T Inc	150,000 Shares	161,052	161,285
AT&T Inc	105,000 Shares	104,805	104,268
AT&T Inc	352,000 Shares	355,507	345,527

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Athene Global Funding	200,000 Shares	\$ 199,864	\$ 199,926
Bank of America Credit Card TR	100,000 Shares	100,148	100,251
Bank of America Credit Card TR	160,000 Shares	160,050	159,926
Bank Of America Corp	165,000 Shares	177,293	169,738
Bank Of America Corp	155,000 Shares	190,087	187,341
Bank Of America Corp	195,000 Shares	194,475	195,449
Bank Of America Corp	178,000 Shares	179,483	179,593
Bank Of America Corp	400,000 Shares	456,220	425,165
Bank Of Nova Scotia	207,000 Shares	206,574	206,151
Bank Of Nova Scotia	165,000 Shares	163,493	163,489
Berkshire Hathaway Inc	148,000 Shares	147,597	147,445
BMW Vehicle Owner Trust	180,000 Shares	179,953	179,775
BNP Paribas	155,000 Shares	158,110	156,217
Boston Properties LP	147,000 Shares	166,885	162,128
Boston Scientific Corp	191,000 Shares	186,618	194,138
Bp Capital Markets Plc	190,000 Shares	190,657	189,892
Brixmor Operating Part	121,000 Shares	120,187	120,635
Buckeye Partners LP	144,000 Shares	143,487	140,142
Burlingtn North Santa Fe	140,000 Shares	154,928	156,705
Cablevision Systems Corp	178,000 Shares	172,959	173,550
California Institute of	178,000 Shares	178,153	149,449
Capital One Financial Co	120,000 Shares	120,679	120,760
Capital One Financial Co	190,000 Shares	186,151	184,156
Capital One Multi-asset Execut	190,000 Shares	188,909	189,799
Capital One Multi-asset Execut	220,000 Shares	219,304	219,540
Capital One Multi-asset Execut	810,000 Shares	813,006	813,289
Carmax Auto Owner Trust	1,100,000 Shares	1,099,970	1,100,297
Carmax Auto Owner Trust	360,000 Shares	359,946	357,617
Carnival Corp	80,000 Shares	80,755	80,321
Caterpillar Inc	100,000 Shares	100,136	99,963
CBRE Services Inc	298,000 Shares	316,177	307,286
CD 2016-CD2 Mtg Tr	416,000 Shares	428,469	427,710
Centerpoint Energy Transition	21,397 Shares	21,400	21,389
CFCRE Commerical Mortgage Trus	255,000 Shares	262,648	263,451
Charter Comm Opt LLC/CAP	321,000 Shares	382,360	371,102
Chase Issuance Trust	720,000 Shares	745,791	736,747
Chase Issuance Trust	235,000 Shares	236,625	235,670
Chase Issuance Trust	495,000 Shares	494,917	485,852
China Mobile Ltd Hkd 0.1	59,500 Shares	626,922	630,827
Cisco Systems Inc	150,000 Shares	150,000	150,258
CIT Group Inc	210,000 Shares	214,330	212,888
Citibank Credit Card Issuance	210,000 Shares	212,100	210,804
Citigroup Commercial Mortgage	719,000 Shares	774,133	725,234
Citigroup Commercial Mortgage	479,000 Shares	493,558	487,828
Citigroup Inc	235,000 Shares	242,404	238,725
Citigroup Inc	190,000 Shares	189,814	189,894

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Citigroup Inc	301,000 Shares	\$ 305,726	\$ 307,938
CMS Energy Corp	200,000 Shares	219,078	209,102
Cnooc Ltd Hkd 0.02	58,300 Shares	917,023	729,394
Comcast Corp	240,000 Shares	249,641	245,153
Comm Mortgage Trust	719,000 Shares	786,631	767,971
Comm Mortgage Trust	129,000 Shares	135,880	137,208
Commercial Mortgage Pass-throu	46,085 Shares	48,821	46,046
Commercial Mortgage Pass-throu	622,354 Shares	675,071	627,382
Commercial Mortgage Pass-throu	132,000 Shares	141,936	138,226
Compass Group 10.625p	36,200 Shares	589,843	671,406
Continental Resources	29,000 Shares	29,000	29,272
Continental Resources	185,000 Shares	180,471	181,300
COTT Beverages Inc	171,000 Shares	179,550	177,199
Credit Suisse Mortgage Capital	189,000 Shares	196,603	192,823
Credit Suisse Mortgage Capital Cert	204,089 Shares	209,890	204,875
Crown Castle Intl Corp	170,000 Shares	172,470	175,880
CSL Ltd NPV	10,600 Shares	481,274	770,696
Cubalmart	175,000 Shares	191,751	188,417
Daimler Finance Na LLC	160,000 Shares	159,938	160,165
DBUBS Mortgage Trust	172,000 Shares	192,741	186,606
Denso Corpnv	14,700 Shares	555,310	638,111
Deutsche Bank London	115,000 Shares	122,088	117,721
Diamond 1 FIN/Diamond 2	150,000 Shares	163,875	166,527
Diamondback Energy Inc	174,000 Shares	174,300	170,520
Discover Card Execution Note T	1,100,000 Shares	1,116,801	1,107,381
Discover Card Master Trust	125,000 Shares	131,138	128,781
Dollar Tree Inc.	166,000 Shares	174,923	175,764
Duke Capital Corp	152,000 Shares	175,548	172,885
Duke Realty LP	73,000 Shares	72,321	70,598
Duke University	215,000 Shares	215,000	194,904
Ebay Inc	40,000 Shares	39,756	40,017
Energy Transfer Partners	176,000 Shares	183,918	181,956
Enlink Midstream Partner	170,000 Shares	169,731	154,114
Enterprise Products Oper	90,000 Shares	99,151	92,822
Enterprise Products Oper	150,000 Shares	174,783	169,335
Erac Usa Finance Company	325,000 Shares	314,148	296,992
Essilor Intl Eur .35 Rfd	6,149 Shares	593,398	696,237
Experian Plc USD 0.10	18,900 Shares	354,974	367,589
Exxon Mobil Corporation	245,000 Shares	245,137	244,993
Fanuc Co Jpy Ords	4,600 Shares	739,017	781,489
Fifth Third Auto Trust	200,000 Shares	200,456	200,198
Fifth Third Auto Trust	109,394 Shares	109,176	109,316
First Data Corporation	234,000 Shares	237,784	235,245
Ford Credit Auto Owner Trust	17,303 Shares	17,317	17,299
Ford Credit Auto Owner Trust	187,158 Shares	187,506	187,233
Ford Credit Auto Owner Trust/F	750,000 Shares	764,678	756,270

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Ford Motor Company	145,000 Shares	\$ 195,486	\$ 181,982
Ford Motor Credit Co LLC	355,000 Shares	355,315	355,273
Fortive Corporation	106,000 Shares	106,571	104,956
GAIF Bond Issuer P/L	167,000 Shares	166,621	157,599
GE Capital Credit Card Master	170,000 Shares	172,464	171,131
General Elec Cap Corp	160,000 Shares	231,483	225,590
General Electric Co	165,000 Shares	156,738	171,221
General Motors Finl Co	175,000 Shares	174,083	175,527
Glaxosmithkline Capital	110,000 Shares	110,538	110,163
Goldman Sachs Group Inc	165,000 Shares	208,004	204,529
Goldman Sachs Group Inc	160,000 Shares	161,812	160,952
Goldman Sachs Group Inc	456,000 Shares	461,481	460,359
GS Mortgage Securities Corp II	605,216 Shares	689,024	661,537
GS Mortgage Securities Trust	183,000 Shares	188,490	186,272
GS Mtg Secs Tr	183,000 Shares	198,555	193,155
Hartford Finl Svcs Grp	65,000 Shares	66,380	65,527
HCP Inc	230,000 Shares	224,446	228,634
Health Care Reit Inc	42,000 Shares	45,647	45,295
Healthcare Trust Of Amer	220,000 Shares	219,232	219,701
Healthcare Trust Of Amer	110,000 Shares	111,979	110,780
Hennes + Mauritz Sek 0.25	14,500 Shares	520,658	404,454
Hess Corp	196,000 Shares	195,588	195,102
HollyFrontier Corp	168,000 Shares	168,165	171,681
HomeDepot Inc	133,000 Shares	171,602	168,027
Honda Auto Receivables Owner T	200,000 Shares	200,469	199,512
Honda Auto Receivables Owner T	110,000 Shares	109,996	110,021
Hong Kg & China Gas Co Ltd Hkd.25	337,142 Shares	548,373	597,477
Horace Mann Educators Co	179,000 Shares	179,447	178,554
Host Hotels & Resorts	190,000 Shares	191,003	186,527
HSBC USA Inc	160,000 Shares	159,315	159,720
Humana Inc	155,000 Shares	166,921	162,916
Huntington Auto Trust	95,000 Shares	94,996	94,967
Huntington National Bank	285,000 Shares	284,176	285,123
Hyundai Auto Receivables Trust	51,966 Shares	51,910	51,958
Hyundai Auto Receivables Trust	215,000 Shares	216,058	215,088
Hyundai Capital America	226,000 Shares	225,973	226,942
Indiana Michigan Power	175,000 Shares	174,744	181,505
Industria De Diseno Textil Eur	20,000 Shares	461,710	684,112
International Paper Co	180,000 Shares	179,818	170,102
Interpublic Group COS	189,000 Shares	190,089	194,198
Istar Financial Inc	175,000 Shares	173,408	175,875
John Deere Owner Trust	12,437 Shares	12,441	12,435
John Deere Owner Trust	130,866 Shares	130,879	130,911
JPMorgan Chase Commercial Mor	719,000 Shares	771,465	753,620
JPMorgan Chase Commercial Mor	151,000 Shares	155,530	155,821
JPMorgan Chase Commercial Mortgage	82,892 Shares	87,762	82,835

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
JPMorgan Chase & Co	165,000 Shares	\$ 176,055	\$ 170,858
JPMorgan Chase & Co	195,000 Shares	195,004	194,750
JPMorgan Chase & Co	243,000 Shares	242,830	245,877
JPMorgan Chase & Co	257,000 Shares	284,414	270,698
Keyence Co Jpy Ords	1,500 Shares	389,607	1,031,423
Kimco Realty Corp	131,000 Shares	130,708	132,936
KKR Group Finance Co Iii	170,000 Shares	173,181	160,507
Komatsu Jpy 50.0	2,900 Shares	60,596	65,827
L'oreal Sa Eur 0.2	3,900 Shares	492,610	713,287
Lear Corp	163,000 Shares	169,862	170,539
LeHigh University	395,000 Shares	395,000	344,381
Level 3 Financing Inc	175,000 Shares	183,531	179,375
Liberty Mutual Group	160,000 Shares	197,600	180,000
Loews Corp	111,000 Shares	110,760	112,834
Lvmh Moet Hennessy Loui Eur 0.3 Rfd	4,266 Shares	754,954	816,223
Magellan Midstream Partn	165,000 Shares	192,492	182,601
Marriott International	100,000 Shares	104,706	102,172
Masco Corp	149,000 Shares	148,291	150,490
Mass Mutual Life Ins Co	115,000 Shares	180,522	172,633
McDonalds Corp	140,000 Shares	140,867	140,832
Medtronic Inc	160,000 Shares	169,336	169,269
Mercedes-Benz Auto Receivables	85,000 Shares	84,997	84,978
Mercedes-Benz Auto Receivables Trust	44,282 Shares	44,281	44,268
Merck & Co Inc	143,000 Shares	147,690	136,356
Merrill Lynch Mortgage Trust	108,474 Shares	111,559	110,620
Merrill Lynch/Countrywide Comm	640,842 Shares	693,943	648,622
Merrill Lynch/Countrywide Comm Mtg	597,152 Shares	616,349	600,962
Met Life Glob Funding I	160,000 Shares	193,210	178,982
Microsoft Corp	161,000 Shares	160,399	175,118
Morgan Stanley	130,000 Shares	130,248	130,517
Morgan Stanley	509,000 Shares	509,030	486,288
Morgan Stanley BAML Trust	520,000 Shares	535,587	532,704
Morgan Stanley Capital I	62,000 Shares	66,410	62,323
Morgan Stanley Capital I	541,228 Shares	581,134	549,769
Morgan Stanley Capital I	208,421 Shares	222,547	215,935
Morgan Stanley Capital I Trust	230,000 Shares	236,892	227,005
Morgan Stanley Capital I Trust	267,000 Shares	286,556	276,083
MUFG Americas Hldgs Corp	120,000 Shares	120,067	119,579
National Rural Util Coop	75,000 Shares	74,953	74,941
Natl City Corp	158,000 Shares	178,273	173,909
Nestle Sa Chf 0.1	8,400 Shares	525,865	603,749
New York University	720,000 Shares	709,315	698,177
Newfield Exploration Co	82,000 Shares	85,280	86,408
Nextera Energy Capital	85,000 Shares	85,119	85,050
Nextera Energy Capital	30,000 Shares	30,075	29,906
Nissan Auto Receivables Owner	69,411 Shares	69,406	69,380

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Nissan Auto Receivables Owner	159,399 Shares	\$ 159,505	\$ 159,353
Noble Holding intl LTD	58,000 Shares	56,695	57,783
Novartis Ag Chf 0.5	10,050 Shares	870,682	732,725
Novo Nordisk A/s Dkk 0.2	11,850 Shares	379,096	428,140
Nustar Logistics LP	150,000 Shares	146,805	148,500
Occidental Petroleum Cor	180,000 Shares	179,242	174,164
Old Republic Intl Corp	195,000 Shares	204,762	203,172
O'Reilly Automotive Inc	205,000 Shares	207,167	203,659
Pacific Lifecorp	180,000 Shares	196,805	183,983
Penske Truck Leasing/PTL	218,000 Shares	217,335	208,576
Pepsico Inc	181,000 Shares	179,527	164,889
Phillips 66	150,000 Shares	176,976	177,609
Premier Health Partners	271,000 Shares	271,000	249,621
Progress Energy Inc	145,000 Shares	148,062	146,311
Prologis LP	162,000 Shares	162,002	165,997
Prudential Financial Inc	170,000 Shares	200,940	183,600
Rabobank Nederland Utrec	150,000 Shares	156,600	150,137
Realty Income Corp	85,000 Shares	87,876	87,190
Reckitt Benckiser Place Gbp	8,000 Shares	455,918	680,695
Regency Energy Partners	171,000 Shares	182,858	176,605
Reliance Stand Life Ii	185,000 Shares	184,867	185,919
Reynolds American Inc	194,000 Shares	199,394	229,721
Roche Hldgs Ag Genussscheine	2,300 Shares	431,909	526,374
Roper Technologies Inc	118,000 Shares	117,981	118,910
Royal Bank Of Canada	160,000 Shares	159,556	159,786
Royal Bk Scotland Group Plc	170,000 Shares	177,931	173,113
Santander UK PLC	160,000 Shares	160,466	160,043
Santander Drive Auto Receivabl	750,000 Shares	754,248	751,575
Santander Drive Auto Receivabl	257,000 Shares	256,970	257,890
Santander Drive Auto Receivabl	845,000 Shares	844,954	849,859
Sgs Sa Chf 1.0	220 Shares	461,116	448,507
Shell International Fin	83,000 Shares	90,624	86,555
Shin-etsu Chemical Co Ltd Npv	12,100 Shares	663,754	940,633
Simon Property Group LP	137,000 Shares	136,551	135,160
Southern Power Co	120,000 Shares	120,056	120,317
Spectrum Brands Inc	165,000 Shares	176,550	171,188
Spirit Realty LP	237,000 Shares	235,526	223,337
Sprint Spectrum/Spec I	283,000 Shares	285,123	283,529
Sumitomo Mitsui Finl Grp	208,000 Shares	210,768	209,090
Suncor Energy Inc New Npv	23,617 Shares	722,277	773,115
Symetra Finl Corp	195,000 Shares	201,014	192,685
Syngenta Ag	798 Shares	281,634	316,028
Teck Resources Limited	250,000 Shares	275,313	275,000
Thomson Reuters Corp	80,000 Shares	79,723	80,003
Thomson Reuters Corp	20,000 Shares	20,085	20,022
Tiaa Asset Mgmt Fin LLC	270,000 Shares	275,821	274,660

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Time Warner Inc	157,000 Shares	\$ 179,787	\$ 157,171
T-Mobile USA Inc	132,000 Shares	137,940	139,260
Toronto-Dominion Bank	160,000 Shares	159,982	159,614
Toronto-Dominion Bank	252,000 Shares	252,408	253,033
Toyota Auto Receivables Owner	190,000 Shares	190,920	190,205
Toyota Auto Receivables Owner	85,000 Shares	84,993	84,837
Toyota Auto Receivables Owner	21,549 Shares	21,548	21,544
Transatlantic Holdings	135,000 Shares	185,209	171,970
United Rentals North Am	151,000 Shares	155,563	158,550
Unitedhealth Group Inc	55,000 Shares	54,990	55,089
Unitedhealth Group Inc	143,000 Shares	142,914	145,152
USAA Auto Owner Trust	210,000 Shares	210,472	210,145
US Bancorp	172,000 Shares	180,388	173,020
Validus Holdings Ltd	96,000 Shares	132,531	125,953
Verisk Analytics Inc	165,000 Shares	188,946	183,596
Verizon Communications	253,000 Shares	315,897	315,992
Vodafone Group PLC	120,000 Shares	120,377	120,024
Volkswagen Auto Loan Enhanced	24,952 Shares	24,899	24,928
Volkswagen Auto Loan Enhanced	63,273 Shares	63,219	63,190
Volkswagen Auto Loan Enhanced	431,944 Shares	431,809	431,378
VR National Rural Ut 4.75	190,000 Shares	192,850	191,039
VR Toronto-Dominion	257,000 Shares	254,839	251,045
Walgreens Boots Alliance	60,000 Shares	59,982	60,150
Waste Management Inc	160,000 Shares	155,454	158,347
Weingarten Realty Invest	80,000 Shares	79,324	75,470
Wells Fargo & Company	165,000 Shares	164,782	164,802
Wells Fargo & Company	180,000 Shares	179,640	179,923
Wells Fargo Commercial Mortgag	257,000 Shares	264,702	268,419
Wells Fargo Commercial Mortgage	551,000 Shares	567,505	570,573
West Fraser Timber Co	235,000 Shares	229,929	218,531
Westpac Banking Corp	160,000 Shares	161,426	161,034
Westpac Banking Corp	163,000 Shares	163,000	163,520
WF-RBS Commercial Mortgage Trust	87,000 Shares	95,279	94,839
Williams Partners LP	223,000 Shares	189,097	218,709
WPP Finance 2010	171,000 Shares	180,142	174,853
Xcel Energy Inc	105,000 Shares	104,925	104,900
Xlit Ltd	45,000 Shares	45,652	45,297
Xlit Ltd	155,000 Shares	155,512	153,693

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Commingled Funds			
Wellington CTF DIH	912,021 Shares	\$ 12,813,048	\$ 10,880,408
Real Estate Investment fund			
UBS (US) Trumbull Property Income	1,411 Shares	14,297,019	17,101,041
Real Estate Investment Trust fund			
RREEF America REIT II, INC LLC	169,841 Shares	15,180,319	19,602,407
		<u>346,080,825</u>	<u>379,766,282</u>
Investment Contract With Insurance Company			
* Lincoln National Life		<u>2,808,400</u>	<u>2,808,400</u>
		<u>\$ 348,889,225</u>	<u>\$ 382,574,682</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, 2016

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Blackrock Short-term Investment Fund	\$ 61,993,081	\$ -	\$ -	\$ 61,993,081	\$ 61,993,081	\$ -
Blackrock Short-term Investment Fund	-	61,074,874	-	61,074,874	61,074,874	-

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 1/180 for each month of the first 60 months plus 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.

Summary of Changes from the January 1, 2015 Valuation

None.

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds			
Clark Cnty NV Sch Dist	250,000 Shares	\$ 257,888	\$ 255,110
Massachusetts St	400,000 Shares	403,320	402,136
New York NY	120,000 Shares	123,936	122,827
New York St. Dorm Auth Revenues	75,000 Shares	76,139	75,773
American Funds Capital World Grow	693,952 Shares	29,644,777	30,408,979
Dodge & Cox Global Stock Fund	2,669,895 Shares	23,877,432	31,798,449
PIMCO All Asset Fd Institutional	1,215,876 Shares	14,493,274	13,557,018
JPM Core Bond Trust	6,798,004 Shares	72,471,462	69,883,478
California St	720,000 Shares	718,510	717,790
CmwltH Fing Auth PA	85,000 Shares	85,000	82,504
Energy N W WA Elec Revenue	530,000 Shares	526,465	528,373
Houston TX Utility Sys Revenue	500,000 Shares	528,315	524,495
Illinois St Sales Tax Revenue	230,000 Shares	227,813	215,503
Met Govt Nashville & Davidson	310,000 Shares	310,000	298,431
New York City NY Transitional F	725,000 Shares	740,029	722,680
New York NY	720,000 Shares	718,078	718,783
New York St Dorm Auth St Perso	720,000 Shares	731,369	724,133
Seattle WA	605,000 Shares	605,000	604,564
Univ of California CA Revenues	520,000 Shares	529,901	525,715
* Money Market Funds			
Wells Fargo Short-Term			
Investment Fund	5,045,206 Shares	5,045,206	5,045,206
Commercial Paper	475,000 Shares	471,372	471,372
Net Cash	345,040 Shares	345,040	345,088
Common Stocks			
Abbvie Inc	10,165 Shares	442,707	636,532
Adobe Sys Inc	9,000 Shares	294,176	926,550
Advance Auto Pts Inc	3,282 Shares	483,106	555,052
Air Methods Corp Com	7,697 Shares	316,143	245,149
Akamai Technologies	14,100 Shares	618,334	940,188
Align Technology Inc	7,500 Shares	259,676	720,975
Allergan Plc	3,010 Shares	875,324	632,130
Alphabet Inc Cl A	310 Shares	109,901	245,660
Alphabet Inc Cl C	1,114 Shares	729,307	859,807
Alphabet Inc Cl C	561 Shares	197,707	432,991
American International Group, Inc	12,915 Shares	628,397	843,479
Ameriprise Finl Inc	4,715 Shares	417,742	523,082
Ametek Inc Com	9,696 Shares	456,488	471,226
Amphenol Corp Cl A	12,000 Shares	585,245	806,400
Anadarko Petroleum Corp	6,885 Shares	533,515	480,091
Apple Inc	13,229 Shares	1,303,215	1,532,183
Applied Materials Inc	19,685 Shares	364,805	635,235

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Autodesk Inc	16,300 Shares	\$ 568,592	\$ 1,206,363
Automatic Data Processing Inc	8,800 Shares	455,877	904,464
BB&T Corp Com	7,929 Shares	303,231	372,822
Blackrock Inc	1,380 Shares	285,363	525,145
Boeing Co	5,720 Shares	489,070	890,490
Cabelas Inc	8,500 Shares	415,988	497,675
CEB Inc	7,100 Shares	367,313	430,260
Cerner Corp Com	6,000 Shares	374,987	284,220
Cheesecake Factory Inc Com	5,500 Shares	220,281	329,340
Chubb Limited	3,605 Shares	412,302	476,293
Cisco Systems Inc	25,100 Shares	480,293	758,522
Citizens Financial Group Inc	14,530 Shares	352,133	517,704
CME Group Ince	6,365 Shares	475,058	734,203
Cognex Corp	8,200 Shares	287,025	521,684
Cognizant Tech Solutions Crp Com	12,200 Shares	756,371	683,566
Colgate Palmolive Co	9,500 Shares	506,430	621,680
Comcast Corp Class A	10,379 Shares	621,125	716,670
Core Laboratories N V Com	3,000 Shares	301,076	360,120
Cypress Semiconductor Corp	13,150 Shares	151,451	150,436
Danaher Corp	5,917 Shares	453,524	460,579
Dentsply Sirona Inc	7,797 Shares	480,181	450,121
Discover Financial Services	6,830 Shares	489,316	492,375
Dolby Laboratories Inc	6,400 Shares	207,186	289,216
Du Pont E I De Nemours & Co	6,955 Shares	338,333	510,497
E*trade Group	13,800 Shares	188,037	478,170
Ecolab Inc	3,250 Shares	246,151	380,965
Edwards Lifesciences Corp	18,600 Shares	952,839	1,742,820
EOG Resources, Inc	9,700 Shares	570,282	980,670
Ethan Allen Interiors Inc Com	17,700 Shares	443,237	652,245
F5 Networks Inc	4,340 Shares	407,759	628,085
Factset Resh Sys Inc Com	5,500 Shares	570,703	898,865
Fidelity Natl Information Svcs Inc	8,105 Shares	397,740	613,062
First Data Corporation	25,925 Shares	371,450	367,876
Garmin Ltd	12,900 Shares	530,579	625,521
General Electric Co	25,090 Shares	628,610	792,844
Gentex Corp	38,000 Shares	407,134	748,220
Genuine Parts Co	3,920 Shares	262,064	374,517
Gilead Sciences Inc	6,600 Shares	684,364	472,626
Graco Inc	4,100 Shares	212,983	340,669
Grainger W W Inc	1,300 Shares	316,310	301,925
Hexcel Corp New Com	9,365 Shares	385,573	481,736
Home Depot Inc	3,745 Shares	339,529	502,130
IHS Market LTD	7,113 Shares	233,875	251,871
Ingersoll-rand PLC	8,720 Shares	394,203	654,349
Intuit Com	14,275 Shares	954,259	1,636,058
Intuitive Surgical Inc	1,400 Shares	634,777	887,838

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Intuitive Surgical Inc	1,340 Shares	\$ 556,782	\$ 849,788
Jacobs Engr Group Inc	5,335 Shares	255,924	304,095
Jetblue Awys Corp	29,500 Shares	158,923	661,390
Jm Smucker Co	2,995 Shares	364,920	383,540
Johnson & Johnson	7,000 Shares	474,362	806,470
L Brands Inc	12,100 Shares	606,267	796,664
Landstar Sys Inc Com	8,000 Shares	400,554	682,400
Marsh & McLennan Cos Inc	6,430 Shares	248,187	434,604
Martin Marietta Matls Inc Com	2,200 Shares	386,473	487,366
Mastercard Inc	8,000 Shares	348,133	826,000
McKesson Corp	4,398 Shares	849,230	617,699
Medidata Solutions Inc	500 Shares	16,789	24,835
Microchip Technology Inc Com	8,300 Shares	287,223	532,445
Microsoft Corp	20,550 Shares	695,758	1,276,977
Microsoft Corp	16,300 Shares	502,075	1,012,882
Middleby Corp	12,400 Shares	1,115,606	1,596,738
Myriad Genetics Inc Com	11,600 Shares	424,750	193,372
Nike Inc Cl B	13,800 Shares	342,763	701,454
Occidental Pete Corp	7,670 Shares	598,682	546,334
Open Text Corporation	20,750 Shares	673,435	1,282,558
Oracle Corporation	18,925 Shares	626,952	727,666
Oracle Corporation	20,200 Shares	657,225	776,690
Paychex Inc	5,600 Shares	202,135	340,928
Pepsico Inc	6,730 Shares	564,852	704,160
Plantronics Inc Com	13,175 Shares	510,587	721,463
Plexus Corp Com	22,600 Shares	720,027	1,221,304
Power Intergrations Inc Com	8,300 Shares	374,983	563,155
PPL Corporation	8,707 Shares	299,428	296,473
Praxair Inc Com	5,700 Shares	621,164	667,983
Proctor & Gamble Co	7,907 Shares	687,202	664,821
Proto Labs Inc	7,100 Shares	314,568	364,585
Ralph Lauren Corporation	3,400 Shares	504,597	307,088
Realpage Inc	14,200 Shares	247,156	426,000
Rockwell Collins	3,255 Shares	210,105	301,934
Royal Caribbean Cruise	10,300 Shares	481,333	845,012
Sabre Corp	6,082 Shares	155,451	151,746
Schlumberger Ltd	8,700 Shares	641,869	730,365
Seagate Technology	19,100 Shares	625,712	729,047
Seagate Technology	21,324 Shares	782,440	813,937
Select Comfort Corporation	21,200 Shares	596,219	479,544
Southwestern Energy Co Com	37,400 Shares	404,284	404,668
Starbucks Corp Com	12,837 Shares	653,236	712,710
Stryker Corp	9,100 Shares	491,646	1,090,271
Super Micro Computer Inc	15,500 Shares	454,458	434,775
Synaptics Inc	4,900 Shares	335,950	262,542

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Taiwan Semiconductor Manufacture	38,800 Shares	\$ 564,114	\$ 1,115,500
TCF Financial	15,700 Shares	187,967	307,563
Time Warner Inc	5,632 Shares	277,333	543,657
TJX Companies Inc	22,100 Shares	1,101,441	1,660,373
TJX Companies Inc	6,380 Shares	332,214	479,329
TJX Companies Inc	9,900 Shares	448,917	743,787
Tripadvisor Inc	4,100 Shares	277,669	190,117
Ubiquiti Networks Inc	10,600 Shares	333,374	612,680
Ultra Petroleum Corp	83,300 Shares	544,021	602,259
Unitedhealth Group Inc	6,605 Shares	460,974	1,057,064
Universal Display Corp	6,175 Shares	327,790	347,653
Urban Outfitters Incorporated	7,700 Shares	263,534	219,296
US Bancorp	10,504 Shares	429,352	539,590
Varian Med Sys Inc	6,900 Shares	447,326	619,482
Vectren Corp	7,830 Shares	262,969	408,335
Viasat Inc	2,000 Shares	75,370	132,440
Visa Inc-Class A Shrs	10,157 Shares	461,202	792,449
Visteon Corp/New	5,060 Shares	319,233	406,520
Walt Disney Co	6,500 Shares	611,997	677,430
Yahoo Inc Com	18,100 Shares	461,267	699,927
U.S. Government and Agency Obligations			
Fed Home LN MTG Corp	51,186 Shares	51,882	51,236
Fed Home LN MTG Corp	44,063 Shares	45,179	44,611
Fed Home LN MTG Corp	190,727 Shares	192,083	191,350
Fed Home LN MTG Corp	35,533 Shares	35,843	35,571
Fed Home LN MTG Corp	380,474 Shares	394,029	386,908
Fed Home LN MTG Corp	58,102 Shares	61,361	59,479
Fed Home LN MTG Corp	813,606 Shares	898,017	875,749
Fed Home LN MTG Corp	39,023 Shares	40,645	39,591
Fed Home LN MTG Corp Pool #C91874	407,440 Shares	443,473	433,039
Fed Home LN MTG Corp Pool #C91875	565,108 Shares	597,249	585,797
Fed Home LN MTG Corp Pool #G18558	723,373 Shares	764,176	756,966
Fed Natl MTG Assn	40,042 Shares	40,373	40,006
Fed Natl MTG Assn	43,959 Shares	45,113	44,427
Fresb Multifamily Mortgage Pas	229,917 Shares	230,971	225,295
Fed Natl MTG Assn Pool #AI8401	464,467 Shares	521,945	509,827
Fed Natl MTG Assn Pool #AP0495	1,134,982 Shares	1,193,859	1,170,394
Fed Natl MTG Assn Pool #AS4170	587,590 Shares	628,629	617,868
Fed Natl MTG Assn Pool #AS7568	475,016 Shares	522,592	511,982
Fed Natl MTG Assn Pool #MA1107	472,392 Shares	501,843	491,326
Fed Natl MTG Assn Pool #MA2028	267,634 Shares	292,391	287,927
Fed Natl MTG Assn Pool #MA2158	949,746 Shares	1,037,894	1,022,135
Fed Natl MTG Assn Pool #MA2211	1,056,006 Shares	1,141,147	1,122,365
Fed Natl MTG Assn Pool #MA2260	392,570 Shares	413,425	407,978
Fed Natl MTG Assn Pool #MA2279	635,894 Shares	682,394	668,916

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
U.S. Government and Agency Obligations			
Fhlmc Multifamily Structured P	595,000 Shares	\$ 612,846	\$ 577,858
Govt Natl MTG Assn	17,884 Shares	18,398	18,109
Govt Natl MTG Assn Pool #711067	339,327 Shares	382,678	373,033
Small Business Administration	398,254 Shares	398,254	398,529
U.S. Treasury Bond	1,568,800 Shares	1,736,633	1,589,571
U.S. Treasury Inflation Index Bond	586,126 Shares	498,687	551,509
U.S. Treasury Inflation Index Bond	1,279,413 Shares	1,264,536	1,272,466
U.S. Treasury Note	160,000 Shares	160,300	160,150
U.S. Treasury Note	395,000 Shares	396,748	395,616
U.S. Treasury Note	665,000 Shares	665,886	665,705
U.S. Treasury Note	97,100 Shares	98,014	96,475
U.S. Treasury Note	121,800 Shares	121,719	121,401
U.S. Treasury Note	155,000 Shares	156,096	155,969
U.S. Treasury Note	400,000 Shares	400,060	400,036
U.S. Treasury Note	315,000 Shares	312,219	312,735
U.S. Treasury Note	240,000 Shares	239,888	239,662
U.S. Treasury Note	790,000 Shares	790,402	789,289
U.S. Treasury Note	475,000 Shares	475,056	474,221
U.S. Treasury Note	830,000 Shares	833,608	829,386
U.S. Treasury Note	710,000 Shares	711,969	707,948
U.S. Treasury Note	680,000 Shares	681,679	679,735
Corporate Bonds			
Abbvie Inc	256,000 Shares	257,893	252,864
Actavis Funding SCS	241,000 Shares	247,884	241,284
Aetna Inc	80,000 Shares	80,554	79,926
Aercap Ireland Cap LTD/A	170,000 Shares	172,217	174,675
Aia Group Ltd Usd 1.0	125,600 Shares	537,116	708,744
Alexandria Real Estate E	227,000 Shares	223,786	226,476
Ally Financial Inc	200,000 Shares	198,874	201,500
American Express	35,000 Shares	38,511	37,194
American Express Credit	115,000 Shares	115,850	115,148
American Express Credit Accoun	235,000 Shares	236,382	235,390
American Express Credit Accoun	365,000 Shares	366,269	366,135
American Financial Group	100,000 Shares	99,608	95,779
American Honda Finance	90,000 Shares	89,918	89,915
American Honda Finance	70,000 Shares	69,971	69,851
American Tower Corp	116,000 Shares	125,901	124,482
Amphenol Corp	115,000 Shares	115,062	115,116
Anheuser-Busch Inbev Fin	349,000 Shares	374,389	377,224
Arch Capital Finance LLC	120,000 Shares	120,000	125,807
Aspen Insurance Hldg Ltd	245,000 Shares	255,939	252,169
Assoc Banc-Corp	292,000 Shares	296,056	292,750
AT&T Inc	150,000 Shares	161,052	161,285
AT&T Inc	105,000 Shares	104,805	104,268
AT&T Inc	352,000 Shares	355,507	345,527

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Athene Global Funding	200,000 Shares	\$ 199,864	\$ 199,926
Bank of America Credit Card TR	100,000 Shares	100,148	100,251
Bank of America Credit Card TR	160,000 Shares	160,050	159,926
Bank Of America Corp	165,000 Shares	177,293	169,738
Bank Of America Corp	155,000 Shares	190,087	187,341
Bank Of America Corp	195,000 Shares	194,475	195,449
Bank Of America Corp	178,000 Shares	179,483	179,593
Bank Of America Corp	400,000 Shares	456,220	425,165
Bank Of Nova Scotia	207,000 Shares	206,574	206,151
Bank Of Nova Scotia	165,000 Shares	163,493	163,489
Berkshire Hathaway Inc	148,000 Shares	147,597	147,445
BMW Vehicle Owner Trust	180,000 Shares	179,953	179,775
BNP Paribas	155,000 Shares	158,110	156,217
Boston Properties LP	147,000 Shares	166,885	162,128
Boston Scientific Corp	191,000 Shares	186,618	194,138
Bp Capital Markets Plc	190,000 Shares	190,657	189,892
Brixmor Operating Part	121,000 Shares	120,187	120,635
Buckeye Partners LP	144,000 Shares	143,487	140,142
Burlingtn North Santa Fe	140,000 Shares	154,928	156,705
Cablevision Systems Corp	178,000 Shares	172,959	173,550
California Institute of	178,000 Shares	178,153	149,449
Capital One Financial Co	120,000 Shares	120,679	120,760
Capital One Financial Co	190,000 Shares	186,151	184,156
Capital One Multi-asset Execut	190,000 Shares	188,909	189,799
Capital One Multi-asset Execut	220,000 Shares	219,304	219,540
Capital One Multi-asset Execut	810,000 Shares	813,006	813,289
Carmax Auto Owner Trust	1,100,000 Shares	1,099,970	1,100,297
Carmax Auto Owner Trust	360,000 Shares	359,946	357,617
Carnival Corp	80,000 Shares	80,755	80,321
Caterpillar Inc	100,000 Shares	100,136	99,963
CBRE Services Inc	298,000 Shares	316,177	307,286
CD 2016-CD2 Mtg Tr	416,000 Shares	428,469	427,710
Centerpoint Energy Transition	21,397 Shares	21,400	21,389
CFCRE Commerical Mortgage Trus	255,000 Shares	262,648	263,451
Charter Comm Opt LLC/CAP	321,000 Shares	382,360	371,102
Chase Issuance Trust	720,000 Shares	745,791	736,747
Chase Issuance Trust	235,000 Shares	236,625	235,670
Chase Issuance Trust	495,000 Shares	494,917	485,852
China Mobile Ltd Hkd 0.1	59,500 Shares	626,922	630,827
Cisco Systems Inc	150,000 Shares	150,000	150,258
CIT Group Inc	210,000 Shares	214,330	212,888
Citibank Credit Card Issuance	210,000 Shares	212,100	210,804
Citigroup Commercial Mortgage	719,000 Shares	774,133	725,234
Citigroup Commercial Mortgage	479,000 Shares	493,558	487,828
Citigroup Inc	235,000 Shares	242,404	238,725
Citigroup Inc	190,000 Shares	189,814	189,894

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Citigroup Inc	301,000 Shares	\$ 305,726	\$ 307,938
CMS Energy Corp	200,000 Shares	219,078	209,102
Cnooc Ltd Hkd 0.02	58,300 Shares	917,023	729,394
Comcast Corp	240,000 Shares	249,641	245,153
Comm Mortgage Trust	719,000 Shares	786,631	767,971
Comm Mortgage Trust	129,000 Shares	135,880	137,208
Commercial Mortgage Pass-throu	46,085 Shares	48,821	46,046
Commercial Mortgage Pass-throu	622,354 Shares	675,071	627,382
Commercial Mortgage Pass-throu	132,000 Shares	141,936	138,226
Compass Group 10.625p	36,200 Shares	589,843	671,406
Continental Resources	29,000 Shares	29,000	29,272
Continental Resources	185,000 Shares	180,471	181,300
COTT Beverages Inc	171,000 Shares	179,550	177,199
Credit Suisse Mortgage Capital	189,000 Shares	196,603	192,823
Credit Suisse Mortgage Capital Cert	204,089 Shares	209,890	204,875
Crown Castle Intl Corp	170,000 Shares	172,470	175,880
CSL Ltd NPV	10,600 Shares	481,274	770,696
Cubalmart	175,000 Shares	191,751	188,417
Daimler Finance Na LLC	160,000 Shares	159,938	160,165
DBUBS Mortgage Trust	172,000 Shares	192,741	186,606
Denso Corpnv	14,700 Shares	555,310	638,111
Deutsche Bank London	115,000 Shares	122,088	117,721
Diamond 1 FIN/Diamond 2	150,000 Shares	163,875	166,527
Diamondback Energy Inc	174,000 Shares	174,300	170,520
Discover Card Execution Note T	1,100,000 Shares	1,116,801	1,107,381
Discover Card Master Trust	125,000 Shares	131,138	128,781
Dollar Tree Inc.	166,000 Shares	174,923	175,764
Duke Capital Corp	152,000 Shares	175,548	172,885
Duke Realty LP	73,000 Shares	72,321	70,598
Duke University	215,000 Shares	215,000	194,904
Ebay Inc	40,000 Shares	39,756	40,017
Energy Transfer Partners	176,000 Shares	183,918	181,956
Enlink Midstream Partner	170,000 Shares	169,731	154,114
Enterprise Products Oper	90,000 Shares	99,151	92,822
Enterprise Products Oper	150,000 Shares	174,783	169,335
Erac Usa Finance Company	325,000 Shares	314,148	296,992
Essilor Intl Eur .35 Rfd	6,149 Shares	593,398	696,237
Experian Plc USD 0.10	18,900 Shares	354,974	367,589
Exxon Mobil Corporation	245,000 Shares	245,137	244,993
Fanuc Co Jpy Ords	4,600 Shares	739,017	781,489
Fifth Third Auto Trust	200,000 Shares	200,456	200,198
Fifth Third Auto Trust	109,394 Shares	109,176	109,316
First Data Corporation	234,000 Shares	237,784	235,245
Ford Credit Auto Owner Trust	17,303 Shares	17,317	17,299
Ford Credit Auto Owner Trust	187,158 Shares	187,506	187,233
Ford Credit Auto Owner Trust/F	750,000 Shares	764,678	756,270

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Ford Motor Company	145,000 Shares	\$ 195,486	\$ 181,982
Ford Motor Credit Co LLC	355,000 Shares	355,315	355,273
Fortive Corporation	106,000 Shares	106,571	104,956
GAIF Bond Issuer P/L	167,000 Shares	166,621	157,599
GE Capital Credit Card Master	170,000 Shares	172,464	171,131
General Elec Cap Corp	160,000 Shares	231,483	225,590
General Electric Co	165,000 Shares	156,738	171,221
General Motors Finl Co	175,000 Shares	174,083	175,527
Glaxosmithkline Capital	110,000 Shares	110,538	110,163
Goldman Sachs Group Inc	165,000 Shares	208,004	204,529
Goldman Sachs Group Inc	160,000 Shares	161,812	160,952
Goldman Sachs Group Inc	456,000 Shares	461,481	460,359
GS Mortgage Securities Corp II	605,216 Shares	689,024	661,537
GS Mortgage Securities Trust	183,000 Shares	188,490	186,272
GS Mtg Secs Tr	183,000 Shares	198,555	193,155
Hartford Finl Svcs Grp	65,000 Shares	66,380	65,527
HCP Inc	230,000 Shares	224,446	228,634
Health Care Reit Inc	42,000 Shares	45,647	45,295
Healthcare Trust Of Amer	220,000 Shares	219,232	219,701
Healthcare Trust Of Amer	110,000 Shares	111,979	110,780
Hennes + Mauritz Sek 0.25	14,500 Shares	520,658	404,454
Hess Corp	196,000 Shares	195,588	195,102
HollyFrontier Corp	168,000 Shares	168,165	171,681
HomeDepot Inc	133,000 Shares	171,602	168,027
Honda Auto Receivables Owner T	200,000 Shares	200,469	199,512
Honda Auto Receivables Owner T	110,000 Shares	109,996	110,021
Hong Kg & China Gas Co Ltd Hkd.25	337,142 Shares	548,373	597,477
Horace Mann Educators Co	179,000 Shares	179,447	178,554
Host Hotels & Resorts	190,000 Shares	191,003	186,527
HSBC USA Inc	160,000 Shares	159,315	159,720
Humana Inc	155,000 Shares	166,921	162,916
Huntington Auto Trust	95,000 Shares	94,996	94,967
Huntington National Bank	285,000 Shares	284,176	285,123
Hyundai Auto Receivables Trust	51,966 Shares	51,910	51,958
Hyundai Auto Receivables Trust	215,000 Shares	216,058	215,088
Hyundai Capital America	226,000 Shares	225,973	226,942
Indiana Michigan Power	175,000 Shares	174,744	181,505
Industria De Diseno Textil Eur	20,000 Shares	461,710	684,112
International Paper Co	180,000 Shares	179,818	170,102
Interpublic Group COS	189,000 Shares	190,089	194,198
Istar Financial Inc	175,000 Shares	173,408	175,875
John Deere Owner Trust	12,437 Shares	12,441	12,435
John Deere Owner Trust	130,866 Shares	130,879	130,911
JPMorgan Chase Commercial Mor	719,000 Shares	771,465	753,620
JPMorgan Chase Commercial Mor	151,000 Shares	155,530	155,821
JPMorgan Chase Commercial Mortgage	82,892 Shares	87,762	82,835

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
JPMorgan Chase & Co	165,000 Shares	\$ 176,055	\$ 170,858
JPMorgan Chase & Co	195,000 Shares	195,004	194,750
JPMorgan Chase & Co	243,000 Shares	242,830	245,877
JPMorgan Chase & Co	257,000 Shares	284,414	270,698
Keyence Co Jpy Ords	1,500 Shares	389,607	1,031,423
Kimco Realty Corp	131,000 Shares	130,708	132,936
KKR Group Finance Co Iii	170,000 Shares	173,181	160,507
Komatsu Jpy 50.0	2,900 Shares	60,596	65,827
L'oreal Sa Eur 0.2	3,900 Shares	492,610	713,287
Lear Corp	163,000 Shares	169,862	170,539
LeHigh University	395,000 Shares	395,000	344,381
Level 3 Financing Inc	175,000 Shares	183,531	179,375
Liberty Mutual Group	160,000 Shares	197,600	180,000
Loews Corp	111,000 Shares	110,760	112,834
Lvmh Moet Hennessy Loui Eur 0.3 Rfd	4,266 Shares	754,954	816,223
Magellan Midstream Partn	165,000 Shares	192,492	182,601
Marriott International	100,000 Shares	104,706	102,172
Masco Corp	149,000 Shares	148,291	150,490
Mass Mutual Life Ins Co	115,000 Shares	180,522	172,633
McDonalds Corp	140,000 Shares	140,867	140,832
Medtronic Inc	160,000 Shares	169,336	169,269
Mercedes-Benz Auto Receivables	85,000 Shares	84,997	84,978
Mercedes-Benz Auto Receivables Trust	44,282 Shares	44,281	44,268
Merck & Co Inc	143,000 Shares	147,690	136,356
Merrill Lynch Mortgage Trust	108,474 Shares	111,559	110,620
Merrill Lynch/Countrywide Comm	640,842 Shares	693,943	648,622
Merrill Lynch/Countrywide Comm Mtg	597,152 Shares	616,349	600,962
Met Life Glob Funding I	160,000 Shares	193,210	178,982
Microsoft Corp	161,000 Shares	160,399	175,118
Morgan Stanley	130,000 Shares	130,248	130,517
Morgan Stanley	509,000 Shares	509,030	486,288
Morgan Stanley BAML Trust	520,000 Shares	535,587	532,704
Morgan Stanley Capital I	62,000 Shares	66,410	62,323
Morgan Stanley Capital I	541,228 Shares	581,134	549,769
Morgan Stanley Capital I	208,421 Shares	222,547	215,935
Morgan Stanley Capital I Trust	230,000 Shares	236,892	227,005
Morgan Stanley Capital I Trust	267,000 Shares	286,556	276,083
MUFG Americas Hldgs Corp	120,000 Shares	120,067	119,579
National Rural Util Coop	75,000 Shares	74,953	74,941
Natl City Corp	158,000 Shares	178,273	173,909
Nestle Sa Chf 0.1	8,400 Shares	525,865	603,749
New York University	720,000 Shares	709,315	698,177
Newfield Exploration Co	82,000 Shares	85,280	86,408
Nextera Energy Capital	85,000 Shares	85,119	85,050
Nextera Energy Capital	30,000 Shares	30,075	29,906
Nissan Auto Receivables Owner	69,411 Shares	69,406	69,380

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Nissan Auto Receivables Owner	159,399 Shares	\$ 159,505	\$ 159,353
Noble Holding intl LTD	58,000 Shares	56,695	57,783
Novartis Ag Chf 0.5	10,050 Shares	870,682	732,725
Novo Nordisk A/s Dkk 0.2	11,850 Shares	379,096	428,140
Nustar Logistics LP	150,000 Shares	146,805	148,500
Occidental Petroleum Cor	180,000 Shares	179,242	174,164
Old Republic Intl Corp	195,000 Shares	204,762	203,172
O'Reilly Automotive Inc	205,000 Shares	207,167	203,659
Pacific Lifecorp	180,000 Shares	196,805	183,983
Penske Truck Leasing/PTL	218,000 Shares	217,335	208,576
Pepsico Inc	181,000 Shares	179,527	164,889
Phillips 66	150,000 Shares	176,976	177,609
Premier Health Partners	271,000 Shares	271,000	249,621
Progress Energy Inc	145,000 Shares	148,062	146,311
Prologis LP	162,000 Shares	162,002	165,997
Prudential Financial Inc	170,000 Shares	200,940	183,600
Rabobank Nederland Utrec	150,000 Shares	156,600	150,137
Realty Income Corp	85,000 Shares	87,876	87,190
Reckitt Benckiser Place Gbp	8,000 Shares	455,918	680,695
Regency Energy Partners	171,000 Shares	182,858	176,605
Reliance Stand Life Ii	185,000 Shares	184,867	185,919
Reynolds American Inc	194,000 Shares	199,394	229,721
Roche Hldgs Ag Genussscheine	2,300 Shares	431,909	526,374
Roper Technologies Inc	118,000 Shares	117,981	118,910
Royal Bank Of Canada	160,000 Shares	159,556	159,786
Royal Bk Scotland Group Plc	170,000 Shares	177,931	173,113
Santander UK PLC	160,000 Shares	160,466	160,043
Santander Drive Auto Receivabl	750,000 Shares	754,248	751,575
Santander Drive Auto Receivabl	257,000 Shares	256,970	257,890
Santander Drive Auto Receivabl	845,000 Shares	844,954	849,859
Sgs Sa Chf 1.0	220 Shares	461,116	448,507
Shell International Fin	83,000 Shares	90,624	86,555
Shin-etsu Chemical Co Ltd Npv	12,100 Shares	663,754	940,633
Simon Property Group LP	137,000 Shares	136,551	135,160
Southern Power Co	120,000 Shares	120,056	120,317
Spectrum Brands Inc	165,000 Shares	176,550	171,188
Spirit Realty LP	237,000 Shares	235,526	223,337
Sprint Spectrum/Spec I	283,000 Shares	285,123	283,529
Sumitomo Mitsui Finl Grp	208,000 Shares	210,768	209,090
Suncor Energy Inc New Npv	23,617 Shares	722,277	773,115
Symetra Finl Corp	195,000 Shares	201,014	192,685
Syngenta Ag	798 Shares	281,634	316,028
Teck Resources Limited	250,000 Shares	275,313	275,000
Thomson Reuters Corp	80,000 Shares	79,723	80,003
Thomson Reuters Corp	20,000 Shares	20,085	20,022
Tiaa Asset Mgmt Fin LLC	270,000 Shares	275,821	274,660

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Time Warner Inc	157,000 Shares	\$ 179,787	\$ 157,171
T-Mobile USA Inc	132,000 Shares	137,940	139,260
Toronto-Dominion Bank	160,000 Shares	159,982	159,614
Toronto-Dominion Bank	252,000 Shares	252,408	253,033
Toyota Auto Receivables Owner	190,000 Shares	190,920	190,205
Toyota Auto Receivables Owner	85,000 Shares	84,993	84,837
Toyota Auto Receivables Owner	21,549 Shares	21,548	21,544
Transatlantic Holdings	135,000 Shares	185,209	171,970
United Rentals North Am	151,000 Shares	155,563	158,550
Unitedhealth Group Inc	55,000 Shares	54,990	55,089
Unitedhealth Group Inc	143,000 Shares	142,914	145,152
USAA Auto Owner Trust	210,000 Shares	210,472	210,145
US Bancorp	172,000 Shares	180,388	173,020
Validus Holdings Ltd	96,000 Shares	132,531	125,953
Verisk Analytics Inc	165,000 Shares	188,946	183,596
Verizon Communications	253,000 Shares	315,897	315,992
Vodafone Group PLC	120,000 Shares	120,377	120,024
Volkswagen Auto Loan Enhanced	24,952 Shares	24,899	24,928
Volkswagen Auto Loan Enhanced	63,273 Shares	63,219	63,190
Volkswagen Auto Loan Enhanced	431,944 Shares	431,809	431,378
VR National Rural Ut 4.75	190,000 Shares	192,850	191,039
VR Toronto-Dominion	257,000 Shares	254,839	251,045
Walgreens Boots Alliance	60,000 Shares	59,982	60,150
Waste Management Inc	160,000 Shares	155,454	158,347
Weingarten Realty Invest	80,000 Shares	79,324	75,470
Wells Fargo & Company	165,000 Shares	164,782	164,802
Wells Fargo & Company	180,000 Shares	179,640	179,923
Wells Fargo Commercial Mortgag	257,000 Shares	264,702	268,419
Wells Fargo Commercial Mortgage	551,000 Shares	567,505	570,573
West Fraser Timber Co	235,000 Shares	229,929	218,531
Westpac Banking Corp	160,000 Shares	161,426	161,034
Westpac Banking Corp	163,000 Shares	163,000	163,520
WF-RBS Commercial Mortgage Trust	87,000 Shares	95,279	94,839
Williams Partners LP	223,000 Shares	189,097	218,709
WPP Finance 2010	171,000 Shares	180,142	174,853
Xcel Energy Inc	105,000 Shares	104,925	104,900
Xlit Ltd	45,000 Shares	45,652	45,297
Xlit Ltd	155,000 Shares	155,512	153,693

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, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Commingled Funds			
Wellington CTF DIH	912,021 Shares	\$ 12,813,048	\$ 10,880,408
Real Estate Investment fund			
UBS (US) Trumbull Property Income	1,411 Shares	14,297,019	17,101,041
Real Estate Investment Trust fund			
RREEF America REIT II, INC LLC	169,841 Shares	15,180,319	19,602,407
		<u>346,080,825</u>	<u>379,766,282</u>
Investment Contract With Insurance Company			
* Lincoln National Life		<u>2,808,400</u>	<u>2,808,400</u>
		<u>\$ 348,889,225</u>	<u>\$ 382,574,682</u>

* Party-in-interest

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

Schedule SB, Line 24 – Change in Actuarial Assumptions

- The expected amount of plan administrative expenses changed from \$732,517 to \$1,856,632 mainly due to the change in PBGC premiums.

Authorization for BKD, LLP to Electronically Sign Form 5500

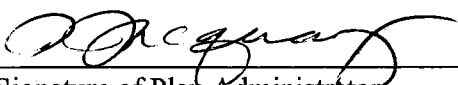
Please note the following terms and conditions if you choose to authorize **BKD, LLP** to electronically sign Form 5500 on your behalf:

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 SYSTEM INC WELFARE BENEFIT PLAN



Signature of Plan Administrator

10/12/17

Date

Dena Jacquay

Name of Plan Administrator

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

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="border: 1px solid black; padding: 5px; text-align: center; font-weight: bold;">2016</div> This Form is Open to Public Inspection
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Part I Annual Report Identification Information	
For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</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.)
B This return/report is:	☒ a single-employer plan
	☐ the first return/report
	☐ an amended return/report
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 WELFARE BENEFIT PLAN	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">1b Three-digit plan number (PN) ►</td> <td>502</td> </tr> <tr> <td colspan="2">1c Effective date of plan 09/01/1956</td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) 35-1972384</td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number 260-373-4000</td> </tr> <tr> <td colspan="2">2d Business code (see instructions) 622000</td> </tr> </table>	1b Three-digit plan number (PN) ►	502	1c Effective date of plan 09/01/1956		2b Employer Identification Number (EIN) 35-1972384		2c Plan Sponsor's telephone number 260-373-4000		2d Business code (see instructions) 622000	
1b Three-digit plan number (PN) ►	502										
1c Effective date of plan 09/01/1956											
2b Employer Identification Number (EIN) 35-1972384											
2c Plan Sponsor's telephone number 260-373-4000											
2d Business code (see instructions) 622000											
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											

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		10/12/17	Dena Jacquay
	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

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 10398
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) 10290
a(2) Total number of active participants at the end of the plan year	6a(2) 10668
b Retired or separated participants receiving benefits	6b 110
c Other retired or separated participants entitled to future benefits	6c 0
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d 10778
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 0
f Total. Add lines 6d and 6e.	6f 10778
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:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
 4A 4B 4D 4E 4H 4I 4L 4Q

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) ☒ **2** **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 2016 Form M-1 annual report. If the plan was not required to file the 2016 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 _____