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

2017

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

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
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
ASHTABULA COUNTY MEDICAL CENTER RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1969

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)

ASHTABULA COUNTY MEDICAL CENTER

2420 LAKE AVENUE
ASHTABULA, OH 44004-3817

2b Employer Identification Number (EIN) 34-0726081

2c Plan Sponsor's telephone number 440-997-2262

2d Business code (see instructions) 622000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	04/13/2019	DON KEPNER
	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

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	905
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)**	355
a(2) Total number of active participants at the end of the plan year	**6a(2)**	314
b Retired or separated participants receiving benefits	**6b**	358
c Other retired or separated participants entitled to future benefits	**6c**	154
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	826
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	42
f Total. Add lines **6d** and **6e**.	**6f**	868
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 who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A 3D 3H 1I

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] 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)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **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 2017 Form M-1 annual report. If the plan was not required to file the 2017 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2017

This Form is Open to Public Inspection

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

▶ **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
ASHTABULA COUNTY MEDICAL CENTER RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-0726081

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 07 Day 01 Year 2017

2 Assets:

a Market value	**2a**	39665891
b Actuarial value	**2b**	39665891

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	397	20983456	20983456
b For terminated vested participants	159	3790040	3790040
c For active participants	349	11478570	11788862
d Total	905	36252066	36562358

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**	5.88 %
6 Target normal cost	**6**	939553

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

04/02/2019
Date

LAWRENCE E. SCHERER
Type or print name of actuary

17-06389
Most recent enrollment number

FINDLEY, INC.
Firm name

216-875-1920
Telephone number (including area code)

1660 WEST 2ND STREET, SUITE 900
CLEVELAND, OH 44113
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	1504076	835727
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	1504076	835727
10	Interest on line 9 using prior year's actual return of 11.68 %	175676	97613
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		3852839
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.08%		234253
	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		4087092
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1679752	933340

Part III Funding Percentages

14	Funding target attainment percentage	14	101.34%
15	Adjusted funding target attainment percentage	15	108.48%
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	91.13%
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
10/02/2017	334884	0			
01/12/2018	334884	0			
03/15/2018	334884	0			
07/13/2018	1235000	0			
10/15/2018	1235000	0			
			Totals ► 18(b)	3474652	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	3287985

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:	2nd segment:	3rd segment:	
4.16%	5.72%	6.48%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
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**	939553
b Excess assets, if applicable, but not greater than line 31a	**31b**	490441

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	449112

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	449112
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	3287985
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	2838873
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**	0
43 Excess installment acceleration amount to be carried over to future plan years	**43**	0

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2017** **This Form is Open to Public Inspection.**

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

A Name of plan
ASHTABULA COUNTY MEDICAL CENTER RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ASHTABULA COUNTY MEDICAL CENTER

D Employer Identification Number (EIN)
34-0726081

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

MORGAN STANLEY

26-4310844

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	174004	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CHAMPS-HEALTHCOMP, INC.

47-5518569

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	51175	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

FIRST STATE TRUST

13-3124172

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50	NONE	30031	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

(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: DAVID M. HAUER

b EIN: 53-0181291

c Position: ENROLLED ACTUARY

d Address: TOWERS WATSON DELAWARE INC.
1001 LAKESIDE AVENUE, SUITE 1500
CLEVELAND, OH 44114-1172

e Telephone: 216-937-4000

Explanation: ASHTABULA COUNTY MEDICAL CENTER CHANGED ACTUARIAL FIRMS.

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2017

This Form is Open to Public Inspection

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

A Name of plan
ASHTABULA COUNTY MEDICAL CENTER RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ASHTABULA COUNTY MEDICAL CENTER

D Employer Identification Number (EIN)
34-0726081

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	113200	-179408
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	63739	80434
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	1810798	1550468
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	2033472	2527270
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	21432
(B) Common	1c(4)(B)	21271866	17174311
(5) Partnership/joint venture interests	1c(5)	2013884	2492142
(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)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8696445	16658757
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(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**	36003404	40325406
	Liabilities			
g	Benefit claims payable	**1g**		
h	Operating payables	**1h**		
i	Acquisition indebtedness	**1i**		
j	Other liabilities	**1j**	192792	17581
k	Total liabilities (add all amounts in lines 1g through1j)	**1k**	192792	17581
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**	35810612	40307825

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)**	4940000	
	(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)**		4940000
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)**	31649	
	(C) Corporate debt instruments	**2b(1)(C)**	78925	
	(D) Loans (other than to participants)	**2b(1)(D)**		
	(E) Participant loans	**2b(1)(E)**		
	(F) Other	**2b(1)(F)**		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		110574
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**		
	(B) Common stock	**2b(2)(B)**	407149	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	422037	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		829186
	(3) Rents	**2b(3)**		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	31682389	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	31316781	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		365608
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**		
	(B) Other	**2b(5)(B)**	2026602	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		2026602

		(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)		
c Other income	2c		5686
d Total income. Add all **income** amounts in column (b) and enter total	2d		8277656
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3257070	
(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)		3257070
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)	30031	
(2) Contract administrator fees	2i(2)	51175	
(3) Investment advisory and management fees	2i(3)	172800	
(4) Other	2i(4)	269367	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		523373
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3780443
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4497213
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: CLIFTONLARSONALLEN **(2)** EIN: 41-0746749

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	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			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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 4124025. (See instructions.)

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

2017

This Form is Open to Public Inspection.

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

A Name of plan
ASHTABULA COUNTY MEDICAL CENTER RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ASHTABULA COUNTY MEDICAL CENTER

D Employer Identification Number (EIN)
34-0726081

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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): _____ _____

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** 25

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

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): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN

FINANCIAL STATEMENTS AND
SUPPLEMENTAL INFORMATION

YEARS ENDED JUNE 30, 2018 AND 2017

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
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YEARS ENDED JUNE 30, 2018 AND 2017

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CliftonLarsonAllen LLP
CLAconnect.com

INDEPENDENT AUDITORS' REPORT

Board of Trustees
Ashtabula County Medical Center Retirement Plan
Ashtabula, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Ashtabula County Medical Center Retirement Plan (the Plan), which comprise the statements of net assets available for benefits as of June 30, 2018 and 2017, 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.

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by First State Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended June 30, 2018 and 2017, that the information provided to the Plan administrator by the trustee 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 – Supplemental Schedules

The supplemental schedule of assets (held at end of year) and schedule of reportable transactions as of or for the year ended June 30, 2018, are required by the Department of Labor's (DOL) 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 trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Akron, Ohio
April 8, 2019

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JUNE 30, 2018 AND 2017

	2018	2017
ASSETS		
INVESTMENTS (at Fair Value)		
Mutual Funds	$ 10,589,114	$ 8,696,445
Money Market Funds	-	113,200
Common and Preferred Stock	17,195,743	16,283,961
Exchange Traded Funds	6,069,643	4,987,905
Corporate Bonds and Notes	2,527,270	2,033,472
Real Estate Income Trust	2,492,142	2,013,884
Government Securities	1,550,468	1,810,798
Total Investments	40,424,380	35,939,665
RECEIVABLES		
Interest and Dividends	80,434	63,739
Contributions Receivable	2,470,000	3,935,348
Total Receivables	2,550,434	3,999,087
Total Assets	42,974,814	39,938,752
LIABILITIES		
DUE TO BROKER FOR PENDING TRADES	196,989	192,792
NET ASSETS AVAILABLE FOR BENEFITS	$ 42,777,825	$ 39,745,960

See accompanying Notes to Financial Statements.

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED JUNE 30, 2018 AND 2017

	2018	2017
ADDITIONS:		
INVESTMENT INCOME		
Net Appreciation in Fair Value of Investments	$ 2,392,209	$ 3,080,734
Interest and Dividends	943,613	664,607
Other	1,833	27,995
Total	3,337,655	3,773,336
EMPLOYER CONTRIBUTIONS	3,474,652	5,560,813
Total Additions	6,812,307	9,334,149
DEDUCTIONS FROM NET ASSETS		
Benefit Payments	3,257,070	2,835,540
Administrative Expenses	523,372	695,102
Total Deductions from Net Assets	3,780,442	3,530,642
NET INCREASE	3,031,865	5,803,507
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of Year	39,745,960	33,942,453
End of Year	$ 42,777,825	$ 39,745,960

See accompanying Notes to Financial Statements.

NOTE 1 DESCRIPTION OF PLAN

The following description of Ashtabula County Medical Center (the Company) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit pension plan established July 1, 1969. The Plan was amended and restated throughout the years to comply with tax legislation and most recently amended effective July 1, 2015.

Effective January 1, 2004, the Plan was amended to include Ashtabula Clinic doctors. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Effective December 31, 2006, the Plan was amended to freeze pension benefits and cease all future benefit accruals for all participants not covered by a collective bargaining agreement, which decreased the minimum required contribution and increased the current liability funded percentage.

On December 21, 2007, the Ashtabula County Medical Center's Board of Trustees voted to freeze pension benefits and cease all future benefit accruals for participants covered by a collective bargaining agreement. Each participant elected whether to have their benefits frozen as of December 31, 2007 or December 31, 2008.

The Plan was amended during fiscal year 2015 to allow for a limited time period in which terminated vested participants could elect to receive a lump-sum payment.

The Plan was amended and restated effective July 1, 2015 to adopt a new individually designed Plan document as well as establishing a new individual Trust agreement to provide for the custody and investment of the assets of the Plan. Effective July 1, 2015, the Plan's name changed from Ashtabula County Medical Center – The Greater Cleveland Hospital Association Retirement Plan to Ashtabula County Medical Center Retirement Plan.

The Plan is administered by the Company's Benefits Committee (Committee), which is a committee of the Board of Directors of the Company. The Committee has overall responsibility for the operation and administration of the Plan. The Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Board of Trustees.

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

General (Continued)

The Plan covers substantially all employees of the Company who have completed five or more years of service through the freeze dates of December 31, 2006 and December 31, 2007. Employees may enter the Plan on January 1 or July 1, after meeting the eligibility service requirement. The Plan excludes nonresident aliens with no U.S. source income, leased employees, employees covered by another Pension Plan to which Ashtabula County Medical Center contributes, and employees covered by a collective bargaining agreement, unless the collective bargaining agreement specifically allows for participation. The current collective bargaining agreement allows for participation in the Plan. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Pension Benefits

Employees with five or more years of service are entitled to retirement benefit payments upon reaching age 65. The amount of individual pensions is based upon several factors including compensation, years of service, age, and the estimated social security benefit. Compensation is based upon the average of the highest three consecutive calendar years of employment out of the last 10 years prior to the date of termination.

Death and Disability Benefits

If an active, eligible employee with at least 10 years of eligibility service dies, a death benefit equal to the normal retirement benefits the employee had accumulated as described above, reduced for early retirement and joint and survivor benefits (as applicable) is paid to the employee's surviving spouse beginning on the employee's early retirement date and continuing until such spouse's death. Active, eligible employees with at least 10 years of eligibility service who become totally disabled receive annual disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they become disabled. Disability benefits commence five months after the month in which the former employee became disabled and such payments continue until the death of the former employee.

Funding Policy

The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. During 2018 and 2017, the Company made contributions of $3,474,652 and $5,560,813, respectively. The Company's contributions for 2018 and 2017 exceeded the minimum funding requirements of ERISA.

Although it has not expressed an intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to provisions set form in ERISA.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements of the Plan 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 the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, 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. The Plan uses an actuary to determine the actuarial present value of accumulated plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value of accumulated plan benefits reported in the accompanying financial statements.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers and trustee. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Investment 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

Benefits are recorded when paid.

Administrative Expenses

The Plan's expenses are paid by the Plan as provided by the Plan document. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation of fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Subsequent Events

The Plan has evaluated subsequent events through April 8, 2019, the date the financial statements were available to be issued.

NOTE 3 ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those 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) beneficiaries of employees who have died, and
c) present employees or their beneficiaries.

Benefits under the Plan are accumulated based on certain formulas determined by the Plan. The accumulated plan benefits for active employees are based on the Plan's terms and participant's service through the date as of which the benefit information is presented (the freeze date). Benefits payable under all circumstances — retirement, death, and termination of employment — are included, to the extent they are deemed attributable to employee service rendered to the freeze date. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the freeze date and the expected date of payment.

The significant actuarial assumptions used in the valuation as of June 30, 2018 and 2017 were:

a. Life expectancy of Participants (the RP-2014 Mortality Tables).
b. Retirement Age Assumptions based on a table of anticipated rates of retirement at each of the ages at which retirement eligibility occurs.
c. Discount Rate and expected rate of return on plan assets of 7% for 2018 and 7.5% for 2017.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The following is a summary of actuarial present value of accumulated plan benefits as of June 30:

	2018	2017
Actuarial Present Value of Accumulated Plan Benefits:		
Vested Benefits:		
Participants Currently Receiving Payments	$ 19,648,266	$ 19,577,047
Other Participants	15,080,785	13,258,475
Total Vested Benefits	34,729,051	32,835,522
Nonvested Benefits	224,674	262,235
Total Actuarial Present Value of Accumulated Plan Benefits	$ 34,953,725	$ 33,097,757

NOTE 3 ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS (CONTINUED)

The changes in the actuarial present value of accumulated plan benefits are summarized as follows for the years ended June 30:

	2018	2017
Actuarial Present Value of Accumulated Plan Benefits - Beginning of Year	$ 33,097,757	$ 33,375,019
Increase (Decrease) During the Year Attributable to:		
Change in Actuarial Assumptions	2,625,729	-
Benefits Accumulated (including gains and losses)	123,660	(95,453)
Change in Discount Period	2,363,649	2,653,731
Benefits Paid	(3,257,070)	(2,835,540)
Net Decrease	1,855,968	(277,262)
Actuarial Present Value of Accumulated Plan Benefits - End of Year	$ 34,953,725	$ 33,097,757

The computations of the actuarial present value of accumulated plan benefits were made as of July 1, 2018 and 2017. Had the valuations been performed as of June 30, there would be no material differences.

NOTE 4 CERTIFICATION OF INVESTMENT INFORMATION

First State Trust Company, the trustee of the Plan, has supplied the Plan administrator with a certification as to the completeness and accuracy of all investment information reflected on the accompanying statements of net assets available for benefits as of June 30, 2018 and 2017, the statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule of assets (held at end of year) as of June 30, 2018 and supplemental schedule of reportable transactions for the year ended June 30, 2018.

NOTE 5 FAIR VALUE OF INVESTMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

NOTE 5 FAIR VALUE OF INVESTMENTS (CONTINUED)

Level 2 – Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair market value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the valuation methodologies used at June 30, 2018 and 2017.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Money Market Funds: Valued using amortized cost which approximates fair value.

Common and Preferred Stock: Investments in common stock are valued at the closing price reported on the active market on which the individual securities are traded.

Exchange Traded Funds: Valued at the daily closing price as reported by the fund. Exchange traded funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The exchange traded funds held by the Plan are deemed to be actively traded.

NOTE 5 FAIR VALUE OF INVESTMENTS (CONTINUED)

Corporate Bonds and Notes: Investments in bonds are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote is available.

Government Securities: Investments in U.S. government securities are valued using pricing models maximizing the use of observable inputs for similar securities.

Real Estate Income Trust: The real estate income trust is valued monthly based on the net asset value per unit, which is based on the fair value of the underlying investments, plus the addition of any other assets (such as cash on hand) and the deduction of liabilities. The underlying investments largely comprise real estate properties valued using a combination of a discounted cash flow analysis and valuations by a third-party appraisers. The asset is a Level 3 investment due to the limited trading market for the security and its underlying holdings.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30:

	2018			
	Level 1	Level 2	Level 3	Total
Common and Preferred Stock	$ 17,195,743	$ -	$ -	$ 17,195,743
Exchange Traded Funds	6,069,643	-	-	6,069,643
Corporate Bonds and Notes	-	2,527,270	-	2,527,270
Government Securities	-	1,550,468	-	1,550,468
Real Estate Income Trusts	-	-	2,492,142	2,492,142
Mutual Funds	10,589,114	-	-	10,589,114
Total Investments at Fair Value	$ 33,854,500	$ 4,077,738	$ 2,492,142	$ 40,424,380

	2017			
	Level 1	Level 2	Level 3	Total
Money Market Funds	$ 113,200	$ -	$ -	$ 113,200
Common and Preferred Stock	16,283,961	-	-	16,283,961
Exchange Traded Funds	4,987,905	-	-	4,987,905
Corporate Bonds and Notes	-	2,033,472	-	2,033,472
Government Securities	-	1,810,798	-	1,810,798
Real Estate Income Trusts	-	-	2,013,884	2,013,884
Mutual Funds	8,696,445	-	-	8,696,445
Total Investments at Fair Value	$ 30,081,511	$ 3,844,270	$ 2,013,884	$ 35,939,665

NOTE 5 FAIR VALUE OF INVESTMENTS (CONTINUED)

Changes in Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

Plan management has evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended June 30, 2018 and 2017, there were no significant transfers in or out of Levels 1, 2 or 3.

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended June 30:

	2018	2017
Balance - July 1,	$ 2,013,884	$ -
Purchases	200,000	2,000,000
Dividends	111,347	16,043
Unrealized gain	166,911	(2,159)
Balance - June 30,	$ 2,492,142	$ 2,013,884

Gains and losses (realized and unrealized) included in the changes in net assets for the period above are reported in net appreciation in fair value of investments in the statements of changes in net assets available for benefits.

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, and the significant unobservable inputs and the ranges of values for those inputs:

Investment Type	Fair Value 2017	Fair Value 2016	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values	Weighted Average
Real Estate Income Trust	$ 2,492,142	$ 2,013,884	Net Asset Value	Third-Party Appraisal	Various Dependent on Market Data	n/a
				Discounted Cash Flow by Property Type	Discount Rate Range of Values 7.3%-9.7% ;	7.3%-9.7%
					Exit Cap Rate 5.6%-9.5%	5.6%-9.5%

NOTE 5 FAIR VALUE OF INVESTMENTS (CONTINUED)

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements (Continued)

In estimating fair value of the investment in Level 3, the Investment Committee may use third-party pricing sources or appraisers. In substantiating the reasonableness of the pricing data provided by third parties, the Investment Committee evaluates a variety of factors including review of methods and assumptions used by external sources, recently executed transactions, existing contracts, economic conditions, industry and market developments, and overall credit ratings.

NOTE 6 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:

1. Benefits attributable to employee contributions, taking into account those paid out before termination.
2. Annuity benefits 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. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding plan termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. governmental agency) up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. 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. For Plan terminations occurring during 2018 and 2017, the statutory ceiling was approximately $5,400 and $5,300 per month, respectively.

The ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings will be actuarially adjusted downward.

NOTE 6 PLAN TERMINATION (CONTINUED)

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan Sponsor and the level of benefits guaranteed by the PBGC.

NOTE 7 PLAN TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated May 3, 2013, that the Plan and related trust are designed in accordance with the applicable requirements of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, they believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of June 30, 2018, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; there was an IRS examination in 2018 for the plan year end June 30, 2017. The results were satisfactory

NOTE 8 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 the 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 estimations and assumptions 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 9 PARTY-IN-INTEREST TRANSACTIONS

The Plan investments are managed by First State Trust Company, the trustee. First State Trust Company is the trustee as defined by the Plan and, therefore, the investment transactions qualify as party-in-interest transactions. As described in Note 2, the Plan paid certain expenses related to Plan operations and investment activity to various service providers. These transactions are party-in-interest transactions under ERISA.

NOTE 10 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 as of June 30:

	2018	2017
Net Assets Available for Benefits per the Financial Statements	$ 42,777,825	$ 39,745,960
Less: Contributions Receivable	2,470,000	3,935,348
Net Assets Available for Benefits per Form 5500	$ 40,307,825	$ 35,810,612

The following is a reconciliation of employer contributions per the financial statements to Form 5500 for the years ended June 30:

	2018	2017
Employer Contributions per the Financial Statements	$ 3,474,652	$ 5,560,813
Add: Prior Year Contributions Receivable	3,935,348	1,000,479
Less: Current Year Contributions Receivable	2,470,000	3,935,348
Employer Contributions per Form 5500	$ 4,940,000	$ 2,625,944

Contributions are recorded on the Form 5500 when they are received and on the financial statements when they are due.

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Mutual Funds			
	Victory Trivalent International	100,717 Shares	$ 1,183,680	$ 1,462,416
	Morgan Stanley Bank Deposit	1,075,277 Shares	1,075,277	1,075,277
	Harding Loener Emerging Markets Portfolio	11,185 Shares	672,202	633,542
	Harbor International Fund	29,707 Shares	2,031,918	1,979,409
	Eaton Vance Floating Rate-I	181,764 Shares	1,610,557	1,639,516
	Pioneer Strategic Income Fd	364,233 Shares	3,889,619	3,798,954
	Total Mutual Funds		10,463,253	10,589,114
	Exchange Traded Funds			
	Ishares Russell 2000 Index Fund	13,332 Shares	1,831,542	2,183,382
	Vanguard US Total Stock Market Index ETF	27,441 Shares	3,021,819	3,853,540
	Vedanta Ltd	2,406 Shares	46,221	32,721
	Total Exchange Traded Funds		4,899,582	6,069,643
	Common and Preferred Stock			
	Aci Worldwide In	1,373 Shares	32,222	33,872
	Acs Activ De Construc Y Serv	6,530 Shares	44,053	52,911
	Aercap Holdings NV	1,447 Shares	66,597	78,355
	Aes Corp	8,891 Shares	93,997	119,228
	AIA Group Ltd-Sp ADR	1,417 Shares	37,201	49,561
	Air Transport Services Group Inc.	1,823 Shares	41,749	41,182
	Airbus Group (Netherlands)	1,857 Shares	36,416	54,345
	Alibaba Group Holding ADR	488 Shares	68,358	90,539
	Alphabet Inc Cl A	206 Shares	143,278	232,613
	Altria Group Inc	1,272 Shares	40,853	72,237
	Ambev SA ADR (Brazil)	7,141 Shares	41,269	33,063
	AMC Entertainment Hlds CL A	1,092 Shares	14,469	17,363
	American International Group	2,582 Shares	154,074	136,898
	American Woodmark Corp	472 Shares	40,178	43,212
	Amn Healthcare Svcs Inc	1,244 Shares	49,693	72,898
	Amneal Phaarmaceuticals Inc	1,516 Shares	22,228	24,878
	Anadarko Petroleum Corp	1,989 Shares	116,432	145,694
	Anika Therapeutics Inc.	280 Shares	14,564	8,960
	Apogee Enterprises Inc	818 Shares	38,584	39,403
	Apple Computer Inc	1,954 Shares	231,807	361,705
	Applied Matls Inc	2,010 Shares	36,141	92,842
	Arcelormittal Sa Luxembourg	1,573 Shares	38,000	45,271
	Argo Group International	583 Shares	30,696	33,901
	Ase Industrial Holding Co Ltd	6,425 Shares	33,129	29,555
	Asgn Inc	572 Shares	24,820	44,725
	Axa Adr	1,854 Shares	48,587	45,490
	Azul S A	1,310 Shares	28,351	21,432

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	B&g Foods Inc Cl A	866 Shares	$ 25,507	$ 25,893
	Bae Sys Plc Spons Adr	1,503 Shares	50,030	51,339
	Baidu Inc Spons Adr	512 Shares	94,530	124,416
	Banco Do Brasil Spons Adr	4,720 Shares	48,392	34,903
	Banco Santander Cent Hispano S A	7,485 Shares	49,604	39,970
	Bancolombia Adr	573 Shares	22,253	27,378
	Bank America Corp	4,941 Shares	78,241	139,287
	Barloworld Ktd ADR	1,402 Shares	21,641	13,267
	Barnes Group Inc	513 Shares	25,992	30,216
	Basic Energy Svcs Inc New	1,743 Shares	34,782	19,365
	Bayer A Gadrmodel	2,562 Shares	81,961	70,557
	Baxter Intl Inc	1,031 Shares	49,608	76,129
	Berkshire Hathaway Inc-Cl B	1,808 Shares	262,081	337,463
	Bhp Billiton Plc Spons Adr	1,190 Shares	39,457	53,491
	Bidvest Group LTD-SPONS ADR	664 Shares	17,895	19,088
	Biotelemetry Inc	1,877 Shares	53,566	84,465
	Bloomin' Brands inc	1,079 Shares	21,601	21,688
	Bofi Holding Inc	842 Shares	21,909	34,446
	Booking Hldgs Inc	102 Shares	118,463	206,763
	Boot Barn Holdings INC	1,298 Shares	17,771	26,934
	Boston Private Finl Hldgs Inc	2,457 Shares	38,698	39,066
	Bottomline Technologies Inc	1,191 Shares	33,015	59,348
	Brandywine Rlty Tr New	1,915 Shares	31,781	32,325
	Braskem SA ADR (Brazil)	1,708 Shares	50,518	44,408
	Brilliance China Auto Hldg Ltd ADR	755 Shares	21,933	13,627
	Bristol Myers Squibb Co	1,869 Shares	65,832	103,430
	British Amern Tob Plc Spns Adr	982 Shares	61,118	49,542
	Brooks Automation Inc	450 Shares	13,207	14,679
	Bryn Mawr Bank Corp	795 Shares	29,172	36,809
	Builders Firstsource Inc	1,283 Shares	29,104	23,466
	C S X Corp	1,838 Shares	27,154	117,228
	Caci Intl Inc Cl A	254 Shares	33,740	42,812
	Callaway Golf Co	2,436 Shares	35,038	46,211
	Callon Petroleum Co	2,410 Shares	37,451	25,883
	Canadian Natural Resources	1,658 Shares	53,068	59,804
	Cantel Medical Corporation	459 Shares	39,745	45,147
	Carlsberg AS-B-SPON ADR	2,049 Shares	37,699	48,265
	Carrefour SA-SP ADR	12,288 Shares	54,252	39,798
	Casella Waste Sys Inc Cl A	1,394 Shares	27,091	35,700
	Caseys General Stores Inc	270 Shares	29,375	28,372
	Cavco Industries Inc	122 Shares	21,937	25,333

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Common and Preferred Stock (Continued)			
	Celgene Corp	1,560 Shares	$ 171,818	$ 123,895
	Charles Schwab Corp	2,800 Shares	81,910	143,080
	Chatham Lodging Trust	1,378 Shares	26,866	29,241
	Chevron Corporation	795 Shares	63,243	100,512
	Childrens Place	473 Shares	58,849	57,138
	China Natl Bldg Matl Co Ltd	689 Shares	36,831	34,119
	Chunghwa Telecom LTD (China)	515 Shares	17,473	18,499
	Citigroup Inc	1,957 Shares	67,708	130,962
	CK Hutchison Hldgs Ltd ADR	4,000 Shares	49,824	42,240
	Codexis Inc	1,525 Shares	23,573	21,960
	Cognizant Technology Solutions Corp	2,054 Shares	127,087	162,245
	Columbia Ppty Tr Inc	1,484 Shares	33,209	33,702
	Comfort Systems Usa Inc	1,915 Shares	71,398	87,707
	Compass Minerals International Inc	345 Shares	23,328	22,684
	Conduent Inc	648 Shares	10,649	11,774
	Control4 Corp	1,030 Shares	23,740	25,039
	Cooper Standard Holdings Inc	289 Shares	28,691	37,764
	Corecivic Inc	905 Shares	20,965	21,620
	Core Labs N V	1,133 Shares	120,211	142,996
	Corning Inc	3,586 Shares	77,290	98,651
	Costco Wholesale Corp New	315 Shares	16,365	65,829
	Covanta Holding Corp	2,028 Shares	30,319	33,462
	Cowen Group Inc New	2,187 Shares	31,395	30,290
	Credicorp Limited	152 Shares	25,048	34,218
	Ctrip.Com Adr	1,071 Shares	50,652	51,012
	Customers Bancorp Inc	1,409 Shares	37,878	39,987
	Daimler Ag	2,239 Shares	44,137	35,925
	Dave & Busters Entmt Inc	421 Shares	19,495	20,040
	Dbs Group Hldgs Ltd Sponsd Adr	591 Shares	32,228	46,136
	Delek Us Hldgs Inc New	1,337 Shares	46,531	67,077
	Deutsche Boerse Ag-Unspon Adr	3,871 Shares	42,065	51,592
	Deutsche Post Ag Spons Adr	1,156 Shares	51,058	37,751
	Diebold Inc	858 Shares	15,817	10,253
	DNB ASA-Spon Adr	2,544 Shares	42,554	49,723
	Dycom Inds Inc	350 Shares	35,203	33,079
	E. On SE Spons Adr	4,675 Shares	38,056	49,965
	Eagle Bancorp. Inc.	505 Shares	29,051	30,957
	Eastgroup Pptys Inc Reit	409 Shares	37,027	39,084
	Ecopetrol SA-Sponsored ADR	1,154 Shares	14,188	23,715
	Edwards Lifesciences Corp	1,767 Shares	177,190	257,222
	Enersys	444 Shares	29,864	33,140

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Common and Preferred Stock (Continued)			
	Engie	3,006 Shares	$ 41,398	$ 46,082
	Entegris Inc	1,816 Shares	43,621	61,562
	Equity Commonwealth	1,207 Shares	36,403	38,021
	Essilor Intl - Unspon ADR	746 Shares	45,727	52,652
	Euronet Worldwide Inc	390 Shares	30,182	32,670
	Express Scripts Hldg	982 Shares	73,478	75,820
	Extreme Networks Inc.	3,414 Shares	43,537	27,175
	Facebook Inc - A	1,551 Shares	262,837	301,390
	Fast Retailing Co Unspons Adr	1,187 Shares	52,440	54,557
	Fastenal Co	3,098 Shares	139,335	149,107
	FCB Financial Holdings	879 Shares	38,130	51,685
	Ferroglobe Plc	2,327 Shares	37,406	19,942
	Finisar Corporation	1,878 Shares	34,370	33,804
	First Bancorp North Carolina	855 Shares	31,746	34,978
	First Busey Corp	1,269 Shares	39,161	40,253
	First Fndtn Inc	1,640 Shares	31,129	30,406
	FirstRand Limited	591 Shares	23,230	27,549
	Firstcash Inc	350 Shares	23,107	31,448
	Five9 Inc	623 Shares	22,517	21,537
	Fmc Corp	1,777 Shares	86,224	158,526
	Forum Energy Technologies	1,850 Shares	26,479	22,848
	G Iii Apparel	1,058 Shares	32,992	46,975
	GALP Energia	3,016 Shares	28,052	28,761
	Genworth Financial	3,960 Shares	13,318	17,820
	Gpo Aeroportuario Del Pac Sab Spon ADR B	165 Shares	15,098	15,330
	Green Dot Corp.	383 Shares	24,045	28,108
	Greenlight Capital Re LTD-A	1,309 Shares	28,405	18,588
	Grupo Financiero Banorte- Spon ADR	861 Shares	26,768	25,577
	Grupo Supervielle S A	1,233 Shares	31,462	13,045
	Halliburton Co	2,222 Shares	74,819	100,123
	Hdfc Bk Ltd Spons Adr	1,626 Shares	143,596	170,763
	HealthequityInc.	589 Shares	28,678	44,234
	Heartland Financial Usa Inc	713 Shares	34,798	39,108
	Hillenbrand Inc	838 Shares	30,671	39,512
	Hilltop Holdings Inc	1,090 Shares	31,087	24,056
	Hilton Grand Vacations Inc	536 Shares	21,465	18,599
	HomeStreet Inc	1,095 Shares	33,288	29,510
	Honeywell Intl Inc	734 Shares	32,584	105,733
	Houlihan Lokey Inc	762 Shares	37,091	39,030
	Hsbc Hldgs Plc Sponsored Adr New	1,012 Shares	42,353	47,706
	Hubspot Inc	331 Shares	35,680	41,507

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	Humana Inc	490 Shares	$ 27,342	$ 145,839
	Iberiabank Corp	370 Shares	28,609	28,046
	Icu Med Inc	179 Shares	27,342	52,563
	Imperva Inc	422 Shares	20,201	20,362
	Indust & Comm Bank China Unspons Adr	5,598 Shares	89,093	83,769
	Innerworkings In	1,933 Shares	20,729	16,798
	Installed Bldg Prods Inc	698 Shares	38,223	39,472
	Integrated Device Technology Inc	1,126 Shares	28,628	35,897
	Inter Parfums Inc	698 Shares	24,598	37,343
	Intesa Sanpaolo Spons Adr	2,392 Shares	39,880	41,666
	Investors Bancorp Inc	2,196 Shares	31,376	28,087
	Itau Unibanco Holding Spons Adr	2,885 Shares	38,675	29,946
	J P Morgan Chase & Co	1,203 Shares	63,570	125,353
	J2 Global Inc	401 Shares	34,222	34,731
	James River Group Holdings, Ltd.	625 Shares	24,248	24,556
	JD Com Inc Spon ADR Cl A	464 Shares	18,188	18,073
	Julius Baer Group LTD-UN ADR	3,960 Shares	40,134	46,486
	Kasikornbank PCL-Unspon ADR	632 Shares	14,082	15,261
	Koc Holding As Unspons Adr	915 Shares	19,266	14,201
	Korn Ferry Intl	519 Shares	28,429	32,142
	Kraft Heinz Co	1,888 Shares	141,160	118,604
	Lakeland Financial Corp	752 Shares	33,018	36,239
	Laredo Petroleum Holdnigs Inc	3,076 Shares	27,038	29,591
	Ligand Pharmaceuticals	262 Shares	32,859	54,279
	Littelfuse Inc	168 Shares	33,665	38,334
	LivaNova Plc	399 Shares	18,917	39,828
	Lloyds Banking Group Plc-Spons Adr	13,225 Shares	47,161	44,039
	Loma Negra Corp	1,008 Shares	22,567	10,342
	Lowes Cos Inc	1,260 Shares	44,621	120,418
	Lydall Inc.	606 Shares	35,855	26,452
	Madden Steven Ltd	476 Shares	18,868	25,276
	Malibu Boats Inc	693 Shares	23,543	29,064
	Marathon Petroleum Corp	1,345 Shares	31,984	94,365
	Matador Resources Company	1,160 Shares	31,055	34,858
	Mbia Inc	2,677 Shares	22,833	24,200
	Mcdermott Intl Inc	1,222 Shares	26,657	24,012
	Medidata Solutions Inc	587 Shares	38,456	47,289
	Meta Financial Group	385 Shares	37,405	37,499
	Methode Electronics Inc	825 Shares	37,216	33,248
	Metlife Inc	33,248 Shares	86,261	92,912
	Michaels Cos Inc	1,867 Shares	36,358	35,790

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	Modine Mfg Co	2,006 Shares	$ 26,417	$ 36,610
	Mondi Plc ADR	503 Shares	24,144	27,241
	Monolithic Power	410 Shares	34,759	54,805
	Morgan Stanley	2,174 Shares	67,995	103,048
	Motorcar Pts Amer Inc	1,039 Shares	26,738	19,440
	MRC Global Inc	1,803 Shares	28,681	39,071
	Naspers Ltd Spons Adr	1,838 Shares	79,797	93,467
	Nationstar Mortgage Holdings	1,261 Shares	21,790	22,105
	NCI Building Systems	1,202 Shares	19,893	25,242
	Neenah Paper Inc	368 Shares	31,416	31,225
	Net 1 Ueps Tech	2,403 Shares	27,934	21,819
	Netease Com Inc Spons Adr	193 Shares	66,336	48,765
	New Media Investment Group	1,331 Shares	22,838	24,597
	New Oriental Education-Spons Adr	340 Shares	30,031	32,184
	NextEra Energy	662 Shares	75,185	110,574
	Nmi Hldgs Inc	1,268 Shares	21,079	20,668
	Northwestern Corp	252 Shares	15,624	14,427
	Novanta Inc	705 Shares	39,194	43,922
	Nuvasive Inc	620 Shares	39,455	32,314
	Orange-Spon ADR	2,859 Shares	46,128	47,660
	Orasure Technologies Inc	665 Shares	12,599	10,953
	Orbotech LTD	339 Shares	12,636	20,950
	Otsuka Hlds Ltd (Japan)	2,148 Shares	48,090	52,010
	Otter Tail Corporation	631 Shares	24,571	30,036
	Oxford Industries Inc	382 Shares	30,545	31,698
	Patrick Industries Inc	865 Shares	40,911	49,175
	Patterson Cos Inc	770 Shares	18,522	17,456
	Paypal Hldgs Inc	2,059 Shares	109,167	171,453
	Perusahaan Perseroan Persero Adr	1,289 Shares	39,991	33,527
	Philip Morris International	1,826 Shares	147,297	147,431
	Picc Ppty & Cas Co Ltd	973 Shares	48,261	38,920
	PJSC Lukoil ADR	1,067 Shares	58,339	74,023
	Polyone Corp	697 Shares	23,312	30,124
	Popular Inc	552 Shares	19,589	24,956
	Portland General Electric Co	924 Shares	42,355	39,510
	Pri Pointe Homes Inc	1,850 Shares	33,150	30,266
	Proofpoint Inc	247 Shares	21,156	28,482
	Pt Bank Mandiri Unspons Adr	3,378 Shares	37,252	32,295
	Qualcomm Inc	5,471 Shares	312,114	307,033
	Qurate Retail Inc	4,195 Shares	93,375	89,018
	Radian Group Inc	1,408 Shares	29,392	22,838

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	Red Robin Gourmet Burgers Inc	449 Shares	$ 22,663	$ 20,923
	Republic First Bancorp Inc	2,393 Shares	22,229	18,785
	Retail Opportunity Investments	1,733 Shares	34,410	33,204
	Ring Energy Inc	2,648 Shares	37,112	33,418
	RLJ Lodging Trust	1,394 Shares	29,636	30,738
	Roche Hldg Ltd Spons Adr	1,693 Shares	53,181	47,005
	Ross Stores Inc	2,343 Shares	138,236	198,569
	Royal Dsm Nv-Adr	1,961 Shares	33,241	49,295
	Royal Dutch-ADR A	759 Shares	40,761	52,546
	Saia Inc	635 Shares	28,279	51,340
	Sap Aktiengesellschaft Spns Adr	467 Shares	52,794	54,013
	Sberbank-Sponsor ADR	2,634 Shares	31,009	36,631
	Schlumberger Ltd	2,988 Shares	222,797	200,286
	Seaworld Entertainment	1,671 Shares	20,740	36,461
	Secom Ltd Spons Adr	2,624 Shares	48,042	50,382
	Selective Ins Group Inc	723 Shares	31,523	39,765
	Semtech Corp	848 Shares	33,827	39,898
	Seven & I Holdings-Unspons Adr	2,300 Shares	46,547	50,157
	Silicon Moti-Adr	849 Shares	42,691	44,904
	Simmons 1st Natl Corp Cl A	1,448 Shares	40,813	43,295
	Smith & Nephew Plc-Adr	1,314 Shares	41,941	49,314
	South Jersey Inds Inc	911 Shares	29,651	30,491
	South State Corp	418 Shares	37,196	36,053
	SP Plus Corp	588 Shares	22,867	21,874
	Spirit Realty Capital Inc	3,983 Shares	29,306	31,983
	SPS Commerce Inc	476 Shares	31,383	34,976
	Stars Group Inc	696 Shares	15,625	25,265
	Stewart Information Svcs Corp	747 Shares	30,321	32,173
	Stoneridge Inc	703 Shares	19,759	24,703
	Sumitomo Mitsui-Spons ADR	8,901 Shares	68,510	69,161
	Syneos Health Inc	688 Shares	26,432	32,267
	Taiwan Semiconductor Spons Adr	5,888 Shares	235,216	215,265
	Techtronic Industries Company LTD	1,473 Shares	46,484	41,071
	Telef Brasil - ADR	2,319 Shares	35,437	27,527
	Tenaris Sa-Adr	578 Shares	16,469	21,033
	Tencent Hldgs Ltd Unspons Adr	3,619 Shares	152,205	181,655
	Teradata Corp	2,808 Shares	105,387	112,741
	Ternium SA-Sponsored ADR	1,199 Shares	33,427	41,749
	Texas Capital Bancshares	396 Shares	32,848	36,234
	Texas Roadhouse Inc-Class A	611 Shares	35,494	40,027
	Textainer Group Holdings Ltd	1,621 Shares	33,691	25,774

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
	Common and Preferred Stock (Continued)			
	The Bancorp Inc	3,590 Shares	$ 35,880	$ 37,551
	Timken Co	806 Shares	36,628	35,101
	Tivity Health Inc	554 Shares	19,440	19,501
	Tivo Corp	1,538 Shares	29,145	20,686
	Toray Industries Inc ADR (Japan)	2,530 Shares	50,019	39,926
	Total S.A. Spon Adr	852 Shares	42,927	51,597
	Tpi Composites Inc	1,047 Shares	27,603	30,614
	Tractor Supply Co	3,363 Shares	221,199	257,236
	Turning Pt Brands Inc	704 Shares	15,042	22,458
	Tutor Perini Corp	1,092 Shares	26,891	20,147
	Tyson Foods Inc Class A	1,815 Shares	54,400	124,963
	U S Concrete Inc	391 Shares	24,280	20,528
	Unilever N V -Ny Shares	706 Shares	39,885	39,338
	Union Pac Corp	644 Shares	21,016	91,242
	United Community Banks Inc	1,415 Shares	39,694	43,398
	United Nat Foods Inc	430 Shares	18,249	18,344
	United Technologies Corp	624 Shares	43,396	78,019
	Unumprovident Corp	1,960 Shares	45,348	72,500
	Valero Energy Corp	652 Shares	13,928	72,261
	Verizon Communications	3,095 Shares	146,945	155,709
	Vipshop Holdings LTD (China)	1,433 Shares	13,306	15,548
	Visa Inc-Class A	2,496 Shares	181,774	330,595
	Vonage Holdings Corp	3,299 Shares	32,460	42,524
	Wells Fargo & Co New	2,012 Shares	75,130	111,545
	Werner Enterprises Inc	724 Shares	28,591	27,186
	Williams Cos Inc	2,862 Shares	70,652	77,589
	Wintrust Finl Corp	553 Shares	36,947	48,139
	YRC Worldwide Inc	2,680 Shares	31,037	26,934
	Zagg Incorporated	1,169 Shares	16,519	20,223
	Total Common and Preferred Stock		14,324,348	17,195,743
	Corporate Bonds and Notes			
	Abbott Labs	2.000% Matures 3/15/20		
		79,000 face value	$ 79,062	$ 77,686
	Abbvie Inc	2.900% Matures 11/06/22		
		78,000 face value	78,822	75,689
	Actavis Funding SCS	3.000% Matures 3/12/20		
		77,000 face value	77,875	76,635
	Air Lease Corp	3.625% Matures 4/01/27		
		86,000 face value	86,371	78,849
	Altra Group Inc	2.625% Matures 1/14/20		
		83,000 face value	82,527	82,549

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Bonds and Notes (Continued)			
	American Express Co	2.200% Matures 10/30/20		
		85,000 face value	$ 83,190	$ 83,044
	Apple Inc	1.800% Matures 5/11/20		
		79,000 face value	79,131	77,661
	AT & T Inc	3.200% Matures 3/01/22		
		84,000 face value	82,864	82,430
	BACCT 2014-A1 A	2.4532% Matures 6/15/21		
		157,000 face value	156,965	157,251
	Bank Amer Corp	2.369% Matures 7/21/21		
		82,000 face value	80,369	80,384
	Capital One Financial	4.750% Matures 7/15/21		
		79,000 face value	84,237	81,649
	Citigroup INC	2.750% Matures 4/25/22		
		84,000 face value	82,275	81,308
	COMER 17-A1 A1	2.000% Matures 3/17/23		
		122,000 face value	121,973	120,243
	CVS Health Corp	4.300% Matures 3/25/28		
		83,000 face value	83,503	81,872
	Dow Chemical Co	8.550% Matures 5/15/19		
		70,000 face value	74,049	73,366
	Ecopetrol Inc	5.875% Matures 9/18/23		
		70,000 face value	76,172	74,200
	Energy Transfer Partners	5.200% Matures 2/01/22		
		79,000 face value	81,890	81,931
	General Mtrs Co	2.5935% Matures 8/07/2020		
		83,000 face value	83,415	83,277
	Goldman Sachs Group Inc	2.905% Matures 7/24/23		
		85,000 face value	85,013	81,869
	Hewlett Packard Enterprise	3.600% Matures 10/15/20		
		76,000 face value	77,953	76,361
	HSBC Holdings PLC	4.000% Matures 3/30/22		
		81,000 face value	82,885	82,183
	JP Morgan Chase	3.375% Matures 5/01/23		
		83,000 face value	83,973	81,066
	Sabine Pass Liquefaction LLC	.875% Matures 3/30/26		
		75,000 face value	83,970	80,437
	Salesforce Com Inc	3.250% Matures 4/11/23		
		83,000 face value	83,172	82,513
	Sherwin Williams Co	2.250% Matures 5/15/20		
		84,000 face value	82,627	82,605

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Bonds and Notes (Continued)			
	Southern Co	2.350% Matures 7/01/21		
		85,000 face value	$ 82,738	$ 82,336
	Sumitomo Mitsui Finl Group	3.4954% Matures 7/01/21		
		82,000 face value	82,098	83,289
	Toyota Moter Cred	2.250% Matures 10/18/23		
		86,000 face value	83,114	80,996
	Verizon Communications Inc	3.4425% Matures 5/15/25		
		82,000 face value	82,696	81,907
	Wells Fargo	3.069% Matures 1/24/33		
		84,000 face value	85,371	81,684
	Total Corporate Bonds and Notes		2,570,300	2,527,270
	Government Securities			
	U S Treasury Note	2.125% Matures 1/31/21		
		99,000 face value	$ 97,831	$ 97,821
	United States Treas Nts	.375% Matures 7/15/27		
		79,000 face value	78,948	78,708
	United States Treas Nts	1.375% Matures 10/31/20		
		32,000 face value	31,489	31,130
	United States Treas Nts	2.125% Matures 12/31/22		
		419,000 face value	414,904	408,476
	United States Treas Nts	2.250% Matures 8/15/27		
		272,000 face value	262,756	258,878
	United States Treas Nts	2.500% Matures 3/31/23		
		84,000 face value	82,990	83,160
	United States Treas Nts	2 .750% Matures 2/15/28		
		110,000 face value	108,769	109,059
	U S Treasury TIPS	.125% Matures 4/15/20		
		79,000 face value	83,517	83,608
	FHR 3778 D	3.500% Matures 3/15/25		
		9,064 face value	9,875	9,178
	FNMA Pass-through long 30 years	4.000% Matures 2/01/48		
		210,162 face value	214,168	214,554
	FNR 2005-15 JN	4.500% Matures 2/25/23		
		5,057 face value	5,396	5,096
	FHLMC	2.0600% Matures 1/15/22		
		10,876 face value	10,965	10,664
	FHLMC Gold Comb	4.0000% Matures 8/1/47		
		156,879 face value	165,912	160,136
	Total Government Securities		1,567,520	1,550,468

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Real Estate Income Trust			
	Blackstone REIT	230,555 Shares	$ 2,327,391	$ 2,492,142
	Total Real Estate Income Trust		2,327,391	2,492,142
	Total Investments		$ 36,152,393	$ 40,424,380

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED JUNE 30, 2018

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(e) Leased Rental	(f) Expense Incurred With Transaction	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets								
* Morgan Stanley	Morgan Stanley Bank Deposit	13,139,933	-	-	-	13,139,933	13,139,933	-
* Morgan Stanley	Morgan Stanley Bank Deposit	-	13,303,015	-	-	13,303,015	13,303,015	-
Northern Instl	Northern Institutional Gov't Select	3,251,352	-	-	-	3,251,352	3,251,352	-
Northern Instl	Northern Institutional Gov't Select	-	3,260,137	-	-	3,260,137	3,260,137	-

There were no category (i) (ii) or (iv) reportable transactions for the year ended June 30, 2018

* *Indicates party-in-interest*

Schedule SB, Line 26 - Schedule of Active Participant Data

July 1, 2017 Valuation
Ashtabula County Medical Center Retirement Plan
(EIN: 34-0726081; PN: 001)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	-	-	-	-	-	-	-	-	-
25 to 29	-	-	-	-	-	-	-	-	-	-
30 to 34	-	3 (*)	-	-	-	-	-	-	-	-
35 to 39	4 (*)	10 (*)	11 (*)	-	-	-	-	-	-	-
40 to 44	1 (*)	10 (*)	16 (*)	1 (*)	-	-	-	-	-	-
45 to 49	2 (*)	16 (*)	24 (*)	13 (*)	2 (*)	-	-	-	-	-
50 to 54	-	18 (*)	24 (*)	14 (*)	13 (*)	2 (*)	-	-	-	-
55 to 59	-	11 (*)	25 (*)	17 (*)	13 (*)	8 (*)	2 (*)	-	-	-
60 to 64	-	10 (*)	18 (*)	14 (*)	12 (*)	12 (*)	5 (*)	4 (*)	-	-
65 to 69	-	-	1 (*)	1 (*)	1 (*)	2 (*)	2 (*)	1 (*)	2 (*)	-
70 & up	1 (*)	1 (*)	1 (*)	-	-	1 (*)	-	-	-	-

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

Schedule SB, Part V – Statement of Actuarial Assumptions and Methods
Ashtabula County Medical Center Retirement Plan
July 1, 2017 Valuation
EIN/PN: 34-0726081 / 001

Statement of Actuarial Assumptions and Methods

Minimum Funding Annual Interest Rates

24-month segment rates averaged through the end of February 2017 and published in March 2017 (as prescribed by IRC 430) and adjusted to reflect BBA:

- Segment 1 (0 – 5 years) 4.16%
- Segment 2 (5 to 20 years) 5.72%
- Segment 3 (more than 20 years) 6.48%
- Effective Interest Rate 5.88%

Maximum Deductible Annual Interest Rates

24-month segment rates averaged through the end of February 2017 and published in March 2017 (as prescribed by IRC 430) as follows:

- Segment 1 (0 – 5 years) 1.62%
- Segment 2 (5 to 20 years) 3.80%
- Segment 3 (more than 20 years) 4.75%
- Effective Interest Rate 4.07%

Salary Scale

Not applicable

Mortality

Healthy: RP-2000 static, non-generational Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA, to between 7 and 15 years beyond the year of the obligation, male and female, with separate rates for annuitants and nonannuitants (as prescribed by IRC 430).

Disabled: Alternative disabled life mortality tables as defined under Revenue Ruling 96-7.

Rates of Retirement

Actives are assume to retire based on age as follows:

Age	Rate
55	5%
56-61	2
62-64	25
65-69	90%
70+	100

Weighted Average Retirement Age for actives is 63. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rationale: as selected by Plan Sponsor to best estimate future experience.

Deferred vested participants are assumed to begin benefits at age 65 (or current age if later).

Rationale: as selected by Plan Sponsor.

Statement of Actuarial Assumptions and Methods (Continued)

Rates of Turnover

Sample rates by age as follows:

Age	Rate
35	14.86%
40	13.10
45	10.84
50	7.92
55	4.40

Rationale: as selected by Plan Sponsor to best estimate future experience.

Rates of Disability

Sample rates by age as follows:

Age	Male	Female
35	0.04%	0.07%
40	0.08	0.13
45	0.16	0.24
50	0.33	0.40
55	0.69	0.64

Rationale: as selected by Plan Sponsor to best estimate future experience.

Assumptions Made In Valuing Spouse's Benefit

75% of male and 60% of female employees included in the valuation are assumed to be married. This percentage is used as the probability that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Rationale: as selected by Plan Sponsor in 2006 to best estimate future experience.

Optional Form Selection

Participants are assumed to elect the normal form, a life annuity for single participants or a 50% joint and survivor annuity for married participants.

Provision for Expenses

Administrative expenses are estimated to be the actual expenses for the prior year, including trust payable provider fees and PBGC premiums.

Standing Elections

The client has not signed an election that provides for the automatic use of the Carryover Balance and/or Prefunding Balance if necessary to meet the minimum funding requirement.

Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date.

Funding Method

Pure Unit Credit

Statement of Actuarial Assumptions and Methods (Continued)

Employees Valued	Only participants as of the valuation date were valued.
Changes in Assumptions and Methods since the Last Actuarial Valuation	The interest rates used for determining the funding target were 4.43%, 5.91% and 6.65%. These rates were updated to the rates required for the current plan year. The mortality table for the funding target was changed as required under PPA '06.

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED JUNE 30, 2018

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(e) Leased Rental	(f) Expense Incurred With Transaction	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets								
* Morgan Stanley	Morgan Stanley Bank Deposit	13,139,933	-	-	-	13,139,933	13,139,933	-
* Morgan Stanley	Morgan Stanley Bank Deposit	-	13,303,015	-	-	13,303,015	13,303,015	-
Northern Instl	Northern Institutional Gov't Select	3,251,352	-	-	-	3,251,352	3,251,352	-
Northern Instl	Northern Institutional Gov't Select	-	3,260,137	-	-	3,260,137	3,260,137	-

There were no category (i) (ii) or (iv) reportable transactions for the year ended June 30, 2018

* *Indicates party-in-interest*

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

2017

This Form is Open to Public Inspection

For calendar plan year 2017 or fiscal plan year beginning 07/01/2017 and ending 06/30/2018

▶ **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
Ashtabula County Medical Center Retirement Plan

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-0726081

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 07 Day 01 Year 2017

2 Assets:

a Market value	**2a**	39,665,891
b Actuarial value	**2b**	39,665,891

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	397	20,983,456	20,983,456
b For terminated vested participants	159	3,790,040	3,790,040
c For active participants	349	11,478,570	11,788,862
d Total	905	36,252,066	36,562,358

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**	5.88%
6 Target normal cost	**6**	939,553

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 Laurence E. Scherer VES — Signature of actuary

4/2/2019 — Date

Lawrence E. Scherer — Type or print name of actuary

1706389 — Most recent enrollment number

FINDLEY, INC. — Firm name

216-875-1920 — Telephone number (including area code)

1660 WEST 2ND STREET, SUITE 900

CLEVELAND OH 44113 — Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	1,504,076	835,727
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	1,504,076	835,727
10	Interest on line 9 using prior year's actual return of 11.68%	175,676	97,613
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		3,852,839
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.08%		234,253
	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		4,087,092
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1,679,752	933,340

Part III Funding Percentages

14	Funding target attainment percentage	14	101.34%
15	Adjusted funding target attainment percentage	15	108.48%
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	91.13%
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
10/02/2017	334,884	0			
01/12/2018	334,884	0			
03/15/2018	334,884	0			
07/13/2018	1,235,000	0			
10/15/2018	1,235,000	0			
			Totals ► 18(b)	3,474,652	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3,287,985

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:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
4.16 %	5.72 %	6.48%	

b Applicable month (enter code)	21b	4
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	939,553
b Excess assets, if applicable, but not greater than line 31a	31b	490,441

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	449,112

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	449,112
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	3,287,985
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	2,838,873
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	0
43 Excess installment acceleration amount to be carried over to future plan years	43	0

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Ashtabula County Medical Center Retirement Plan
July 1, 2017 Valuation
EIN/PN: 34-0726081 / 001

The retirement age assumption varies by age. The average retirement age was determined as illustrated below, as a weighted average of the age at retirement, with weights equal to the number of a hypothetical 1,000 employee group assumed to retire at such age, according to the retirement assumption.

Retirement Age	# Employees Not Yet Retired	% Assumed to Retire	Number Retiring	Product of Age and # Retiring
55	1,000.00	5.00%	50.00	2,750
56	950.00	2.00	19.00	1,064
57	931.00	2.00	18.62	1,061
58	912.38	2.00	18.25	1,059
59	894.13	2.00	17.88	1,055
60	876.25	2.00	17.53	1,052
61	858.72	2.00	17.17	1,047
62	841.55	25.00	210.39	13,044
63	631.16	25.00	157.79	9,941
64	473.37	25.00	118.34	7,574
65	355.03	90.00	319.53	20,769
66	35.50	90.00	31.95	2,109
67	3.55	90.00	3.20	214
68	0.35	90.00	0.32	22
69	0.03	90.00	0.03	2
70	0.00	100.00	0.00	0

Sum of (Retirement Age * Number Retiring)	62,763
Divided by hypothetical group size	1,000
Equals Weighted Average Retirement Age for Salaried Employees	63

Summary of Principal Plan Provisions

Plan Sponsor

Ashtabula County Medical Center

EIN/PN

34-0726081/001

Effective Date

July 1, 1969; restated effective July 1, 2015.

Plan Year

The 12-month period beginning each July 1.

Participation

All bargained ACMC employees hired prior to December 31, 2007 and all non-bargained ACMC employees hired prior to December 31, 2006 became participants on the first of the month coinciding with or next following attainment of age 21 and the completion of one year of credited service.

Compensation

Gross taxable income received from the employer and reported on the participant's W-2.

Social Security Covered Compensation

Average of the Taxable Wage Bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the participant attains (or will attain) Social Security Retirement Age.

Social Security Covered Compensation was frozen effective December 31, 2006 for non-bargained employees and December 31, 2008 for bargained employees.

Average Monthly Compensation

The average of the highest three consecutive calendar years of plan-eligible compensation (annualized if a participant's compensated hours in any calendar year are less than 1,800) during the ten-year period ending on the earlier of (1) the participant's termination date or retirement date, or (2) the date benefit service was frozen.

Vesting Service

One year is credited for each calendar year in which a participant's actual hours (compensated plus non-compensated) are at least 1,000.

Benefit Service

Determined according to the following schedule based on compensated hours of service in a calendar year:

Compensated Hours	Months of Service	Compensated Hours	Months of Service
1,800+	12	750-999	5
1,640-1,799	10	600-749	4
1,480-1,639	9	450-599	3
1,320-1,479	8	300-449	2
1,160-1,319	7	150-299	1
1,000-1,159	6	0-149	0

Benefit service was frozen effective December 31, 2006 for non-bargained employees and effective December 31, 2008 for bargained employees.

Summary of Principal Plan Provisions (Continued)

Normal Retirement Date (NRD)

The first of the month coincident with or next following attainment of age 65 and 5 years of service.

Normal Retirement Benefit

The greater of (i), (ii), or (iii):

(i) Non-bargained participants: 1.30% of average monthly compensation plus 0.50% of average monthly compensation in excess of Social Security covered compensation for each year of benefit service up to a maximum of 25 years.

Bargained participants: 1.30% of average monthly compensation plus 0.65% of average monthly compensation in excess of Social Security covered compensation for each year of benefit service up to a maximum of 25 years.

(ii) $15.00 per month for each year of benefit service up to a maximum of 25 years.

(iii) The accrued benefit under the plan provisions in effect as of June 30, 1989.

In determining the normal retirement benefit, benefit service is computed as the sum of:

(i) Benefit service at the determination date, and

(ii) The ratio of (a) elapsed time from date of plan entry to the determination date, multiplied by (b) the number of years from the date of determination to NRD.

Accrued Benefit

The normal retirement benefit multiplied by the credited service ratio. The numerator of the credited service ratio equals credited service at the date of determination and the denominator equals credited service at the determination date plus the number of years from the date of determination to NRD.

Normal Retirement Benefit

Eligibility:

Age 65, or fifth anniversary if later.

Monthly Benefit:

The Normal Retirement Benefit determined as of NRD.

Summary of Principal Plan Provisions (Continued)

Early Retirement Benefit

Eligibility:

Age 55 and 5 years of service.

Monthly Benefit:

The Accrued Benefit at early retirement reduced actuarially for commencement prior to age 62 in accordance with the following:

Age	Early Retirement Factor
62	1.000
61	0.800
60	0.718
59	0.646
58	0.582
57	0.526
56	0.475
55	0.430

Late Retirement Benefit

Eligibility:

Retirement after NRD.

Monthly Benefit:

The Accrued Benefit at late retirement.

Disability Benefit

Eligibility:

Upon total and permanent disability and completion of at least 10 years of service.

Monthly Benefit:

The Accrued Benefit determined as of the date of disablement, payable on the first of the month following five months of disability and without reduction for early commencement.

Termination Benefit

Eligibility:

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

Monthly Benefit:

The Accrued Benefit at termination, commencing in full at age 65, or in a reduced amount under the early retirement provisions.

Summary of Principal Plan Provisions (Continued)

Death Benefit

Eligibility:

100% vested and married for at least one year.

Monthly Benefit:

A monthly benefit for life commencing at the time the participant would have been eligible for retirement. The benefit is equal to 50% of the benefit vested on the date of death, adjusted as appropriate for early commencement and the 50% Joint and Survivor Annuity form of payment.

Optional Forms of Payments

Life Annuity
Joint and 50%, 66 2/3%, 75%, or 100% Survivor Annuity
5 or 10 Year Certain and Continuous Annuity
Lump Sum

The conversion factors for the annuity optional forms are based on the 1951 Group Annuity Mortality Table for Males, projected to 1975 by Projection Scale C, with an age setback of 2 years for males and females, and an interest rate of 8.00%.

Lump sum factors are calculated using the preceding May PPA lump sum segment rates, the mortality table per Rev. Rul. 2007-67, and on a normal retirement (deferred to age 65) basis.

Maximum Benefit Limit

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

Plan Compensation Limit

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

Changes in Plan Provisions

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

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
	Mutual Funds			
	Victory Trivalent International	100,717 Shares	$ 1,183,680	$ 1,462,416
	Morgan Stanley Bank Deposit	1,075,277 Shares	1,075,277	1,075,277
	Harding Loener Emerging Markets Portfolio	11,185 Shares	672,202	633,542
	Harbor International Fund	29,707 Shares	2,031,918	1,979,409
	Eaton Vance Floating Rate-I	181,764 Shares	1,610,557	1,639,516
	Pioneer Strategic Income Fd	364,233 Shares	3,889,619	3,798,954
	Total Mutual Funds		10,463,253	10,589,114
	Exchange Traded Funds			
	Ishares Russell 2000 Index Fund	13,332 Shares	1,831,542	2,183,382
	Vanguard US Total Stock Market Index ETF	27,441 Shares	3,021,819	3,853,540
	Vedanta Ltd	2,406 Shares	46,221	32,721
	Total Exchange Traded Funds		4,899,582	6,069,643
	Common and Preferred Stock			
	Aci Worldwide In	1,373 Shares	32,222	33,872
	Acs Activ De Construc Y Serv	6,530 Shares	44,053	52,911
	Aercap Holdings NV	1,447 Shares	66,597	78,355
	Aes Corp	8,891 Shares	93,997	119,228
	AIA Group Ltd-Sp ADR	1,417 Shares	37,201	49,561
	Air Transport Services Group Inc.	1,823 Shares	41,749	41,182
	Airbus Group (Netherlands)	1,857 Shares	36,416	54,345
	Alibaba Group Holding ADR	488 Shares	68,358	90,539
	Alphabet Inc Cl A	206 Shares	143,278	232,613
	Altria Group Inc	1,272 Shares	40,853	72,237
	Ambev SA ADR (Brazil)	7,141 Shares	41,269	33,063
	AMC Entertainment Hlds CL A	1,092 Shares	14,469	17,363
	American International Group	2,582 Shares	154,074	136,898
	American Woodmark Corp	472 Shares	40,178	43,212
	Amn Healthcare Svcs Inc	1,244 Shares	49,693	72,898
	Amneal Phaarmaceuticals Inc	1,516 Shares	22,228	24,878
	Anadarko Petroleum Corp	1,989 Shares	116,432	145,694
	Anika Therapeutics Inc.	280 Shares	14,564	8,960
	Apogee Enterprises Inc	818 Shares	38,584	39,403
	Apple Computer Inc	1,954 Shares	231,807	361,705
	Applied Matls Inc	2,010 Shares	36,141	92,842
	Arcelormittal Sa Luxembourg	1,573 Shares	38,000	45,271
	Argo Group International	583 Shares	30,696	33,901
	Ase Industrial Holding Co Ltd	6,425 Shares	33,129	29,555
	Asgn Inc	572 Shares	24,820	44,725
	Axa Adr	1,854 Shares	48,587	45,490
	Azul S A	1,310 Shares	28,351	21,432

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	B&g Foods Inc Cl A	866 Shares	$ 25,507	$ 25,893
	Bae Sys Plc Spons Adr	1,503 Shares	50,030	51,339
	Baidu Inc Spons Adr	512 Shares	94,530	124,416
	Banco Do Brasil Spons Adr	4,720 Shares	48,392	34,903
	Banco Santander Cent Hispano S A	7,485 Shares	49,604	39,970
	Bancolombia Adr	573 Shares	22,253	27,378
	Bank America Corp	4,941 Shares	78,241	139,287
	Barloworld Ktd ADR	1,402 Shares	21,641	13,267
	Barnes Group Inc	513 Shares	25,992	30,216
	Basic Energy Svcs Inc New	1,743 Shares	34,782	19,365
	Bayer A Gadrmodel	2,562 Shares	81,961	70,557
	Baxter Intl Inc	1,031 Shares	49,608	76,129
	Berkshire Hathaway Inc-Cl B	1,808 Shares	262,081	337,463
	Bhp Billiton Plc Spons Adr	1,190 Shares	39,457	53,491
	Bidvest Group LTD-SPONS ADR	664 Shares	17,895	19,088
	Biotelemetry Inc	1,877 Shares	53,566	84,465
	Bloomin' Brands inc	1,079 Shares	21,601	21,688
	Bofi Holding Inc	842 Shares	21,909	34,446
	Booking Hldgs Inc	102 Shares	118,463	206,763
	Boot Barn Holdings INC	1,298 Shares	17,771	26,934
	Boston Private Finl Hldgs Inc	2,457 Shares	38,698	39,066
	Bottomline Technologies Inc	1,191 Shares	33,015	59,348
	Brandywine Rlty Tr New	1,915 Shares	31,781	32,325
	Braskem SA ADR (Brazil)	1,708 Shares	50,518	44,408
	Brilliance China Auto Hldg Ltd ADR	755 Shares	21,933	13,627
	Bristol Myers Squibb Co	1,869 Shares	65,832	103,430
	British Amern Tob Plc Spns Adr	982 Shares	61,118	49,542
	Brooks Automation Inc	450 Shares	13,207	14,679
	Bryn Mawr Bank Corp	795 Shares	29,172	36,809
	Builders Firstsource Inc	1,283 Shares	29,104	23,466
	C S X Corp	1,838 Shares	27,154	117,228
	Caci Intl Inc Cl A	254 Shares	33,740	42,812
	Callaway Golf Co	2,436 Shares	35,038	46,211
	Callon Petroleum Co	2,410 Shares	37,451	25,883
	Canadian Natural Resources	1,658 Shares	53,068	59,804
	Cantel Medical Corporation	459 Shares	39,745	45,147
	Carlsberg AS-B-SPON ADR	2,049 Shares	37,699	48,265
	Carrefour SA-SP ADR	12,288 Shares	54,252	39,798
	Casella Waste Sys Inc Cl A	1,394 Shares	27,091	35,700
	Caseys General Stores Inc	270 Shares	29,375	28,372
	Cavco Industries Inc	122 Shares	21,937	25,333

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
	Common and Preferred Stock (Continued)			
	Celgene Corp	1,560 Shares	$ 171,818	$ 123,895
	Charles Schwab Corp	2,800 Shares	81,910	143,080
	Chatham Lodging Trust	1,378 Shares	26,866	29,241
	Chevron Corporation	795 Shares	63,243	100,512
	Childrens Place	473 Shares	58,849	57,138
	China Natl Bldg Matl Co Ltd	689 Shares	36,831	34,119
	Chunghwa Telecom LTD (China)	515 Shares	17,473	18,499
	Citigroup Inc	1,957 Shares	67,708	130,962
	CK Hutchison Hldgs Ltd ADR	4,000 Shares	49,824	42,240
	Codexis Inc	1,525 Shares	23,573	21,960
	Cognizant Technology Solutions Corp	2,054 Shares	127,087	162,245
	Columbia Ppty Tr Inc	1,484 Shares	33,209	33,702
	Comfort Systems Usa Inc	1,915 Shares	71,398	87,707
	Compass Minerals International Inc	345 Shares	23,328	22,684
	Conduent Inc	648 Shares	10,649	11,774
	Control4 Corp	1,030 Shares	23,740	25,039
	Cooper Standard Holdings Inc	289 Shares	28,691	37,764
	Corecivic Inc	905 Shares	20,965	21,620
	Core Labs N V	1,133 Shares	120,211	142,996
	Corning Inc	3,586 Shares	77,290	98,651
	Costco Wholesale Corp New	315 Shares	16,365	65,829
	Covanta Holding Corp	2,028 Shares	30,319	33,462
	Cowen Group Inc New	2,187 Shares	31,395	30,290
	Credicorp Limited	152 Shares	25,048	34,218
	Ctrip.Com Adr	1,071 Shares	50,652	51,012
	Customers Bancorp Inc	1,409 Shares	37,878	39,987
	Daimler Ag	2,239 Shares	44,137	35,925
	Dave & Busters Entmt Inc	421 Shares	19,495	20,040
	Dbs Group Hldgs Ltd Sponsd Adr	591 Shares	32,228	46,136
	Delek Us Hldgs Inc New	1,337 Shares	46,531	67,077
	Deutsche Boerse Ag-Unspon Adr	3,871 Shares	42,065	51,592
	Deutsche Post Ag Spons Adr	1,156 Shares	51,058	37,751
	Diebold Inc	858 Shares	15,817	10,253
	DNB ASA-Spon Adr	2,544 Shares	42,554	49,723
	Dycom Inds Inc	350 Shares	35,203	33,079
	E. On SE Spons Adr	4,675 Shares	38,056	49,965
	Eagle Bancorp. Inc.	505 Shares	29,051	30,957
	Eastgroup Pptys Inc Reit	409 Shares	37,027	39,084
	Ecopetrol SA-Sponsored ADR	1,154 Shares	14,188	23,715
	Edwards Lifesciences Corp	1,767 Shares	177,190	257,222
	Enersys	444 Shares	29,864	33,140

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
	Common and Preferred Stock (Continued)			
	Engie	3,006 Shares	$ 41,398	$ 46,082
	Entegris Inc	1,816 Shares	43,621	61,562
	Equity Commonwealth	1,207 Shares	36,403	38,021
	Essilor Intl - Unspon ADR	746 Shares	45,727	52,652
	Euronet Worldwide Inc	390 Shares	30,182	32,670
	Express Scripts Hldg	982 Shares	73,478	75,820
	Extreme Networks Inc.	3,414 Shares	43,537	27,175
	Facebook Inc - A	1,551 Shares	262,837	301,390
	Fast Retailing Co Unspons Adr	1,187 Shares	52,440	54,557
	Fastenal Co	3,098 Shares	139,335	149,107
	FCB Financial Holdings	879 Shares	38,130	51,685
	Ferroglobe Plc	2,327 Shares	37,406	19,942
	Finisar Corporation	1,878 Shares	34,370	33,804
	First Bancorp North Carolina	855 Shares	31,746	34,978
	First Busey Corp	1,269 Shares	39,161	40,253
	First Fndtn Inc	1,640 Shares	31,129	30,406
	FirstRand Limited	591 Shares	23,230	27,549
	Firstcash Inc	350 Shares	23,107	31,448
	Five9 Inc	623 Shares	22,517	21,537
	Fmc Corp	1,777 Shares	86,224	158,526
	Forum Energy Technologies	1,850 Shares	26,479	22,848
	G Iii Apparel	1,058 Shares	32,992	46,975
	GALP Energia	3,016 Shares	28,052	28,761
	Genworth Financial	3,960 Shares	13,318	17,820
	Gpo Aeroportuario Del Pac Sab Spon ADR B	165 Shares	15,098	15,330
	Green Dot Corp.	383 Shares	24,045	28,108
	Greenlight Capital Re LTD-A	1,309 Shares	28,405	18,588
	Grupo Financiero Banorte- Spon ADR	861 Shares	26,768	25,577
	Grupo Supervielle S A	1,233 Shares	31,462	13,045
	Halliburton Co	2,222 Shares	74,819	100,123
	Hdfc Bk Ltd Spons Adr	1,626 Shares	143,596	170,763
	HealthequityInc.	589 Shares	28,678	44,234
	Heartland Financial Usa Inc	713 Shares	34,798	39,108
	Hillenbrand Inc	838 Shares	30,671	39,512
	Hilltop Holdings Inc	1,090 Shares	31,087	24,056
	Hilton Grand Vacations Inc	536 Shares	21,465	18,599
	HomeStreet Inc	1,095 Shares	33,288	29,510
	Honeywell Intl Inc	734 Shares	32,584	105,733
	Houlihan Lokey Inc	762 Shares	37,091	39,030
	Hsbc Hldgs Plc Sponsored Adr New	1,012 Shares	42,353	47,706
	Hubspot Inc	331 Shares	35,680	41,507

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
	Common and Preferred Stock (Continued)			
	Humana Inc	490 Shares	$ 27,342	$ 145,839
	Iberiabank Corp	370 Shares	28,609	28,046
	Icu Med Inc	179 Shares	27,342	52,563
	Imperva Inc	422 Shares	20,201	20,362
	Indust & Comm Bank China Unspons Adr	5,598 Shares	89,093	83,769
	Innerworkings In	1,933 Shares	20,729	16,798
	Installed Bldg Prods Inc	698 Shares	38,223	39,472
	Integrated Device Technology Inc	1,126 Shares	28,628	35,897
	Inter Parfums Inc	698 Shares	24,598	37,343
	Intesa Sanpaolo Spons Adr	2,392 Shares	39,880	41,666
	Investors Bancorp Inc	2,196 Shares	31,376	28,087
	Itau Unibanco Holding Spons Adr	2,885 Shares	38,675	29,946
	J P Morgan Chase & Co	1,203 Shares	63,570	125,353
	J2 Global Inc	401 Shares	34,222	34,731
	James River Group Holdings, Ltd.	625 Shares	24,248	24,556
	JD Com Inc Spon ADR Cl A	464 Shares	18,188	18,073
	Julius Baer Group LTD-UN ADR	3,960 Shares	40,134	46,486
	Kasikornbank PCL-Unspon ADR	632 Shares	14,082	15,261
	Koc Holding As Unspons Adr	915 Shares	19,266	14,201
	Korn Ferry Intl	519 Shares	28,429	32,142
	Kraft Heinz Co	1,888 Shares	141,160	118,604
	Lakeland Financial Corp	752 Shares	33,018	36,239
	Laredo Petroleum Holdnigs Inc	3,076 Shares	27,038	29,591
	Ligand Pharmaceuticals	262 Shares	32,859	54,279
	Littelfuse Inc	168 Shares	33,665	38,334
	LivaNova Plc	399 Shares	18,917	39,828
	Lloyds Banking Group Plc-Spons Adr	13,225 Shares	47,161	44,039
	Loma Negra Corp	1,008 Shares	22,567	10,342
	Lowes Cos Inc	1,260 Shares	44,621	120,418
	Lydall Inc.	606 Shares	35,855	26,452
	Madden Steven Ltd	476 Shares	18,868	25,276
	Malibu Boats Inc	693 Shares	23,543	29,064
	Marathon Petroleum Corp	1,345 Shares	31,984	94,365
	Matador Resources Company	1,160 Shares	31,055	34,858
	Mbia Inc	2,677 Shares	22,833	24,200
	Mcdermott Intl Inc	1,222 Shares	26,657	24,012
	Medidata Solutions Inc	587 Shares	38,456	47,289
	Meta Financial Group	385 Shares	37,405	37,499
	Methode Electronics Inc	825 Shares	37,216	33,248
	Metlife Inc	33,248 Shares	86,261	92,912
	Michaels Cos Inc	1,867 Shares	36,358	35,790

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	Modine Mfg Co	2,006 Shares	$ 26,417	$ 36,610
	Mondi Plc ADR	503 Shares	24,144	27,241
	Monolithic Power	410 Shares	34,759	54,805
	Morgan Stanley	2,174 Shares	67,995	103,048
	Motorcar Pts Amer Inc	1,039 Shares	26,738	19,440
	MRC Global Inc	1,803 Shares	28,681	39,071
	Naspers Ltd Spons Adr	1,838 Shares	79,797	93,467
	Nationstar Mortgage Holdings	1,261 Shares	21,790	22,105
	NCI Building Systems	1,202 Shares	19,893	25,242
	Neenah Paper Inc	368 Shares	31,416	31,225
	Net 1 Ueps Tech	2,403 Shares	27,934	21,819
	Netease Com Inc Spons Adr	193 Shares	66,336	48,765
	New Media Investment Group	1,331 Shares	22,838	24,597
	New Oriental Education-Spons Adr	340 Shares	30,031	32,184
	NextEra Energy	662 Shares	75,185	110,574
	Nmi Hldgs Inc	1,268 Shares	21,079	20,668
	Northwestern Corp	252 Shares	15,624	14,427
	Novanta Inc	705 Shares	39,194	43,922
	Nuvasive Inc	620 Shares	39,455	32,314
	Orange-Spon ADR	2,859 Shares	46,128	47,660
	Orasure Technologies Inc	665 Shares	12,599	10,953
	Orbotech LTD	339 Shares	12,636	20,950
	Otsuka Hlds Ltd (Japan)	2,148 Shares	48,090	52,010
	Otter Tail Corporation	631 Shares	24,571	30,036
	Oxford Industries Inc	382 Shares	30,545	31,698
	Patrick Industries Inc	865 Shares	40,911	49,175
	Patterson Cos Inc	770 Shares	18,522	17,456
	Paypal Hldgs Inc	2,059 Shares	109,167	171,453
	Perusahaan Perseroan Persero Adr	1,289 Shares	39,991	33,527
	Philip Morris International	1,826 Shares	147,297	147,431
	Picc Ppty & Cas Co Ltd	973 Shares	48,261	38,920
	PJSC Lukoil ADR	1,067 Shares	58,339	74,023
	Polyone Corp	697 Shares	23,312	30,124
	Popular Inc	552 Shares	19,589	24,956
	Portland General Electric Co	924 Shares	42,355	39,510
	Pri Pointe Homes Inc	1,850 Shares	33,150	30,266
	Proofpoint Inc	247 Shares	21,156	28,482
	Pt Bank Mandiri Unspons Adr	3,378 Shares	37,252	32,295
	Qualcomm Inc	5,471 Shares	312,114	307,033
	Qurate Retail Inc	4,195 Shares	93,375	89,018
	Radian Group Inc	1,408 Shares	29,392	22,838

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	Red Robin Gourmet Burgers Inc	449 Shares	$ 22,663	$ 20,923
	Republic First Bancorp Inc	2,393 Shares	22,229	18,785
	Retail Opportunity Investments	1,733 Shares	34,410	33,204
	Ring Energy Inc	2,648 Shares	37,112	33,418
	RLJ Lodging Trust	1,394 Shares	29,636	30,738
	Roche Hldg Ltd Spons Adr	1,693 Shares	53,181	47,005
	Ross Stores Inc	2,343 Shares	138,236	198,569
	Royal Dsm Nv-Adr	1,961 Shares	33,241	49,295
	Royal Dutch-ADR A	759 Shares	40,761	52,546
	Saia Inc	635 Shares	28,279	51,340
	Sap Aktiengesellschaft Spns Adr	467 Shares	52,794	54,013
	Sberbank-Sponsor ADR	2,634 Shares	31,009	36,631
	Schlumberger Ltd	2,988 Shares	222,797	200,286
	Seaworld Entertainment	1,671 Shares	20,740	36,461
	Secom Ltd Spons Adr	2,624 Shares	48,042	50,382
	Selective Ins Group Inc	723 Shares	31,523	39,765
	Semtech Corp	848 Shares	33,827	39,898
	Seven & I Holdings-Unspons Adr	2,300 Shares	46,547	50,157
	Silicon Moti-Adr	849 Shares	42,691	44,904
	Simmons 1st Natl Corp Cl A	1,448 Shares	40,813	43,295
	Smith & Nephew Plc-Adr	1,314 Shares	41,941	49,314
	South Jersey Inds Inc	911 Shares	29,651	30,491
	South State Corp	418 Shares	37,196	36,053
	SP Plus Corp	588 Shares	22,867	21,874
	Spirit Realty Capital Inc	3,983 Shares	29,306	31,983
	SPS Commerce Inc	476 Shares	31,383	34,976
	Stars Group Inc	696 Shares	15,625	25,265
	Stewart Information Svcs Corp	747 Shares	30,321	32,173
	Stoneridge Inc	703 Shares	19,759	24,703
	Sumitomo Mitsui-Spons ADR	8,901 Shares	68,510	69,161
	Syneos Health Inc	688 Shares	26,432	32,267
	Taiwan Semiconductor Spons Adr	5,888 Shares	235,216	215,265
	Techtronic Industries Company LTD	1,473 Shares	46,484	41,071
	Telef Brasil - ADR	2,319 Shares	35,437	27,527
	Tenaris Sa-Adr	578 Shares	16,469	21,033
	Tencent Hldgs Ltd Unspons Adr	3,619 Shares	152,205	181,655
	Teradata Corp	2,808 Shares	105,387	112,741
	Ternium SA-Sponsored ADR	1,199 Shares	33,427	41,749
	Texas Capital Bancshares	396 Shares	32,848	36,234
	Texas Roadhouse Inc-Class A	611 Shares	35,494	40,027
	Textainer Group Holdings Ltd	1,621 Shares	33,691	25,774

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Common and Preferred Stock (Continued)				
	The Bancorp Inc	3,590 Shares	$ 35,880	$ 37,551
	Timken Co	806 Shares	36,628	35,101
	Tivity Health Inc	554 Shares	19,440	19,501
	Tivo Corp	1,538 Shares	29,145	20,686
	Toray Industries Inc ADR (Japan)	2,530 Shares	50,019	39,926
	Total S.A. Spon Adr	852 Shares	42,927	51,597
	Tpi Composites Inc	1,047 Shares	27,603	30,614
	Tractor Supply Co	3,363 Shares	221,199	257,236
	Turning Pt Brands Inc	704 Shares	15,042	22,458
	Tutor Perini Corp	1,092 Shares	26,891	20,147
	Tyson Foods Inc Class A	1,815 Shares	54,400	124,963
	U S Concrete Inc	391 Shares	24,280	20,528
	Unilever N V -Ny Shares	706 Shares	39,885	39,338
	Union Pac Corp	644 Shares	21,016	91,242
	United Community Banks Inc	1,415 Shares	39,694	43,398
	United Nat Foods Inc	430 Shares	18,249	18,344
	United Technologies Corp	624 Shares	43,396	78,019
	Unumprovident Corp	1,960 Shares	45,348	72,500
	Valero Energy Corp	652 Shares	13,928	72,261
	Verizon Communications	3,095 Shares	146,945	155,709
	Vipshop Holdings LTD (China)	1,433 Shares	13,306	15,548
	Visa Inc-Class A	2,496 Shares	181,774	330,595
	Vonage Holdings Corp	3,299 Shares	32,460	42,524
	Wells Fargo & Co New	2,012 Shares	75,130	111,545
	Werner Enterprises Inc	724 Shares	28,591	27,186
	Williams Cos Inc	2,862 Shares	70,652	77,589
	Wintrust Finl Corp	553 Shares	36,947	48,139
	YRC Worldwide Inc	2,680 Shares	31,037	26,934
	Zagg Incorporated	1,169 Shares	16,519	20,223
	Total Common and Preferred Stock		14,324,348	17,195,743
Corporate Bonds and Notes				
	Abbott Labs	2.000% Matures 3/15/20		
		79,000 face value	$ 79,062	$ 77,686
	Abbvie Inc	2.900% Matures 11/06/22		
		78,000 face value	78,822	75,689
	Actavis Funding SCS	3.000% Matures 3/12/20		
		77,000 face value	77,875	76,635
	Air Lease Corp	3.625% Matures 4/01/27		
		86,000 face value	86,371	78,849
	Altra Group Inc	2.625% Matures 1/14/20		
		83,000 face value	82,527	82,549

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Bonds and Notes (Continued)			
	American Express Co	2.200% Matures 10/30/20		
		85,000 face value	$ 83,190	$ 83,044
	Apple Inc	1.800% Matures 5/11/20		
		79,000 face value	79,131	77,661
	AT & T Inc	3.200% Matures 3/01/22		
		84,000 face value	82,864	82,430
	BACCT 2014-A1 A	2.4532% Matures 6/15/21		
		157,000 face value	156,965	157,251
	Bank Amer Corp	2.369% Matures 7/21/21		
		82,000 face value	80,369	80,384
	Capital One Financial	4.750% Matures 7/15/21		
		79,000 face value	84,237	81,649
	Citigroup INC	2.750% Matures 4/25/22		
		84,000 face value	82,275	81,308
	COMER 17-A1 A1	2.000% Matures 3/17/23		
		122,000 face value	121,973	120,243
	CVS Health Corp	4.300% Matures 3/25/28		
		83,000 face value	83,503	81,872
	Dow Chemical Co	8.550% Matures 5/15/19		
		70,000 face value	74,049	73,366
	Ecopetrol Inc	5.875% Matures 9/18/23		
		70,000 face value	76,172	74,200
	Energy Transfer Partners	5.200% Matures 2/01/22		
		79,000 face value	81,890	81,931
	General Mtrs Co	2.5935% Matures 8/07/2020		
		83,000 face value	83,415	83,277
	Goldman Sachs Group Inc	2.905% Matures 7/24/23		
		85,000 face value	85,013	81,869
	Hewlett Packard Enterprise	3.600% Matures 10/15/20		
		76,000 face value	77,953	76,361
	HSBC Holdings PLC	4.000% Matures 3/30/22		
		81,000 face value	82,885	82,183
	JP Morgan Chase	3.375% Matures 5/01/23		
		83,000 face value	83,973	81,066
	Sabine Pass Liquefaction LLC	.875% Matures 3/30/26		
		75,000 face value	83,970	80,437
	Salesforce Com Inc	3.250% Matures 4/11/23		
		83,000 face value	83,172	82,513
	Sherwin Williams Co	2.250% Matures 5/15/20		
		84,000 face value	82,627	82,605

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	Cost	Current Value
Corporate Bonds and Notes (Continued)				
Southern Co	2.350% Matures 7/01/21			
		85,000 face value	$ 82,738	$ 82,336
Sumitomo Mitsui Finl Group	3.4954% Matures 7/01/21			
		82,000 face value	82,098	83,289
Toyota Moter Cred	2.250% Matures 10/18/23			
		86,000 face value	83,114	80,996
Verizon Communications Inc	3.4425% Matures 5/15/25			
		82,000 face value	82,696	81,907
Wells Fargo	3.069% Matures 1/24/33			
		84,000 face value	85,371	81,684
	Total Corporate Bonds and Notes		2,570,300	2,527,270
Government Securities				
U S Treasury Note	2.125% Matures 1/31/21			
		99,000 face value	$ 97,831	$ 97,821
United States Treas Nts	.375% Matures 7/15/27			
		79,000 face value	78,948	78,708
United States Treas Nts	1.375% Matures 10/31/20			
		32,000 face value	31,489	31,130
United States Treas Nts	2.125% Matures 12/31/22			
		419,000 face value	414,904	408,476
United States Treas Nts	2.250% Matures 8/15/27			
		272,000 face value	262,756	258,878
United States Treas Nts	2.500% Matures 3/31/23			
		84,000 face value	82,990	83,160
United States Treas Nts	2 .750% Matures 2/15/28			
		110,000 face value	108,769	109,059
U S Treasury TIPS	.125% Matures 4/15/20			
		79,000 face value	83,517	83,608
FHR 3778 D	3.500% Matures 3/15/25			
		9,064 face value	9,875	9,178
FNMA Pass-through long 30 years	4.000% Matures 2/01/48			
		210,162 face value	214,168	214,554
FNR 2005-15 JN	4.500% Matures 2/25/23			
		5,057 face value	5,396	5,096
FHLMC	2.0600% Matures 1/15/22			
		10,876 face value	10,965	10,664
FHLMC Gold Comb	4.0000% Matures 8/1/47			
		156,879 face value	165,912	160,136
	Total Government Securities		1,567,520	1,550,468

ASHTABULA COUNTY MEDICAL CENTER
RETIREMENT PLAN
E.I.N. 34-0726081 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
JUNE 30, 2018

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral and Par or Maturity Value	(d) Cost	(e) Current Value
	Real Estate Income Trust			
	Blackstone REIT	230,555 Shares	$ 2,327,391	$ 2,492,142
	Total Real Estate Income Trust		2,327,391	2,492,142
	Total Investments		$ 36,152,393	$ 40,424,380

Schedule SB, line 25 – Change in Method
Ashtabula County Medical Center Retirement Plan
July 1, 2017 Valuation
EIN/PN: 34-0726081 / 001

There was a change in actuary due to the plan sponsor changing actuarial firms. This change receives automatic approval per Revenue Procedure 2017-56. For the July 1, 2017 valuation, the new actuary matched the prior actuary's funding target liability and funding target normal cost within 0.25% and matched actuarial value of assets exactly.