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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1958

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PARKVIEW HEALTH SYSTEM, INC.

10501 CORPORATE DRIVE
FORT WAYNE, IN 46845

2b Employer Identification Number (EIN) 35-1972384

2c Plan Sponsor's telephone number 260-373-4000

2d Business code (see instructions) 622000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2021	DENA JACQUAY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.		
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.		
	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**	4827
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)**	1934
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1745
b	Retired or separated participants receiving benefits	**6b**	2061
c	Other retired or separated participants entitled to future benefits	**6c**	605
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	4411
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	171
f	Total. Add lines **6d** and **6e**	**6f**	4582
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**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A

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

9a Plan funding arrangement (check all that apply)

- **(1)** [X] 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)** [X] 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)** [X] 1 **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 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A
(Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

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

1 Coverage Information:

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

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
35-0472300	65676	GA-00147	4582	01/01/2020	12/31/2020

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	2638189
5	Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	4313694
c	Additions: (1) Contributions deposited during the year	7c(1)	31142310		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	292985		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)	25951		
	▶				
	(6)Total additions			7c(6)	31461246
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	35774940
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	20217024		
	(2) Administration charge made by carrier	7e(2)	50231		
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)	12869496		
	▶ LUMP SUM BENEFITS				
	(5) Total deductions			7e(5)	33136751
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	2638189

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

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

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

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

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

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

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

E Type of plan: [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 01 Day 01 Year 2020

2 Assets:

a Market value	**2a**	437252171
b Actuarial value	**2b**	437252171

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	2132	221951450	221951450
b For terminated vested participants	770	27204266	27204266
c For active participants	1934	145503094	148092554
d Total	4836	394658810	397248270

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**	5.41 %
6 Target normal cost	**6**	11172776

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	10/01/2021 Date
TIMOTHY J. MAXSON Type or print name of actuary	20-06697 Most recent enrollment number
BUCK GLOBAL, LLC Firm name	260-426-7800 Telephone number (including area code)
110 W. BERRY ST., SUITE 1300 FORT WAYNE, IN 46802-2317 Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	10511100	13357994
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		
9	Amount remaining (line 7 minus line 8)	10511100	13357994
10	Interest on line 9 using prior year's actual return of 16.36 %	1719616	2185368
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		1883844
	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 5.55 %		104553
	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		1988397
	d Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections		0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	12230716	15543362

Part III Funding Percentages

14	Funding target attainment percentage	14	103.07 %
15	Adjusted funding target attainment percentage	15	110.07 %
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	97.59 %
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
08/18/2021	9600000	0			
			Totals ► 18(b)	9600000	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	
	b Contributions made to avoid restrictions adjusted to valuation date	19b	
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	8811963

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:	
3.64 %	5.21 %	5.94 %	☐ N/A, full yield curve used

b Applicable month (enter code) **21b**

22 Weighted average retirement age	**22**	64

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**	
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	**31a**	11172776
b Excess assets, if applicable, but not greater than line 31a	**31b**	11172776

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

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

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

36 Additional cash requirement (line 34 minus line 35)	**36**	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	8811963

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	8811963
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ..... ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ..... ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

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.**	**2020** **This Form is Open to Public Inspection.**

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

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

LINCOLN NATIONAL LIFE INSURANCE CO

35-0472300

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
20	NONE	248078	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

WELLS FARGO BANK, N.A.

41-0449260

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26	NONE	212248	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

HIGHLAND ASSOCIATES, INC.

2545 HIGHLAND AVE SOUTH, STE 200
BIRMINGHAM, AL 35205

(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?
16	NONE	53214	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

WALTER SCOTT & PARTNERS

1 CHARLOTTE SQUARE
EDINBURGH, EDINBURGH EH2 4DR GB

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	252312	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

DISCIPLINED GROWTH INVESTORS

150 SOUTH FIFTH STREET, SUITE 2550
MINNEAPOLIS, MN 55402

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	115961	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

STERLING CAPITAL MANAGEMENT

4350 CONGRESS STREET, STE 1000
CHARLOTTE, NC 28209

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	135690	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

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

PNC CAPITAL ADVISORS

P.O. BOX 91249
CLEVELAND, OH 44101-3249

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	96657	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

WELLINGTON TRUST

280 CONGRESS STREET
BOSTON, MA 02210

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	72401	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

UBS TRUMBULL

10 STATE HOUSE SQUARE #15
HARTFORD, CT 06103

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	134746	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

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

BUCK GLOBAL, LLC

110 W. BERRY ST., SUITE 1300
FORT WAYNE, IN 46802

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	147129	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

FIRST REPUBLIC BANK

601 W MARKET STREET
LOUISVILLE, KY 40202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	216162	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

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

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	313075	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	13500000	9600000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		621679
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	116641804	107526095
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)	31249885	31412566
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	271896038	303424661
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	4313694	2638189
(15) Other	1c(15)		

			(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	437914496	455223190
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		111470
k	Total liabilities (add all amounts in lines 1g through1j)	1k		111470
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	437914496	455111720

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)	9600000	
	(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)		9600000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)	9295016	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		9295016
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		32702450
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		51597466
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	29754134	
(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)		29754134
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)	53214	
(2) Contract administrator fees	2i(2)	460326	
(3) Investment advisory and management fees	2i(3)	1171058	
(4) Other	2i(4)	2961510	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		4646108
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		34400242
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		17197224
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) [ ] Unmodified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: BKD, LLP **(2)** EIN: 44-0160260

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	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	

			Yes	No	Amount
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	
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		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

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 Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4328254.

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

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

Part I 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** |

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): 35-0472300

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** | 215

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**	0
	b Enter the amount contributed by the employer to the plan for this plan year	**6b**	0
	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): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: 92.0 % Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: 7.0 % Other: 1.0 %

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):

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation_____

BKD
CPAs & Advisors

200 E. Main Street, Suite 700 | Fort Wayne, IN 46802-1900
260.460.4000 | Fax 260.426.2235 | bkd.com

Independent Auditor's Report

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Parkview Health System, Inc. Employees' Pension Plan (Plan), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by The Lincoln National Life Insurance Company and Wells Fargo Bank, N.A., the custodians of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodians hold the Plan's investment assets and execute investment transactions. The Plan Administrator has obtained certifications from the custodians as of and for the years ended December 31, 2020 and 2019, that the information provided to the Plan Administrator by the custodians is complete and accurate.

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Disclaimer of Opinion

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

Other Matter

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

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

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

BKD, LLP

Fort Wayne, Indiana
October 5, 2021

Federal Employer Identification Number: 44-0160260

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Line 26 – Schedule of Active Participant Data

Distribution of Active Participants as of January 1, 2020 – Age by Benefit Service

	Years of Credited Service[1]																	
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
Attained Age	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0		0		0	
30 - 34	0		0		0		4		0		0		0		0		0		0	
35 - 39	0		0		4		34	72,483	34	65,115	0		0		0		0		0	
40 - 44	0		2		6		18		36	63,311	11		0		0		0		0	
45 - 49	0		1		4		14		35	65,722	31	80,451	8		0		0		0	
50 - 54	0		0		6		13		30	76,702	39	62,212	26	75,945	12		0		0	
55 - 59	0		0		1		13		36	59,559	45	75,222	35	84,676	52	85,618	42	74,504	0	
60 - 64	1		0		3		5		27	62,063	44	83,080	31	64,112	21	82,517	47	71,337	4	
65 - 69	0		0		1		0		10		12		2		3		1		3	
70 & up	0		0		0		1		0		0		0		0		0		0	

	Years of Credited Service[2]																	
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
Attained Age	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0		0		0	
30 - 34	0		0		1		0		0		0		0		0		0		0	
35 - 39	1		37	64,337	4		2		0		0		0		0		0		0	
40 - 44	12		122	61,784	54	66,072	2		0		0		0		0		0		0	
45 - 49	6		87	86,618	128	69,138	30	85,001	2		0		0		0		0		0	
50 - 54	5		61	66,314	93	72,974	57	75,197	22	94,245	0		0		0		0		0	
55 - 59	5		58	71,967	69	72,707	43	84,790	30	74,418	18		1		0		0		0	
60 - 64	8		53	83,868	44	64,371	21	76,372	16		10		1		0		0		0	
65 - 69	0		9		4		3		6		0		0		0		0		0	
70 & up	0		0		1		0		0		0		0		0		0		0	

[1] 808 employees who are currently accruing benefits.

[2] 1,126 employees who are not currently accruing benefits.

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

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

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

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

E Type of plan: [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 01 Day 01 Year 2020

2 Assets:

a Market value	**2a**	437,252,171
b Actuarial value	**2b**	437,252,171

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	2,132	221,951,450	221,951,450
b For terminated vested participants	770	27,204,266	27,204,266
c For active participants	1,934	145,503,094	148,092,554
d Total	4,836	394,658,810	397,248,270

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**	5.41%
6 Target normal cost	**6**	11,172,776

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 TIMOTHY J. MAXSON TJM — 10/01/2021

Signature of actuary — Date

TIMOTHY J. MAXSON — 2006697

Type or print name of actuary — Most recent enrollment number

BUCK GLOBAL, LLC — 260-426-7800

Firm name — Telephone number (including area code)

110 W. BERRY ST., SUITE 1300

FORT WAYNE IN 46802-2317

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	10,511,100	13,357,994
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)	10,511,100	13,357,994
10	Interest on line 9 using prior year's actual return of 16.36%	1,719,616	2,185,368
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		1,883,844
	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 5.55%		104,553
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		1,988,397
	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)	12,230,716	15,543,362

Part III Funding Percentages

14	Funding target attainment percentage	14	103.07%
15	Adjusted funding target attainment percentage	15	110.07%
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	97.59%
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
08/18/2021	9,600,000	0			
		Totals ► 18(b)	9,600,000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	8,811,963

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:	
3.64 %	5.21 %	5.94%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

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**	11,172,776
b Excess assets, if applicable, but not greater than line 31a	**31b**	11,172,776

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	8,811,963
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	8,811,963
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

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

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

Prescribed Funding/PBGC Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

For 2020 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.77%	3.64%
Second Segment Rate	3.83%	5.21%
Third Segment Rate	4.28%	5.94%
Effective Interest Rate	3.99%	5.41%

For 2019 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.55%	3.74%
Second Segment Rate	3.93%	5.35%
Third Segment Rate	4.49%	6.11%
Effective Interest Rate	4.12%	5.55%

* Used for maximum tax deduction.

** Used for minimum funding and benefit restriction purposes.

PBGC Premium Funding Target

For 2020 Plan Year:	First Segment Rate	2.03%
	Second Segment Rate	3.06%
	Third Segment Rate	3.59%
For 2019 Plan Year:	First Segment Rate	3.38%
	Second Segment Rate	4.32%
	Third Segment Rate	4.69%

The Alternative Premium Funding Target was not used.

The effective interest rates for PBGC premium purposes are 3.27% for 2020 and 4.44% for 2019.

Mortality

Mortality tables mandated by current legislation as specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2019-26, applied on a static basis, with separate rates for annuitants and non-annuitants.

Actuarial cost method

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

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

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

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The salary increase assumption is consistent with Parkview's internal budget for the next three years. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations.

The demographic assumptions are based on the plan's anticipated experience. Actual experience is reviewed each year and compared to the assumptions. Changes are made, as appropriate, based on this review. As part of this review, an Experience Study was performed in early 2020, and the Current Year assumptions shown below reflect the enrolled actuary's conclusions from that study.

Salary increases

Current Year:	1.0% for 2020, 2.0% for 2021, and 2.5% for 2022+
Prior Year:	6.50% for 2019, and 3.50% 2020+

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

Expenses

Expected plan related expenses of $3,603,588 based on last year's expenses adjusted for expected increases in the PBGC premium for 2020 were added to the Target Normal Cost. To determine the 2020 expense assumption, we reviewed the administrative expenses paid from the trust over the past few years. The trustee and administration costs have not changed significantly. Except for the increase in the PBGC premium, we estimate no material change to the administration expenses for 2020.

Social Security

Current and Future Years:	2.50%
Prior Year:	3.00%

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

Frequency of optional payment forms

Optional Forms	Current Year Assumption	Prior Year Assumption
Single Life Annuity	40%	35%
5 year Certain and Life Annuity	7%	10%
10 year Certain and Life Annuity	8%	15%
50% Joint and Survivor Annuity	15%	10%
66.7% Joint and Survivor Annuity	5%	5%
100% Joint and Survivor Annuity	25%	25%

Marital percentage

Current Year:	Male participants are assumed to be 2 years older than their spouses, female participants are assumed to be 1 year younger than their spouses.
Prior Year:	Males are assumed to be 3 years older than their spouses.

75% of participants are assumed to be married at death.

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

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

Non-Prescribed Funding Assumptions and Methods (continued)

Withdrawal rates

Sample rates as follows:

Age	Current Year Rate of Withdrawal	Prior Year Rate of Withdrawal
25	15.0%	11.9%
30	6.0%	11.2%
35	4.0%	10.6%
40	3.5%	9.4%
50	3.5%	4.8%
60	3.5%	0.2%

Retirement rates

Current Rates are based on age as follows:

	Current Year	Prior Year Rates of Retirement	
Age	Rates of Retirement	Less than 20 years of Service	20 or More Years of Service
55	2%	2%	2%
56	1%	2%	2%
57	1%	2%	2%
58	1%	2%	2%
59	2%	5%	5%
60	2%	5%	5%
61	13%	5%	5%
62	25%	10%	50%
63	16%	5%	15%
64	33%	5%	15%
65	50%	100%	100%
66	40%	100%	100%
67	40%	100%	100%
68	40%	100%	100%
69	40%	100%	100%
70	100%	100%	100%

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

Disability rates

Included in withdrawal rates.

Asset valuation method

Market Value, including the discounted value of accrued contributions.

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

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

Non-Prescribed Funding Assumptions and Methods (continued)

Future actuarial measurements

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

Summary of Changes from the January 1, 2019 Valuation

- The mortality assumption was updated according to the projection specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2019-26, applied on a static basis with separate rates for annuitants and non-annuitants. The interest rate basis was updated to the current rates as specified in IRS Regulation 1.430(h)(2)-1. These rates are constrained in accordance with current legislation.
- The salary increase assumption was updated to better reflect anticipated salary growth.
- An experience study was performed in early 2020, which yielded changes in the assumed retirement rates, termination rates, optional form election percentages, and spouse age differences used in this valuation. As a result of the change in retirement rates to extend beyond the Plan's Normal Retirement Age, Late Retirement Increase Factors based upon the Plan's Actuarial Equivalence basis were also introduced.
- The above changes in assumptions increased the plan's Funding Target by approximately $13.4M.

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

Schedule SB, Part V - Summary of Plan Provisions

Eligible Employees

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

Eligibility Requirements

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

Compensation

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

Average Final Compensation

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

Vesting Service

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

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

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

Benefit Service

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

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

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

Normal Retirement Date

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

Early Retirement Date

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

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

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

Eligibility for Vested Pension

100% vesting after five years of Vesting Service.

Eligibility for Surviving Spouse Pension

Death occurring while:

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

Eligibility for Disability Pension

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

Accrued Benefit

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

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

42.5% of Final Average Compensation reduced by 12.5% of Final Average Compensation not in excess of the Social Security Covered Compensation, reduced for Benefit Service less than 25 at Normal Retirement. The formula result is then prorated by Benefit Service to Date, over Benefit Service Projected to Age 65.

The Accrued Benefit is no less than 1.1% of Average Final Compensation multiplied by Benefit Service not to exceed 40 years.

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

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

For those employees who irrevocably waived participation in the Plan:

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

Normal Monthly Retirement Pension

Monthly Accrued Benefit as of Normal Retirement Date. The normal form of payment is the 5-year certain and life annuity. 100% of active participants are assumed to elect the normal form of payment. The other optional forms of payment are: Life only, 10-year certain and life annuity, 100%, 75%, 66-2/3% and 50% Joint and Survivor Annuities. The benefit may also be paid as a single lump sum, if the value of the lump sum does not exceed $10,000 (this limit has been extended to $35,000, effective October 1, 2019).

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

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

Early Monthly Retirement Pension

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

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

Postponed Monthly Retirement Pension

The greater of:

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

Deferred Monthly Retirement Benefit for Termination Prior to Retirement

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

Surviving Spouse Monthly Pension

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

Postretirement Death Benefit

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

Retirement Pension Disability

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

Actuarial equivalent

The determination of actuarially equivalent annuity benefits for annuity payment forms is based on the 1983 Group Annuity Mortality Table (blended 50% male and 50% female), and interest at the rate of 8.00% per annum, compounded annually.

The determination of actuarially equivalent single sum payments is based on the mortality table prescribed by the Secretary of the Treasury under Section 417(e)(3)(B) of the Code, and the “Applicable Interest Rate” as defined by the Secretary of the Treasury under Section 417(e)(3)(C) of the code.

Summary of Changes from the January 1, 2019 Valuation

None.

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

Schedule SB, Line 15 – Reconciliation of differences between valuation results and amounts used to calculate AFTAP

The AFTAP certified for January 1, 2020 was 106.83%, based upon an Actuarial Value of Assets of $424,414,496, a Funding Target of $397,248,270, a carryover balance of $12,230,716, and a Prefunding Balance of $15,543,362. The AFTAP was certified before a final plan year 2019 contribution was deposited. Because the change was not material the AFTAP was not recertified.

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

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

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

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	880.7584	0.0102	8.9689	493.2896
56	933.4011	0.0100	9.3061	521.1389
57	1,004.5102	0.0100	10.0262	571.4923
58	1,084.6459	0.0100	10.7982	626.2974
59	1,173.5654	0.0199	23.3949	1,380.3016
60	1,238.5128	0.0199	24.6968	1,481.8059
61	1,285.7297	0.1295	166.5331	10,158.5191
62	1,184.6522	0.2494	295.4322	18,316.7971
63	955.6807	0.1600	152.9089	9,633.2614
64	848.7199	0.3296	279.7476	17,903.8442
65	600.9338	0.4992	299.9859	19,499.0832
66	315.5579	0.4000	126.2231	8,330.7274
67	202.9561	0.4000	81.1824	5,439.2226
68	125.8027	0.4000	50.3211	3,421.8329
69	76.8175	0.4000	30.7270	2,120.1641
70	48.6417	1.0000	48.6417	3,404.9180
71	0.0000	1.0000	0.0000	0.0000
72	1.0000	1.0000	1.0000	72.0000
73	0.0000	1.0000	0.0000	0.0000
74	0.0000	1.0000	0.0000	0.0000
75	0.0000	1.0000	0.0000	0.0000
76	0.0000	1.0000	0.0000	0.0000
77	1.0000	1.0000	1.0000	77.0000
Total			**1,620.8941**	**103,451.6955**
Weighted Average Retirement Age = 103,451.6955 / 1,620.8941				**63.82**
Rounded Weighted Average Retirement Age				**64**

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

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

General note: The table presents values rounded to fewer significant digits than used in the calculation.
This table calculates the weighted average retirement age for all active persons in the plan

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

Schedule SB, Line 24 – Change in Actuarial Assumptions

Summary of Changes from the January 1, 2019 Valuation

- The salary increase assumption was updated as follows to better reflect anticipated salary growth.

Current Year:	4.50% for 2020, and 3.50% for 2021+
Prior Year:	6.50% for 2019, and 3.50% 2020+

- An experience study was performed in early 2020, which yielded changes in the assumed retirement rates, termination rates, optional form election percentages, and spouse age differences used in this valuation. As a result of the change in retirement rates to extend beyond the Plan's Normal Retirement Age, Late Retirement Increase Factors based upon the Plan's Actuarial Equivalence basis were also introduced.

Parkview Health System, Inc. Employees Pension Plan

EIN/PN: 35-1972384 / 001

Schedule SB, Line 26 – Schedule of Active Participant Data

Distribution of Active Participants as of January 1, 2020 – Age by Benefit Service

	Years of Credited Service[1]																	
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
Attained Age	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0		0		0	
30 - 34	0		0		0		4		0		0		0		0		0		0	
35 - 39	0		0		4		34	72,483	34	65,115	0		0		0		0		0	
40 - 44	0		2		6		18		36	63,311	11		0		0		0		0	
45 - 49	0		1		4		14		35	65,722	31	80,451	8		0		0		0	
50 - 54	0		0		6		13		30	76,702	39	62,212	26	75,945	12		0		0	
55 - 59	0		0		1		13		36	59,559	45	75,222	35	84,676	52	85,618	42	74,504	0	
60 - 64	1		0		3		5		27	62,063	44	83,080	31	64,112	21	82,517	47	71,337	4	
65 - 69	0		0		1		0		10		12		2		3		1		3	
70 & up	0		0		0		1		0		0		0		0		0		0	

	Years of Credited Service[2]																	
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
Attained Age	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.	No.	Avg. An. Acc.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0		0		0	
30 - 34	0		0		1		0		0		0		0		0		0		0	
35 - 39	1		37	64,337	4		2		0		0		0		0		0		0	
40 - 44	12		122	61,784	54	66,072	2		0		0		0		0		0		0	
45 - 49	6		87	86,618	128	69,138	30	85,001	2		0		0		0		0		0	
50 - 54	5		61	66,314	93	72,974	57	75,197	22	94,245	0		0		0		0		0	
55 - 59	5		58	71,967	69	72,707	43	84,790	30	74,418	18		1		0		0		0	
60 - 64	8		53	83,868	44	64,371	21	76,372	16		10		1		0		0		0	
65 - 69	0		9		4		3		6		0		0		0		0		0	
70 & up	0		0		1		0		0		0		0		0		0		0	

[1] 808 employees who are currently accruing benefits.

[2] 1,126 employees who are not currently accruing benefits.

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

Schedule SB, Line 24 – Change in Actuarial Assumptions

Summary of Changes from the January 1, 2019 Valuation

- The salary increase assumption was updated as follows to better reflect anticipated salary growth.

Current Year:	4.50% for 2020, and 3.50% for 2021+
Prior Year:	6.50% for 2019, and 3.50% 2020+

- An experience study was performed in early 2020, which yielded changes in the assumed retirement rates, termination rates, optional form election percentages, and spouse age differences used in this valuation. As a result of the change in retirement rates to extend beyond the Plan's Normal Retirement Age, Late Retirement Increase Factors based upon the Plan's Actuarial Equivalence basis were also introduced.

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

Schedule SB, Part V - Summary of Plan Provisions

Eligible Employees

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

Eligibility Requirements

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

Compensation

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

Average Final Compensation

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

Vesting Service

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

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

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

Benefit Service

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

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

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

Normal Retirement Date

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

Early Retirement Date

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

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

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

Eligibility for Vested Pension

100% vesting after five years of Vesting Service.

Eligibility for Surviving Spouse Pension

Death occurring while:

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

Eligibility for Disability Pension

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

Accrued Benefit

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

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

42.5% of Final Average Compensation reduced by 12.5% of Final Average Compensation not in excess of the Social Security Covered Compensation, reduced for Benefit Service less than 25 at Normal Retirement. The formula result is then prorated by Benefit Service to Date, over Benefit Service Projected to Age 65.

The Accrued Benefit is no less than 1.1% of Average Final Compensation multiplied by Benefit Service not to exceed 40 years.

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

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

For those employees who irrevocably waived participation in the Plan:

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

Normal Monthly Retirement Pension

Monthly Accrued Benefit as of Normal Retirement Date. The normal form of payment is the 5-year certain and life annuity. 100% of active participants are assumed to elect the normal form of payment. The other optional forms of payment are: Life only, 10-year certain and life annuity, 100%, 75%, 66-2/3% and 50% Joint and Survivor Annuities. The benefit may also be paid as a single lump sum, if the value of the lump sum does not exceed $10,000 (this limit has been extended to $35,000, effective October 1, 2019).

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

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

Early Monthly Retirement Pension

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

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

Postponed Monthly Retirement Pension

The greater of:

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

Deferred Monthly Retirement Benefit for Termination Prior to Retirement

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

Surviving Spouse Monthly Pension

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

Postretirement Death Benefit

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

Retirement Pension Disability

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

Actuarial equivalent

The determination of actuarially equivalent annuity benefits for annuity payment forms is based on the 1983 Group Annuity Mortality Table (blended 50% male and 50% female), and interest at the rate of 8.00% per annum, compounded annually.

The determination of actuarially equivalent single sum payments is based on the mortality table prescribed by the Secretary of the Treasury under Section 417(e)(3)(B) of the Code, and the “Applicable Interest Rate” as defined by the Secretary of the Treasury under Section 417(e)(3)(C) of the code.

Summary of Changes from the January 1, 2019 Valuation

None.

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

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

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

A Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
PARKVIEW HEALTH SYSTEM, INC.

D Employer Identification Number (EIN)
35-1972384

E Type of plan: [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 01 Day 01 Year 2020

2 Assets:

a Market value	**2a**	437,252,171
b Actuarial value	**2b**	437,252,171

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	2,132	221,951,450	221,951,450
b For terminated vested participants	770	27,204,266	27,204,266
c For active participants	1,934	145,503,094	148,092,554
d Total	4,836	394,658,810	397,248,270

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**	5.41%
6 Target normal cost	**6**	11,172,776

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 TIMOTHY J. MAXSON TJM — 10/01/2021

Signature of actuary — Date

TIMOTHY J. MAXSON — 2006697

Type or print name of actuary — Most recent enrollment number

BUCK GLOBAL, LLC — 260-426-7800

Firm name — Telephone number (including area code)

110 W. BERRY ST., SUITE 1300

FORT WAYNE IN 46802-2317

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	10,511,100	13,357,994
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)	10,511,100	13,357,994
10	Interest on line 9 using prior year's actual return of 16.36%	1,719,616	2,185,368
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		1,883,844
	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 5.55%		104,553
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		1,988,397
	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)	12,230,716	15,543,362

Part III Funding Percentages

14	Funding target attainment percentage	14	103.07%
15	Adjusted funding target attainment percentage	15	110.07%
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	97.59%
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
08/18/2021	9,600,000	0			
		Totals ► 18(b)	9,600,000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	8,811,963

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:	
3.64 %	5.21 %	5.94%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

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**	11,172,776
b Excess assets, if applicable, but not greater than line 31a	**31b**	11,172,776

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	8,811,963
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	8,811,963
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

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

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

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	880.7584	0.0102	8.9689	493.2896
56	933.4011	0.0100	9.3061	521.1389
57	1,004.5102	0.0100	10.0262	571.4923
58	1,084.6459	0.0100	10.7982	626.2974
59	1,173.5654	0.0199	23.3949	1,380.3016
60	1,238.5128	0.0199	24.6968	1,481.8059
61	1,285.7297	0.1295	166.5331	10,158.5191
62	1,184.6522	0.2494	295.4322	18,316.7971
63	955.6807	0.1600	152.9089	9,633.2614
64	848.7199	0.3296	279.7476	17,903.8442
65	600.9338	0.4992	299.9859	19,499.0832
66	315.5579	0.4000	126.2231	8,330.7274
67	202.9561	0.4000	81.1824	5,439.2226
68	125.8027	0.4000	50.3211	3,421.8329
69	76.8175	0.4000	30.7270	2,120.1641
70	48.6417	1.0000	48.6417	3,404.9180
71	0.0000	1.0000	0.0000	0.0000
72	1.0000	1.0000	1.0000	72.0000
73	0.0000	1.0000	0.0000	0.0000
74	0.0000	1.0000	0.0000	0.0000
75	0.0000	1.0000	0.0000	0.0000
76	0.0000	1.0000	0.0000	0.0000
77	1.0000	1.0000	1.0000	77.0000
Total			**1,620.8941**	**103,451.6955**
Weighted Average Retirement Age = 103,451.6955 / 1,620.8941				**63.82**
Rounded Weighted Average Retirement Age				**64**

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

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

General note: The table presents values rounded to fewer significant digits than used in the calculation.
This table calculates the weighted average retirement age for all active persons in the plan

Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Prescribed Funding/PBGC Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

For 2020 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.77%	3.64%
Second Segment Rate	3.83%	5.21%
Third Segment Rate	4.28%	5.94%
Effective Interest Rate	3.99%	5.41%

For 2019 Plan Year: Segment Rates with no lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	2.55%	3.74%
Second Segment Rate	3.93%	5.35%
Third Segment Rate	4.49%	6.11%
Effective Interest Rate	4.12%	5.55%

* Used for maximum tax deduction.

** Used for minimum funding and benefit restriction purposes.

PBGC Premium Funding Target

For 2020 Plan Year:	First Segment Rate	2.03%
	Second Segment Rate	3.06%
	Third Segment Rate	3.59%
For 2019 Plan Year:	First Segment Rate	3.38%
	Second Segment Rate	4.32%
	Third Segment Rate	4.69%

The Alternative Premium Funding Target was not used.

The effective interest rates for PBGC premium purposes are 3.27% for 2020 and 4.44% for 2019.

Mortality

Mortality tables mandated by current legislation as specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2019-26, applied on a static basis, with separate rates for annuitants and non-annuitants.

Actuarial cost method

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

Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The salary increase assumption is consistent with Parkview's internal budget for the next three years. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations.

The demographic assumptions are based on the plan's anticipated experience. Actual experience is reviewed each year and compared to the assumptions. Changes are made, as appropriate, based on this review. As part of this review, an Experience Study was performed in early 2020, and the Current Year assumptions shown below reflect the enrolled actuary's conclusions from that study.

Salary increases

Current Year:	1.0% for 2020, 2.0% for 2021, and 2.5% for 2022+
Prior Year:	6.50% for 2019, and 3.50% 2020+

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

Expenses

Expected plan related expenses of $3,603,588 based on last year's expenses adjusted for expected increases in the PBGC premium for 2020 were added to the Target Normal Cost. To determine the 2020 expense assumption, we reviewed the administrative expenses paid from the trust over the past few years. The trustee and administration costs have not changed significantly. Except for the increase in the PBGC premium, we estimate no material change to the administration expenses for 2020.

Social Security

Current and Future Years:	2.50%
Prior Year:	3.00%

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

Frequency of optional payment forms

Optional Forms	Current Year Assumption	Prior Year Assumption
Single Life Annuity	40%	35%
5 year Certain and Life Annuity	7%	10%
10 year Certain and Life Annuity	8%	15%
50% Joint and Survivor Annuity	15%	10%
66.7% Joint and Survivor Annuity	5%	5%
100% Joint and Survivor Annuity	25%	25%

Marital percentage

Current Year:	Male participants are assumed to be 2 years older than their spouses, female participants are assumed to be 1 year younger than their spouses.
Prior Year:	Males are assumed to be 3 years older than their spouses.

75% of participants are assumed to be married at death.

Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Withdrawal rates

Sample rates as follows:

Age	Current Year Rate of Withdrawal	Prior Year Rate of Withdrawal
25	15.0%	11.9%
30	6.0%	11.2%
35	4.0%	10.6%
40	3.5%	9.4%
50	3.5%	4.8%
60	3.5%	0.2%

Retirement rates

Current Rates are based on age as follows:

	Current Year	Prior Year Rates of Retirement	
Age	Rates of Retirement	Less than 20 years of Service	20 or More Years of Service
55	2%	2%	2%
56	1%	2%	2%
57	1%	2%	2%
58	1%	2%	2%
59	2%	5%	5%
60	2%	5%	5%
61	13%	5%	5%
62	25%	10%	50%
63	16%	5%	15%
64	33%	5%	15%
65	50%	100%	100%
66	40%	100%	100%
67	40%	100%	100%
68	40%	100%	100%
69	40%	100%	100%
70	100%	100%	100%

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

Disability rates

Included in withdrawal rates.

Asset valuation method

Market Value, including the discounted value of accrued contributions.

Parkview Health System, Inc. Employees Pension Plan
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Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Future actuarial measurements

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

Summary of Changes from the January 1, 2019 Valuation

- The mortality assumption was updated according to the projection specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2019-26, applied on a static basis with separate rates for annuitants and non-annuitants. The interest rate basis was updated to the current rates as specified in IRS Regulation 1.430(h)(2)-1. These rates are constrained in accordance with current legislation.
- The salary increase assumption was updated to better reflect anticipated salary growth.
- An experience study was performed in early 2020, which yielded changes in the assumed retirement rates, termination rates, optional form election percentages, and spouse age differences used in this valuation. As a result of the change in retirement rates to extend beyond the Plan's Normal Retirement Age, Late Retirement Increase Factors based upon the Plan's Actuarial Equivalence basis were also introduced.
- The above changes in assumptions increased the plan's Funding Target by approximately $13.4M.

Parkview Health System, Inc.
Employees' Pension Plan

EIN 35-1972384 PN 001

Independent Auditor's Report and Financial Statements

December 31, 2020 and 2019

Parkview Health System, Inc. Employees' Pension Plan

December 31, 2020 and 2019

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CPAs & Advisors

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Independent Auditor's Report

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

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Parkview Health System, Inc. Employees' Pension Plan (Plan), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the *Employee Retirement Income Security Act of 1974*, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by The Lincoln National Life Insurance Company and Wells Fargo Bank, N.A., the custodians of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodians hold the Plan's investment assets and execute investment transactions. The Plan Administrator has obtained certifications from the custodians as of and for the years ended December 31, 2020 and 2019, that the information provided to the Plan Administrator by the custodians is complete and accurate.

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Disclaimer of Opinion

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

Other Matter

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

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

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

BKD, LLP

Fort Wayne, Indiana
October 5, 2021

Federal Employer Identification Number: 44-0160260

Parkview Health System, Inc. Employees' Pension Plan

Statements of Net Assets Available for Benefits

December 31, 2020 and 2019

	2020	2019
Assets		
Investments		
At fair value		
Mutual funds	$ 170,876,492	$ 154,874,804
Money market funds	3,635,939	4,109,309
Common stocks	107,526,095	116,641,804
Fixed income	114,065,226	101,261,736
Commingled funds	14,847,004	11,650,189
Real estate funds	31,412,566	31,249,885
At contract value	2,638,189	4,313,694
Total investments	445,001,511	424,101,421
Receivables		
Employer contribution	9,600,000	13,500,000
Accrued interest and dividends	621,679	-
Total receivables	10,221,679	13,500,000
Noninterest-bearing Cash	-	313,075
Total Assets	455,223,190	437,914,496
Liabilites		
Due to broker for securities purchased	111,470	-
Net Assets Available for Benefits	$ 455,111,720	$ 437,914,496

Parkview Health System, Inc. Employees' Pension Plan

Statements of Changes in Net Assets Available for Benefits

Years Ended December 31, 2020 and 2019

	2020	2019
Investment Income		
Net appreciation in fair value of investments	$ 32,702,450	$ 51,480,703
Interest and dividend income	9,295,016	10,619,455
Net investment income	41,997,466	62,100,158
Contributions		
Employer	9,600,000	13,500,000
Total additions	51,597,466	75,600,158
Deductions		
Benefits paid to participants	29,754,134	19,075,578
Administrative expenses	4,646,108	4,123,428
Total deductions	34,400,242	23,199,006
Net Increase	17,197,224	52,401,152
Net Assets Available for Benefits, Beginning of Year	437,914,496	385,513,344
Net Assets Available for Benefits, End of Year	$ 455,111,720	$ 437,914,496

Parkview Health System, Inc. Employees' Pension Plan

Notes to Financial Statements

December 31, 2020 and 2019

Note 1: Description of the Plan

The following description of Parkview Health System, Inc. Employees' Pension Plan (Plan) provides only general information. Additional information about the vesting and benefit provisions and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in the Plan Document and *Summary Plan Description*, which are available from the Plan Administrator.

General

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

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

Contributions

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

Pension Benefits

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

Vesting

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

Plan Termination

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

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

b. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan.

c. Other vested benefits insured by the Pension Benefit Guarantee Corporation (PBGC) up to the applicable limitations discussed below.

d. Vested benefits not insured by the PBGC.

e. All nonvested benefits.

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

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

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Valuation of Investments and Income Recognition

Quoted market prices, if available, are used to value investments. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded. Fixed income securities (corporate bonds, U.S. Government and agency obligations, and state and municipal bonds) are valued on the basis of yields currently available on comparable securities of issuers with similar credit ratings. Mutual and money market funds are valued at the net asset value (NAV) quoted market value of shares held by the Plan at year-end or as provided by the issuer.

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

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

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

The Plan's Finance Committee determines the Plan's valuation policies utilizing information provided by its investment advisers, custodians and insurance companies. See Note 8 for a discussion of fair value measurements.

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

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

Accumulated Plan Benefits

Accumulated plan benefits (see Note 5) are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

a. Retired or terminated employees or their beneficiaries

b. Present employees or their beneficiaries

Benefits under the Plan are based on employees' five highest consecutive years of compensation in the last 10 years of vested service. Benefits payable under all circumstances — retirement, death, disability and termination of employment — are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from Plan assets are excluded from accumulated plan benefits.

Plan Tax Status

The Plan obtained its latest determination letter on June 22, 2015, in which the Internal Revenue Service stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code and, therefore, not subject to tax. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan (and related trust) are currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 3: Certification by Plan Custodians

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

- Investments as shown in the statements of net assets available for benefits and related disclosures as of December 31, 2020 and 2019
- Investment income as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2020 and 2019
- Investment information included in the accompanying schedule of assets (held at end of year) and schedule of reportable transactions as of and for the year ended December 31, 2020

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

Note 4: Investment Contract With Insurance Company

In 1958, the Plan entered into a fully benefit-responsive investment contract with The Lincoln National Life Insurance Company (Insurer). The Insurer maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate guaranteed to the Plan. The rate was 3 percent for 2020 and 2019.

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

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

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

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

Note 5: Accumulated Plan Benefits

An actuary from Buck Consultants determines the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

The accumulated plan benefit information as of January 1, 2020, was as follows:

Actuarial present value of accumulated plan benefits	
Vested benefits	
Participants currently receiving payments	$ 191,738,259
Other participants	141,380,173
	333,118,432
Nonvested benefits	2,153,897
Total actuarial present value of accumulated plan benefits	$ 335,272,329

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

Actuarial present value of accumulated plan benefits, January 1, 2019	$ 327,324,153
Increase during the year attributable to	
Benefits accumulated	7,148,041
Increase for interest due to the decrease in the discounted period	22,259,337
Assumption changes	(2,383,624)
Benefits paid	(19,075,578)
Net increase	7,948,176
Actuarial present value of accumulated plan benefits, January 1, 2020	$ 335,272,329

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 7.00 percent
- Mortality basis: RP-2014 Mortality Tables with Projections specified by IRS Reg. Section 1.430(h)(3)-1 with separate annuitant and nonannuitant static mortality tables
- Employee turnover: Sarason T-8 Table
- Retirement: At normal retirement age (65) or attained age if later
- Asset valuation: Market

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

Note 7: Party-in-Interest Transactions

Parties-in-interest are defined under DOL regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer and certain others. Plan investments are held by The Lincoln National Life Insurance Company (Lincoln) and Wells Fargo Bank, N.A. (Wells Fargo). Lincoln and Wells Fargo are the custodians of the Plan and, therefore, these transactions qualify as party-in-interest transactions. In addition, the Plan receives management services from an investment advisor. The Plan paid $1,578,907 and $1,652,595 of administrative and management fees to the custodians, the investment fund managers and the investment advisor during 2020 and 2019, respectively. The Corporation provides certain administrative services at no cost to the Plan.

Note 8: Fair Value of Plan Assets

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

Level 1 Quoted prices in active markets for identical assets or liabilities

Level 2 Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

Level 3 Unobservable inputs supported by little or no market activity and are significant to the fair value of the assets or liabilities

Recurring Measurements

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2020 and 2019:

		Fair Value Measurements Using		
	Fair Value	Quoted Prices in Active Markets for Assets (Level 1)	Signficant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2020				
Mutual funds	$ 170,876,492	$ 93,413,190	$ 77,463,302	$ -
Money market funds	3,635,939	-	3,635,939	-
Common stocks	107,526,095	102,200,576	5,325,519	-
Fixed income	114,065,226	9,243,979	104,821,247	-
Commingled funds (A)	14,847,004	-	-	-
Real estate funds (A)	31,412,566	-	-	-
	$ 442,363,322	$ 204,857,745	$ 191,246,007	$ -

		Fair Value Measurements Using		
	Fair Value	Quoted Prices in Active Markets for Assets (Level 1)	Signficant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2019				
Mutual funds	$ 154,874,804	$ 92,864,163	$ 62,010,641	$ -
Money market funds	4,109,309	-	4,109,309	-
Common stocks	116,641,804	108,501,031	8,140,773	-
Fixed income	101,261,736	9,751,325	91,510,411	-
Commingled funds (A)	11,650,189	-	-	-
Real estate funds (A)	31,249,885	-	-	-
	$ 419,787,727	$ 211,116,519	$ 165,771,134	$ -

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

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended December 31, 2020 and 2019. The Plan had no liabilities measured at fair value on a recurring basis. Additionally, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Investments

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

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following tables summarize investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2020 and 2019. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan:

	December 31, 2020			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Commingled fund (A)	$ 14,847,004	$ —	N/A	None
Real estate investment trust fund (B)	15,620,856	—	N/A	None
Real estate investment fund (C)	15,791,710	—	N/A	None

	December 31, 2019			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Commingled fund (A)	$ 11,650,189	$ —	N/A	None
Real estate investment trust fund (B)	15,447,463	—	N/A	None
Real estate investment fund (C)	15,802,422	—	N/A	None

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

(B) This category includes investments in a fund that is institutional debt focused. The structure is to invest in participating mortgage loans which are secured primarily by high quality, well leased properties, all of which are located in the United States of America.

(C) This category includes investments in a real estate fund that emphasizes the active management of stable, well located properties among the primary real estate sectors consisting of apartments, industrial, office and retail in major metropolitan markets throughout the United States of America.

Note 9: Risks and Uncertainties

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

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

The outbreak of the novel coronavirus COVID-19, which was declared a pandemic by the World Health Organization on March 11, 2020, has led to adverse impacts on the U.S. and global economies. Economic uncertainties have arisen, which have resulted in significant volatility in the investment markets and may continue to impact the value of Plan assets. The duration of these uncertainties and the ultimate financial effects cannot be reasonably estimated at this time.

Note 10: Subsequent Events

Subsequent events have been evaluated through October 5, 2021, which is the date the financial statements were available to be issued.

Supplemental Schedules

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

	(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Mutual Funds			
	American Funds Capital World Growth	602,449 Shares	$ 26,979,368	$ 35,767,393
	Dodge & Cox Global Stock Fund	2,802,081 Shares	31,760,643	37,267,671
	PIMCO Real Return Fund Class Instl	1,660,809 Shares	18,426,458	20,378,126
	US Core Fixed Income Fund	5,960,231 Shares	72,147,745	77,463,302
	Total mutual funds		149,314,214	170,876,492
*	**Money Market Funds**			
	Blackrock Short-Term Investment Fund	3,635,939 Shares	3,635,939	3,635,939
	Common Stocks			
	Adobe Inc	2,200 Shares	71,910	1,100,262
	Agilent Technologies Inc	6,723 Shares	498,327	796,608
	AIA Group Ltd	86,600 Shares	393,482	1,061,021
	Alexion Pharmeceuticals Inc	2,899 Shares	330,102	452,940
	Alimentation Couche-Tard, Inc NPV	20,400 Shares	518,860	694,625
	Alphabet Inc Cl A	130 Shares	46,088	227,843
	Alphabet Inc Cl C	860 Shares	818,338	1,506,617
	Alphabet Inc Cl C	461 Shares	162,465	807,617
	Amphenol Corp CL A	7,100 Shares	346,270	928,467
	American International Group, Inc	10,087 Shares	498,239	381,894
	Ametek Inc Com	4,462 Shares	237,236	539,634
	Ansys Inc	4,624 Shares	1,544,652	1,682,211
	Arista Networks Inc	2,173 Shares	529,082	631,409
	Atlassian Corporation PLC	1,895 Shares	342,060	443,184
	Apsen Technology Inc Com	3,784 Shares	459,750	492,866
	Automatic Data Processing Inc	6,400 Shares	176,134	599,080
	AXA Equitable Holdings Inc	16,466 Shares	352,353	421,365
	Axos Financial, Inc	15,605 Shares	452,592	585,656
	Bank of America Corp	22,246 Shares	555,951	674,276
	Bank of the Ozarks Inc	15,264 Shares	599,241	477,305
	Bio-Techne Corp	4,922 Shares	1,232,606	1,562,981
	Black Knight Inc	11,634 Shares	952,980	1,027,864
	Blackline Inc	10,802 Shares	924,875	1,440,771
	Booking Holdings Inc	305 Shares	564,504	679,317
	Bright Horizons Family Solutions	3,939 Shares	536,600	681,408
	BroadCom Inc	2,507 Shares	747,992	1,097,690
	Brooks Automation Inc	12,172 Shares	599,647	825,870
	Cable One Inc	703 Shares	1,322,844	1,566,087
	Carmax Inc	3,423 Shares	252,031	323,337
	Carmax Inc	11,017 Shares	1,134,700	1,040,666
	CBRE Group Inc	16,839 Shares	815,819	1,056,142
	CDN National Railways Com NPV	4,200 Shares	460,471	461,341
	Centene Corp Del	9,778 Shares	496,281	586,973
	Cerner Corp Com	9,100 Shares	542,658	714,168
	Charles River Laboritories	2,808 Shares	360,938	701,607
	Cisco Systems Inc	14,800 Shares	283,200	662,300
	Citizens Financial Group Inc	7,775 Shares	203,891	278,034
	CSL LTD NPV	3,500 Shares	158,911	764,808
	Coca Cola Co	4,736 Shares	211,738	259,722

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Cognex Corp	5,800 Shares	$ 315,280	$ 465,653
Cognizant Tech Solutions Crp Com	11,100 Shares	689,228	909,645
Colgate Palmolive Co	5,500 Shares	293,196	470,305
Compass Group 11p	23,100 Shares	404,847	430,386
Costar Group Inc	1,077 Shares	915,726	995,450
Coupa Software Incorporated	611 Shares	186,659	207,074
Crowsstrike Holdings Inc	2,467 Shares	342,151	522,560
Danaher Corp	3,784 Shares	316,772	840,578
Dollar Tree Inc	6,771 Shares	560,458	731,539
Dropbox Inc	25,126 Shares	451,460	557,546
Ecolab Inc	6,796 Shares	1,386,905	1,470,383
Edwards Lifesciencescorp	9,500 Shares	360,630	866,685
Electronicarts Inc	4,696 Shares	432,345	668,745
Envestnet Inc	7,296 Shares	591,301	600,388
Experian PLC	13,300 Shares	249,797	504,868
Facebook Inc	5,434 Shares	1,015,171	1,484,351
Fanuc Co JPY Ords	2,600 Shares	417,706	622,388
Fastenal Co	17,700 Shares	497,264	864,291
Fastenal Co	18,984 Shares	891,620	926,989
Guidwire Software Inc	5,093 Shares	540,193	655,622
Heico Corp CL A	6,889 Shares	645,162	806,426
Home Depot Inc	2,027 Shares	310,990	538,412
Idexx Corp	1,034 Shares	393,100	516,866
Illumina Inc	1,100 Shares	274,972	407,000
Illumina Inc	3,548 Shares	1,227,256	1,312,760
Industria De Diseno Textil EUR	19,300 Shares	543,496	614,925
Insperity Inc	4,117 Shares	308,980	335,206
Intuitivesurgical Inc	1,200 Shares	166,203	981,720
Intuitivesurgical Inc	954 Shares	145,457	780,467
Jacobs Engr Group Inc	2,709 Shares	151,408	295,173
Jardine Matheson Holdings USD 0.25	6,700 Shares	294,497	375,200
Johnson & Johnson	4,100 Shares	277,841	645,258
Jones Lang Lasalle Inc	3,940 Shares	553,330	584,578
Keyence Co NPV	2,600 Shares	168,830	1,481,896
KKR & Co Inc	12,206 Shares	312,448	494,221
Kone Corp New NPV	5,480 Shares	293,462	450,732
Lamb Weston Holdings Inc	4,819 Shares	308,069	379,448
Lam Research Corp Com	1,527 Shares	409,235	721,156
Liberty Sirius XM Group	10,861 Shares	483,663	469,087
Linde Public Limited Company	1,927 Shares	328,587	507,784
Linde Public Limited Company	3,400 Shares	555,747	895,934
L'Oreal SA EUR	2,300 Shares	290,513	874,647
LVMH Moet Hennessy Loui EUR	1,400 Shares	247,758	875,161
Markel Holdings	1,392 Shares	1,516,181	1,438,354
Martin Marietta Matls Inc Com	1,190 Shares	218,231	337,924
Masmo Corp	700 Shares	184,831	187,866
Mastercard Inc	3,400 Shares	147,956	1,213,596
Mccormick & Co Inc Non V	4,990 Shares	361,303	477,044
Merck & Co Inc New	6,382 Shares	493,751	522,048
Metlife Inc	7,818 Shares	369,211	367,055

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Micron Technology Inc	11,253 Shares	$ 467,748	$ 846,001
Microsoft Corp	11,492 Shares	652,624	2,555,828
Microsoft Corp	6,200 Shares	190,973	1,379,004
Middleby Corp Com	2,467 Shares	328,229	318,046
Moodys Corp	4,461 Shares	1,295,839	1,294,761
Morgan Stanley	8,147 Shares	353,091	558,314
Nestle SA CHF	5,000 Shares	313,015	606,300
Nexstar Broadcasting Group Inc	4,185 Shares	414,155	456,960
Nextera Energy Partners LP	5,824 Shares	374,222	390,499
Nike Inccl B	8,200 Shares	203,671	1,160,054
Norfolk Southern Corp	1,967 Shares	369,594	467,379
Northrop Grumman Corp	1,693 Shares	546,114	515,891
Novartis AG CHF	5,900 Shares	450,920	553,715
Novo Nordisk A/S DKK	12,100 Shares	418,104	867,570
NVR Inc Com	107 Shares	296,198	436,545
Okta Inc	1,933 Shares	403,439	491,485
Old Dominion Freight Line Inc	2,515 Shares	498,230	490,878
Oracle Corporation	10,800 Shares	351,388	698,652
Performance Food Group Co	7,703 Shares	218,288	366,740
Pros Holdings Inc	16,703 Shares	627,179	848,011
Qualys Inc	4,916 Shares	509,994	599,113
Reckitt Benckiser PLC GBP	5,600 Shares	339,206	500,782
Restaurant Brands International Inc	7,310 Shares	438,330	446,714
Roche Hldfs Ag Genussscheine	2,200 Shares	459,458	745,800
Roper Technologies	2,703 Shares	1,162,915	1,165,236
SBA Communications Corp	5,962 Shares	1,767,388	1,682,059
SFS SA CHF	160 Shares	335,357	483,285
Signature Bk New York, NY	2,677 Shares	351,956	362,171
Shin-Etsu Chemical Co Ltd NPV	4,800 Shares	263,307	857,520
SMC Corp JPY	800 Shares	261,777	471,229
Stryker Corp	3,200 Shares	172,886	784,128
Taiwan Semi Conductor Manufactu - ADR	14,100 Shares	205,000	1,537,464
Teleflex Inc	3,644 Shares	1,442,414	1,499,761
Texas Instruments	4,460 Shares	560,910	732,020
Texas Pacld Tr Sub Sh Ctf	716 Shares	492,143	520,532
Thermo Fisher Scientific Inc	1,332 Shares	394,597	620,419
TJX Companies Inc	9,611 Shares	332,741	656,335
TJX Companies Inc	11,800 Shares	286,901	805,822
T Mobile US Inc	5,212 Shares	585,650	702,838
Transdigm Group Inc	1,895 Shares	933,771	1,172,721
Twilio Inc	1,384 Shares	342,989	468,484
Tyler Technologies Inc	559 Shares	189,756	244,015
Unitedhealthgroup Inc	2,368 Shares	241,203	830,410
Universal display Corp	2,549 Shares	311,899	585,760
Veeva Systems Inc	3,149 Shares	880,924	857,315
Verisk Analytics Inc	7,006 Shares	1,309,963	1,454,376
V F Corp	4,267 Shares	348,426	364,444
Visa Inc - Class A Shrs	2,554 Shares	217,657	558,636
Vulcan Materials Company	10,024 Shares	1,237,274	1,486,659
Walmart Inc	4,807 Shares	575,156	692,929

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Walt Disney Co	4,500 Shares	$ 432,039	$ 815,310
Waste Connections, Inc	11,035 Shares	1,109,031	1,131,860
Waters Corp	2,700 Shares	535,182	668,034
Willis Towers Watson	1,721 Shares	236,579	362,580
Xpo Logistics Inc	3,669 Shares	259,541	437,345
Total common stocks		71,874,337	107,526,095
U.S. Government and Agency Obligations			
Fed Home LN MTG Corp	217,241 Shares	218,497	223,782
Fed Home LN MTG Corp	131,324 Shares	136,002	133,436
Fed Home LN MTG Corp	169,940 Shares	175,198	173,383
Fed Home LN MTG Corp	580,000 Shares	582,078	707,606
Fed Home LN MTG Corp	510,000 Shares	525,275	568,415
Fed Home LN MTG Corp	463,163 Shares	511,216	529,890
Fed Home LN MTG Corp Pool #G60651	376,489 Shares	397,872	412,263
Fed Home LN MTG Corp Pool #QA4336	453,664 Shares	461,213	479,232
Fed Home LN MTG Corp Pool #QA4396	601,377 Shares	596,397	634,494
Fed Home LN MTG Corp Pool #QB5838	838,543 Shares	882,566	891,547
Fed Home LN MTG Corp Pool #RA2794	408,545 Shares	435,675	433,454
Fed Home LN MTG Corp Pool #RA2970	1,175,791 Shares	1,232,009	1,242,611
Fed Home LN MTG Corp Pool #RB5090	249,033 Shares	257,087	258,795
Fed Home LN MTG Corp Pool #ZA2413	181,878 Shares	197,861	198,076
Fed Home LN MTG Corp Pool #ZA2414	256,087 Shares	270,504	276,787
Fed Home LN MTG Corp Pool #ZA2439	281,438 Shares	290,849	300,100
Fed Home LN MTG Corp Pool #ZS8571	288,039 Shares	304,182	309,155
Fed Home LN MTG Corp Pool #ZS4678	181,009 Shares	183,613	193,690
Fed Home LN MTG Corp Pool #ZT1639	261,696 Shares	268,831	281,166
Fed Natl MTG Assn	425,482 Shares	423,620	430,226
Fed Natl MTG Assn	25 Shares	25	25
Fed Natl MTG Assn Pool #AI5534	162,217 Shares	172,862	172,617
Fed Natl MTG Assn Pool #AI8401	165,042 Shares	185,465	191,428
Fed Natl MTG Assn Pool #AL6104	202,707 Shares	212,209	212,524
Fed Natl MTG Assn Pool #AL6895	572,072 Shares	593,093	621,968
Fed Natl MTG Assn Pool #AP0495	640,579 Shares	673,809	696,687
Fed Natl MTG Assn Pool #AS4170	163,744 Shares	175,180	178,751
Fed Natl MTG Assn Pool #AS7568	138,923 Shares	152,837	152,381
Fed Natl MTG Assn Pool #BM3900	495,066 Shares	511,716	531,062
Fed Natl MTG Assn Pool #BQ0538	413,178 Shares	437,065	435,932
Fed Natl MTG Assn Pool #BQ2883	393,422 Shares	414,138	415,088
Fed Natl MTG Assn Pool #BR0479	689,525 Shares	714,951	716,334
Fed Natl MTG Assn Pool #CA2219	315,526 Shares	335,073	349,356
Fed Natl MTG Assn Pool #CA6307	650,782 Shares	679,253	688,677
Fed Natl MTG Assn Pool #CA6613	923,974 Shares	976,813	969,156
Fed Natl MTG Assn Pool #CA6799	620,338 Shares	646,848	646,808
Fed Natl MTG Assn Pool #FM2714	692,344 Shares	736,156	731,094
Fed Natl MTG Assn Pool #FM2875	159,902 Shares	168,072	167,828
Fed Natl MTG Assn Pool #FM2995	189,472 Shares	201,729	200,058
Fed Natl MTG Assn Pool #MA2028	108,983 Shares	119,063	121,308
Fed Natl MTG Assn Pool #MA2158	406,725 Shares	444,474	449,285
Fed Natl MTG Assn Pool #MA2211	444,767 Shares	480,626	484,907

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
U.S. Government and Agency Obligations			
Fed Natl MTG Assn Pool #MA2260	180,627 Shares	$ 190,223	$ 194,733
Fed Natl MTG Assn Pool #MA2279	247,247 Shares	265,334	271,301
FRESB Multifamily Mortgage Pass-through	457,283 Shares	454,561	488,636
Govt Natl Mtg Assn Pool #711067	135,503 Shares	152,822	154,948
U.S. Treasury Bond	1,190,900 Shares	1,142,800	1,115,349
U.S. Treasury Note	385,000 Shares	385,756	387,618
U.S. Treasury Note	950,000 Shares	970,549	968,924
U.S. Treasury Note	955,000 Shares	977,529	974,396
U.S. Treasury Note	243,300 Shares	258,878	259,059
U.S. Treasury Note	775,000 Shares	788,526	784,626
U.S. Treasury Note	765,000 Shares	781,197	777,492
U.S. Treasury Note	95,000 Shares	95,910	95,656
U.S. Treasury Note	300,000 Shares	302,348	302,976
U.S. Treasury Note	615,000 Shares	629,246	629,151
U.S. Treasury Note	600,000 Shares	632,674	632,862
U.S. Treasury Note	675,700 Shares	662,901	660,605
U.S. Treasury Note	925,000 Shares	924,714	925,148
U.S. Treasury Note	730,000 Shares	729,734	730,117
Corporate Bonds			
Abbvie Inc	145,000 Shares	150,525	151,682
Abbvie Inc	153,000 Shares	162,196	206,928
Abbvie Inc	262,000 Shares	264,789	289,733
Advance Auto Parts	253,000 Shares	252,962	256,947
AERCAO Ireland Cap	325,000 Shares	349,460	352,372
Air Lease Corp	187,000 Shares	190,280	197,870
Aker BP ASA	235,000 Shares	243,225	243,129
Albemarle Corp	170,000 Shares	200,088	203,556
Albertsons COS/Safeway	40,000 Shares	40,000	41,000
Albertsons COS/Safeway	189,000 Shares	188,323	191,243
Alexandria Real Estate E	219,000 Shares	220,880	241,020
Alimentation Couche-Tard	245,000 Shares	264,213	275,868
Ally Financial Inc	97,000 Shares	99,320	97,998
Amerada Hess Corp	112,000 Shares	139,254	147,222
American Express Co	185,000 Shares	190,779	189,727
American Express Credit Accoun	225,000 Shares	230,388	227,304
American Honda Finance	180,000 Shares	179,734	183,928
American Tower Trust I	230,000 Shares	227,775	252,830
Americredit Automobile Receiva	705,000 Shares	691,120	717,316
Ameriprise Financial Inc	170,000 Shares	174,384	175,554
Amphenol Corp	65,000 Shares	65,900	66,043
Anheuser Busch Inbev Wor	174,000 Shares	196,540	267,852
Antero Midstream Part	184,000 Shares	188,029	180,780
Antero Resources Corp	110,000 Shares	111,470	112,276
Apple Inc	179,000 Shares	177,770	189,982
Arches Buyer Inc	257,000 Shares	260,037	260,264
Ari Fleet Lease Trust	1,000,000 Shares	1,024,609	1,024,800
Ari Fleet Lease Trust	725,000 Shares	724,763	745,655
Aspen Insurance Hldg Ltd	173,000 Shares	181,047	189,371
Assurant Inc	33,000 Shares	33,015	33,000

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Athene Holding Ltd	124,000 Shares	$ 123,942	$ 131,044
AT&T Inc	250,000 Shares	197,878	249,153
AT&T Inc	235,000 Shares	243,843	243,211
AT&T Inc	304,000 Shares	304,462	318,662
AT&T Inc	118,000 Shares	118,188	120,394
Aust & NZ Banking Group	204,000 Shares	204,000	215,240
Avis Budget Rental Car Funding	515,000 Shares	514,918	531,871
Avis Budget Rental Car Funding	380,000 Shares	412,107	411,730
Axis Spec Fin	242,000 Shares	247,904	253,197
Bacardi LTD	207,000 Shares	219,892	231,087
Bank of America Corp	628,000 Shares	646,946	709,351
Bank of America Corp	315,000 Shares	335,661	336,511
Bank of America Corp	565,000 Shares	571,583	570,842
Bank of America Credit Card Tr	130,000 Shares	132,092	130,391
Bank of Montreal	280,000 Shares	284,230	303,691
Bank of Montreal	280,000 Shares	287,018	289,100
Bank of Nova Scotia	205,000 Shares	201,275	205,039
Bank (SER 2020-BN27)	776,000 Shares	799,235	814,691
Bank (SER 2020-BN29)	101,000 Shares	104,022	104,629
Barclays Commerical Mortgage S	178,000 Shares	183,331	185,729
Barclays PLC	207,000 Shares	217,810	224,038
Bat Capital Corp	223,000 Shares	191,746	247,630
Bat Capital Corp	182,000 Shares	185,519	214,008
BB&T Corp	115,000 Shares	118,926	118,333
Benchmark Mortage Trust	302,000 Shares	311,036	311,573
Benchmark Mortage Trust	495,000 Shares	511,502	511,568
Berkshire Hathaway Energy	164,000 Shares	171,075	212,442
Blackrock Inc	215,000 Shares	223,415	225,047
BMW Vehicle Owner Trust	265,000 Shares	268,215	268,670
BNP Paribas	205,000 Shares	211,710	205,271
Boeing Co	70,000 Shares	69,997	70,642
Boston Properties	115,000 Shares	116,624	115,476
Bp Capital Markets Plc	190,000 Shares	196,027	195,060
Brixmor Operating Part	243,000 Shares	239,031	279,525
Brixmor Operating Part	121,000 Shares	123,683	138,880
Broadcom Inc	317,000 Shares	327,725	367,010
Burlington North Santa Fe	169,000 Shares	193,060	234,400
Capital Auto Receivable Asset	625,000 Shares	624,860	633,325
Capital One Financial Co	211,000 Shares	218,389	231,792
Capital One Financial Co	185,000 Shares	188,389	186,375
Capital One Multi-asset Execut	245,000 Shares	245,523	247,212
Capital One Multi-asset Execut	759,000 Shares	758,798	811,644
Capital One Prime Auto Receiva	6,895 Shares	6,915	6,901
Capital One Prime Auto Receiva	119,881 Shares	119,875	120,507
Cargill Inc	166,000 Shares	163,565	203,060
Carlyle Finance LLC	172,000 Shares	178,410	223,671
Caterpillar Finl Service	229,000 Shares	229,754	237,869
Caterpillar Finl Service	235,000 Shares	241,418	242,271
CD 2016-CD2 MTG TR	416,000 Shares	428,469	471,008
CD 2017-CD3 MTG TR	377,000 Shares	388,297	429,380
Centerpoint Energy Inc	190,000 Shares	195,922	195,065

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Centerpoint Energy Inc	204,000 Shares	$ 222,801	$ 222,040
CFCRE Commercial Mortgage Trust	255,000 Shares	262,648	289,196
Cheniere Corpus Christi Hldgs LLC	10,000 Shares	10,000	10,500
Cheniere Corpus Christi Hldgs LLC	120,000 Shares	121,971	133,591
Chesapeake Funding II LLC	34,175 Shares	34,233	34,204
Cintas Coporation No. 2	115,000 Shares	119,161	118,367
Citibank Credit Card Issuance	295,000 Shares	298,115	295,389
Citigroup Commercial Mortgage Trust	479,000 Shares	493,557	503,051
Citigroup Inc	178,000 Shares	175,760	198,945
Citigroup Inc	255,000 Shares	292,509	309,228
Citigroup Inc	211,000 Shares	212,767	230,530
Citigroup Inc	285,000 Shares	286,503	289,554
CMS Energy Corp	182,000 Shares	203,105	234,116
Coca Cola	220,000 Shares	221,843	235,418
Comcast Corp	259,000 Shares	295,485	341,318
Comcast Corp	236,000 Shares	246,136	259,650
Comcast Corp	144,000 Shares	146,066	158,445
Comm Mortgage Trust	719,000 Shares	786,631	778,526
Comm Mortgage Trust	129,000 Shares	135,880	141,374
Comm Mortgage Trust	700,000 Shares	744,105	772,296
Comm Mortgage Trust	500,000 Shares	514,964	567,335
Commercial Mortgage Pass-through	132,000 Shares	141,936	136,359
Consolidated Edison Co	170,000 Shares	170,210	170,301
Continental Resources	29,000 Shares	29,000	32,189
Costar Group Inc	242,000 Shares	247,155	251,448
Cott Corp	72,000 Shares	73,080	74,340
Credit Suisse Group AG	289,000 Shares	289,000	304,106
Crown Castle International Corp	171,000 Shares	177,825	187,117
CVS Health Corp	95,000 Shares	98,483	99,168
CVS Health Corp	29,000 Shares	29,097	31,025
CVS Health Corp	184,000 Shares	197,262	218,953
CVS Health Corp	263,000 Shares	263,043	266,064
Daimler Finance NA LLC	200,000 Shares	200,000	201,456
Davita Inc	60,000 Shares	60,000	60,922
Dbubs Mortgage Trust	23,416 Shares	26,239	23,414
Dbubs Mortgage Trust	148,000 Shares	163,257	148,126
Deere & Co	204,000 Shares	218,991	264,331
Deutsche Bank Commerical Mortg	162,000 Shares	166,853	167,233
Devon Energy Corp	264,000 Shares	250,553	322,867
DH Europe Finance	212,000 Shares	215,634	241,457
Diamondback Energy Inc	323,000 Shares	328,589	345,067
Diamond Sports	207,000 Shares	172,586	125,235
Discover Card Execution Note T	170,000 Shares	175,850	175,030
Discovery Communications	199,000 Shares	210,361	258,469
Discovery Communications	180,000 Shares	182,937	206,192
Dominion Energy Inc	238,000 Shares	241,008	256,928
Dow Chemical Co	215,000 Shares	237,384	263,319
DTE Energy Co	95,000 Shares	98,267	97,974
Duke Energy Progress LLC	195,000 Shares	195,013	195,033
Duke Energy Progress LLC	194,000 Shares	198,561	235,060
Duke University	215,000 Shares	215,000	248,456

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Entergy Mississippi Inc	202,000 Shares	$ 201,034	$ 214,716
Enterprise Fleet Financing LLC	788,000 Shares	787,762	811,096
Enterprise Fleet Financing LLC	590,000 Shares	589,947	598,968
Enterprise Products Oper	164,000 Shares	195,726	225,469
Enterprise Products Oper	68,000 Shares	68,848	68,332
Erac USA Finance Company	624,000 Shares	262,365	330,480
ESH Hospitality Inc	231,000 Shares	222,915	236,775
Federal Realty Investments	258,000 Shares	259,687	285,671
Fidelity	198,000 Shares	227,157	231,066
Fifth Third Auto Trust	959 Shares	959	960
First Citizens Bancshare	193,000 Shares	191,363	196,520
Fiserv Inc	182,000 Shares	182,329	203,873
FMC Corp	209,000 Shares	213,346	237,932
Ford Motor Creidt Co LLC	225,000 Shares	244,474	244,643
Ford Credit Auto Owner Trust	37,595 Shares	37,591	37,736
Ford Credit Auto Owner Trust	8,795 Shares	8,691	8,805
Ford Credit Auto Owner Trust/F	465,000 Shares	489,776	490,198
Ford Credit Auto Owner Trust/F	650,000 Shares	649,790	656,234
Fortive Corporation	135,000 Shares	151,912	166,325
Freeport-Mcmoran Inc	81,000 Shares	81,000	84,949
GE CO	77,000 Shares	78,011	87,091
General Motors Finl Co	136,000 Shares	133,399	151,928
General Motors Finl Co	217,000 Shares	229,247	232,038
Genesis Energy LP	232,000 Shares	233,107	229,726
Gilead Sciences Inc	125,000 Shares	124,605	127,356
Global Net Lease	182,000 Shares	183,472	187,640
GM Financial Securitized Term	75,000 Shares	74,995	75,024
GM Financial Securitized Term	133,736 Shares	136,221	136,254
GMRF Mortgage Acquisition Co	61,808 Shares	62,380	62,273
GMRF Mortgage Acquisition Co	193,967 Shares	194,796	197,491
GMRF Mortgage Acquisition Co	153,806 Shares	156,265	155,893
Goldman Sachs BDC Inc	20,000 Shares	20,187	20,408
Goldman Sachs Group Inc	149,000 Shares	191,208	233,359
Goldman Sachs Group Inc	415,000 Shares	458,543	461,061
Goldman Sachs Group Inc	90,000 Shares	90,237	90,365
Goldman Sachs Group Inc	278,000 Shares	278,293	281,055
Goldman Sachs Group Inc	195,000 Shares	197,600	198,959
GS Mortgage Securities Corp II	46,982 Shares	50,170	46,972
GS Mortgage Securities Trust	183,000 Shares	188,490	204,453
GS Mortgage Securities Trust	183,000 Shares	198,555	202,299
GS Mortgage Securities Trust	350,000 Shares	360,498	375,351
Harris Corporation	189,000 Shares	200,039	212,134
HCA Inc	201,000 Shares	212,510	226,119
Hertz Fleet Lease Funding LP	454,330 Shares	454,266	461,086
Hollyfrontier Corp	270,000 Shares	292,702	301,509
Homedepot Inc	120,000 Shares	120,099	120,371
Homedepot Inc	195,000 Shares	196,258	217,641
Honeywell International	40,000 Shares	40,018	40,064
Honda Auto Receivables Owner T	64,886 Shares	64,882	65,119
Hudson Pacific Poperties	247,000 Shares	247,164	263,332
Huntington Bancshares	215,000 Shares	217,474	229,755

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Hyundai Auto Receivables Trust	100,805 Shares	$ 103,411	$ 102,320
H & E Equip Services	33,000 Shares	33,000	33,353
IBM Credit Corp	180,000 Shares	179,150	180,365
HIS Market LTD	212,000 Shares	243,177	242,867
Indiana Michigan Power	175,000 Shares	182,376	228,932
ING GROEP NV	264,000 Shares	264,586	273,026
Intel Corp	175,000 Shares	239,242	244,226
Interpublic Group Cos	115,000 Shares	118,412	117,882
Interpublic Group Cos	214,000 Shares	220,592	265,405
Istar Financial Inc	47,000 Shares	43,715	47,588
Istar Financial Inc	207,000 Shares	204,998	211,140
Jefferies GRP LLC/CAP	152,000 Shares	155,782	177,168
Johnson & Son Inc	250,000 Shares	316,513	347,593
John Deere Capital Corp	155,000 Shares	154,962	155,753
John Deere Capital Corp	15,000 Shares	15,044	15,079
John Deere Owner Trust	65,000 Shares	65,033	65,056
John Deere Owner Trust	60,254 Shares	60,600	60,862
Jones Lang LaSalle Inc	206,000 Shares	212,555	218,280
JPMDB Commerical Mortgage Secu	167,000 Shares	172,010	176,003
JPMorgan Chase Commercial Mor	319,000 Shares	342,277	348,523
JPMorgan Chase Commercial Mor	151,000 Shares	155,530	171,673
JPMorgan Chase & Co	575,000 Shares	630,700	701,558
JPMorgan Chase & Co	330,000 Shares	346,587	348,523
JPMorgan Chase & Co	280,000 Shares	285,656	287,327
Keurig Dr Pepper Inc	75,000 Shares	77,128	75,935
Keysight Technologies	192,000 Shares	201,791	217,098
Kimco Realty Corp	252,000 Shares	243,507	274,809
Kinder Morgan Ener Part	75,000 Shares	79,033	78,178
Kinder Morgan Inc	173,000 Shares	185,984	197,393
KKR Group Finance Co III	175,000 Shares	184,552	229,714
Kraton Polymers LLC	217,000 Shares	219,030	221,362
Kroger Co	165,000 Shares	165,367	165,261
Lam Research Corp	237,000 Shares	240,500	265,843
Lehigh University	395,000 Shares	395,000	426,726
Lexington Realty Trust	164,000 Shares	163,981	170,721
Lions Gate Capital Hold	231,000 Shares	242,084	236,776
Live Nation Entertainment	39,000 Shares	39,000	39,972
Lloyds Banking Group PLC	205,000 Shares	219,949	234,465
Lowe's COS Inc	142,000 Shares	160,734	176,757
Loews Corp	96,000 Shares	97,253	109,058
Macquarie Bank LTD	175,000 Shares	190,030	177,732
Match Group Inc	205,000 Shares	204,688	213,200
Match Group Inc	20,000 Shares	20,000	20,963
Mcdonalds Corp	190,000 Shares	193,704	194,583
Meiji Yasuda Life Insurance	250,000 Shares	271,375	286,828
Mercedes-Benz Auto Receivables Tr	211,547 Shares	214,085	213,922
Merck & Co Inc	155,000 Shares	158,792	195,739
Microchip Technology Inc	165,000 Shares	165,313	167,343
Microsoft Corp	193,000 Shares	193,483	209,154
Midwest Connector Capital	208,000 Shares	208,593	213,200
Mitsubishi UFJ Finance Group	278,000 Shares	290,611	301,394

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Morgan Stanley	271,000 Shares	$ 272,598	$ 286,241
Morgan Stanley	188,000 Shares	184,953	231,706
Morgan Stanley	275,000 Shares	289,913	290,227
Morgan Stanley BAML Trust	520,000 Shares	535,587	595,301
Morgan Stanley Capital I	230,000 Shares	236,892	253,564
Morgan Stanley Capital I	680,000 Shares	700,360	811,104
Morgan Stanley Capital I	554,000 Shares	571,646	575,573
MPLX LP	226,000 Shares	240,185	260,655
MPLX LP	75,000 Shares	75,165	75,013
Murphy Oil Corp	193,000 Shares	193,552	191,070
NASDAQ INC	125,000 Shares	125,000	125,146
Nationwide Mutual Insura	204,000 Shares	203,525	239,643
New York University	720,000 Shares	709,315	747,396
Newfield Exploration Co	243,000 Shares	247,731	252,392
Nexstar Broadcasting Inc	236,000 Shares	238,731	246,915
Nextera Energy Capital	140,000 Shares	145,252	144,465
Nissan Auto Receivables Owner	75,000 Shares	76,954	76,598
Noble Energy Inc	126,000 Shares	126,025	177,314
NRG Energy	123,000 Shares	123,557	127,549
Nucor Corp	160,000 Shares	167,115	166,470
Nustar Logistics LP	30,000 Shares	30,225	31,950
Nvidia Corp	83,000 Shares	84,791	100,686
Occidental Petro COR	241,000 Shares	246,950	251,269
Oracle Corp	155,000 Shares	156,102	156,561
Outfront Media Cap	166,000 Shares	170,686	175,130
Owl Rock Capital Corp	247,000 Shares	246,583	250,537
Paccar Financial Corp	130,000 Shares	131,620	134,187
Pattern Energy OP	115,000 Shares	116,706	121,325
Paypal Holdings Inc	228,000 Shares	229,968	244,147
Pepsico Inc	194,000 Shares	196,342	234,573
Philip Morris Intl Inc	266,000 Shares	275,613	277,425
Physicians Realty LP	174,000 Shares	173,791	192,839
Pioneer Natural Resource	248,000 Shares	236,905	245,810
Plains All Amer Pipeline	215,000 Shares	210,506	228,180
PNC Financial Services	205,000 Shares	211,663	210,074
PNC Financial Services	239,000 Shares	244,623	261,839
Prime Secsrvc Brw/Financ	263,000 Shares	263,901	261,028
Prime Security Services	69,000 Shares	69,000	74,078
Progress Energy Inc	155,000 Shares	158,288	159,163
Public Storage	204,000 Shares	221,415	233,470
Rabobank Nederland	250,000 Shares	262,695	265,410
Radian Group Inc	195,000 Shares	198,939	214,149
Ralph Lauren Corp	80,000 Shares	79,904	81,455
Retail Opportunity Inves	10,000 Shares	10,744	10,725
Roper Tech Inc	95,000 Shares	95,142	95,154
Roper Tech Inc	95,000 Shares	94,955	96,147
Ryder System Inc	75,000 Shares	75,894	76,931
Ryder System Inc	20,000 Shares	20,626	20,660
Sabine Pass Liq	225,000 Shares	240,286	262,422
Sabra Health Capital Corp	189,000 Shares	193,502	202,737
Santander Drive Auto Receivabl	775,000 Shares	774,845	776,922

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Santander Drive Auto Receivabl	395,000 Shares	$ 394,987	$ 395,383
Saudi Arabian Oil Co	74,000 Shares	73,523	89,525
Scentre Group Trust 1/2	232,000 Shares	236,055	267,368
Sempra Energy	246,000 Shares	244,471	284,942
Smithfield Foods Inc	189,000 Shares	195,918	225,020
Southern Cal Edison	80,000 Shares	80,000	80,034
Southern Co	190,000 Shares	191,527	191,495
Southern Copper Corp	129,000 Shares	133,515	135,644
Spirit Realty LP	243,000 Shares	244,147	263,541
Stabucks Corp	201,000 Shares	214,744	217,382
Starwood Property Trust	215,000 Shares	216,388	224,675
Starwood Property Trust	37,000 Shares	37,555	37,620
Stifel Financial CORP	205,000 Shares	203,534	234,262
Store Capital Corp	97,000 Shares	96,782	98,647
Sumitomo Misui Finl Group	280,000 Shares	287,879	291,844
Suntrust Banks Inc	76,000 Shares	77,247	76,157
Symetra Finl Corp	215,000 Shares	223,076	237,603
Time Warner Inc	315,000 Shares	398,074	432,407
T-Mobile	187,000 Shares	189,071	206,631
Toronto-Dominion Bank	290,000 Shares	289,481	291,088
Toronto-Dominion Bank	232,000 Shares	232,966	263,115
Toyota Auto Loan Extended Note	240,000 Shares	239,920	256,298
Toyota Auto Loan Extended Note	265,000 Shares	264,985	272,868
Toyota Auto Receivables Owner	88,142 Shares	88,141	88,670
Toyota Auto Receivables Owner	185,000 Shares	189,459	188,689
Toyota Motor Credit Corp	190,000 Shares	189,935	192,491
Toyota Motor Credit Corp	177,000 Shares	180,590	207,079
Tractor Supply	199,000 Shares	196,999	200,011
Transatlantic Holdings	164,000 Shares	229,218	259,054
TSMC Global LTD	200,000 Shares	198,166	196,344
UBS Barclays Commercial Mort	432,311 Shares	447,119	447,001
United Technologies Corp	302,000 Shares	336,543	360,032
Upjohn Inc	241,000 Shares	241,908	255,732
U.S. Bancorp	164,000 Shares	164,747	184,733
Vereit Operating Partner	209,000 Shares	205,004	236,973
Vereit Operating Partner	72,000 Shares	71,676	75,287
Verizon Communications	147,000 Shares	145,427	147,972
Verizon Communications	182,000 Shares	230,170	237,441
Verizon Communications	115,000 Shares	115,586	116,255
VF Corp	145,000 Shares	147,531	148,115
Viacom Inc	218,000 Shares	198,351	257,560
Viacom CBS Inc	235,000 Shares	235,851	283,210
Visa Inc	84,000 Shares	84,350	91,697
Vulcan Materials Co	227,000 Shares	236,715	260,734
Walt Disney Company	155,000 Shares	153,930	155,502
Waste Connections Inc	205,000 Shares	209,768	233,833
Waste Management Inc	191,000 Shares	192,359	239,573
Wea Financial LLC	218,000 Shares	218,163	223,921
Wells Fargo & Co	285,000 Shares	292,011	293,134
Wells Fargo & Co	260,000 Shares	262,818	283,657

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Wells Fargo Commercial Mortgage	257,000 Shares	$ 264,702	$ 291,967
Wells Fargo Commercial Mortgage	483,000 Shares	497,470	550,581
Wells Fargo Commercial Mortgage	260,000 Shares	267,779	279,191
Wells Fargo Commercial Mortgage	551,000 Shares	567,503	574,164
Welltower Inc	233,000 Shares	234,238	246,542
Wesco	135,000 Shares	141,000	148,477
Westpac Bank Corp	194,000 Shares	197,223	221,214
Westpac Bank Corp	205,000 Shares	208,319	211,988
WF-RBS Commercial Mortgage Trust	160,000 Shares	176,475	176,299
WF-RBS Commercial Mortgage Trust	171,898 Shares	183,427	172,137
WPX Energy Inc	191,000 Shares	193,460	208,196
State and Municipal Bonds			
California ST Txbl	630,000 Shares	640,722	693,611
CMWLTH Fing Auth Pa Txbl Ser-A	85,000 Shares	85,000	99,959
Energy N W WA Elec Revenue Txbl	50,000 Shares	49,666	52,130
Houston TX Utility Sys Revenue Txbl	500,000 Shares	528,315	549,035
Illinois ST Sales Tax Revenue Txbl	230,000 Shares	227,813	221,649
New York NY Txbl Ser B	720,000 Shares	718,078	730,829
New York St Dorm Auth St Perso Txbl	720,000 Shares	731,369	778,305
Pittsburgh PA	130,000 Shares	130,000	130,668
Seattle WA Txbl Ser B	605,000 Shares	605,000	635,825
Univ of California CA Revenues Txbl	520,000 Shares	529,901	629,226
Total fixed income		109,163,149	114,065,226
Commingled Funds			
Wellington CTF DIH	984,788 Shares	13,572,778	11,847,004
External Cominngled Fund	3,000,000 Shares	3,000,000	3,000,000
Total commingled funds		16,572,778	14,847,004
Real Estate Investment Fund			
UBS (US) Trumbull Property Income	1,263 Shares	13,161,031	15,791,710
Real Estate Investment Trust Fund			
RREEF America REIT II, INC LLC	124,950 Shares	11,665,320	15,620,856
Total real estate funds		24,826,351	31,412,566
Investment Contract With Insurance Company			
Lincoln National Life		2,638,189	2,638,189
		$ 378,024,957	$ 445,001,511

* Party-in-interest

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2020

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Series of transactions greater than 5 percent						
Blackrock Short-Term Investment Fund	$ 126,651,746	$ -	$ -	$ 126,651,746	$ 126,651,746	$ -
Blackrock Short-Term Investment Fund	-	127,125,116	-	127,125,116	127,125,116	-
Lincoln National Life	31,461,247	-	-	31,461,247	31,461,247	-
Lincoln National Life	-	33,136,752	-	33,136,752	33,136,752	-

Authorization for BKD, LLP to Electronically Sign Form 5500

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

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

Please mark one selection:

☑ I authorize **BKD, LLP** to electronically sign Form 5500 on behalf of the plan named below.

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

PARKVIEW HEALTH SYSTEMS EMPLOYEE PENSION PLAN

Signature of Plan Administrator

10-13-2021

Date

Dena M. Jacquay

Name of Plan Administrator

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

BKD
TAX360
6-10

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

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning and ending

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information - enter all requested information

1a Name of plan
PARKVIEW HEALTH SYSTEM, INC. EMPLOYEES PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1958

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PARKVIEW HEALTH SYSTEM, INC.
10501 CORPORATE DRIVE
FORT WAYNE IN 46845

2b Employer Identification Number (EIN) 35-1972384

2c Plan Sponsor's telephone number 260-373-4000

2d Business code (see instructions) 622000

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

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

SIGN HERE		10-13-2021	Dena M. Jacquay
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10-13-2021	Dena M. Jacquay
	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:	**4b** EIN	
a	Sponsor's name	**4d** PN	
c	Plan Name		
5	Total number of participants at the beginning of the plan year	**5**	4827
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)**	1934
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1745
b	Retired or separated participants receiving benefits	**6b**	2061
c	Other retired or separated participants entitled to future benefits	**6c**	605
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	4411
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	171
f	Total. Add lines **6d** and **6e**.	**6f**	4582
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0.
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0.
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

- **(1)** [X] 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)** [X] 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)** [X] 1 **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 2020 Form M-1 annual report. If the plan was not required to file the 2020 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 _____

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

	(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Mutual Funds			
	American Funds Capital World Growth	602,449 Shares	$ 26,979,368	$ 35,767,393
	Dodge & Cox Global Stock Fund	2,802,081 Shares	31,760,643	37,267,671
	PIMCO Real Return Fund Class Instl	1,660,809 Shares	18,426,458	20,378,126
	US Core Fixed Income Fund	5,960,231 Shares	72,147,745	77,463,302
	Total mutual funds		149,314,214	170,876,492
*	**Money Market Funds**			
	Blackrock Short-Term Investment Fund	3,635,939 Shares	3,635,939	3,635,939
	Common Stocks			
	Adobe Inc	2,200 Shares	71,910	1,100,262
	Agilent Technologies Inc	6,723 Shares	498,327	796,608
	AIA Group Ltd	86,600 Shares	393,482	1,061,021
	Alexion Pharmeceuticals Inc	2,899 Shares	330,102	452,940
	Alimentation Couche-Tard, Inc NPV	20,400 Shares	518,860	694,625
	Alphabet Inc Cl A	130 Shares	46,088	227,843
	Alphabet Inc Cl C	860 Shares	818,338	1,506,617
	Alphabet Inc Cl C	461 Shares	162,465	807,617
	Amphenol Corp CL A	7,100 Shares	346,270	928,467
	American International Group, Inc	10,087 Shares	498,239	381,894
	Ametek Inc Com	4,462 Shares	237,236	539,634
	Ansys Inc	4,624 Shares	1,544,652	1,682,211
	Arista Networks Inc	2,173 Shares	529,082	631,409
	Atlassian Corporation PLC	1,895 Shares	342,060	443,184
	Apsen Technology Inc Com	3,784 Shares	459,750	492,866
	Automatic Data Processing Inc	6,400 Shares	176,134	599,080
	AXA Equitable Holdings Inc	16,466 Shares	352,353	421,365
	Axos Financial, Inc	15,605 Shares	452,592	585,656
	Bank of America Corp	22,246 Shares	555,951	674,276
	Bank of the Ozarks Inc	15,264 Shares	599,241	477,305
	Bio-Techne Corp	4,922 Shares	1,232,606	1,562,981
	Black Knight Inc	11,634 Shares	952,980	1,027,864
	Blackline Inc	10,802 Shares	924,875	1,440,771
	Booking Holdings Inc	305 Shares	564,504	679,317
	Bright Horizons Family Solutions	3,939 Shares	536,600	681,408
	BroadCom Inc	2,507 Shares	747,992	1,097,690
	Brooks Automation Inc	12,172 Shares	599,647	825,870
	Cable One Inc	703 Shares	1,322,844	1,566,087
	Carmax Inc	3,423 Shares	252,031	323,337
	Carmax Inc	11,017 Shares	1,134,700	1,040,666
	CBRE Group Inc	16,839 Shares	815,819	1,056,142
	CDN National Railways Com NPV	4,200 Shares	460,471	461,341
	Centene Corp Del	9,778 Shares	496,281	586,973
	Cerner Corp Com	9,100 Shares	542,658	714,168
	Charles River Laboritories	2,808 Shares	360,938	701,607
	Cisco Systems Inc	14,800 Shares	283,200	662,300
	Citizens Financial Group Inc	7,775 Shares	203,891	278,034
	CSL LTD NPV	3,500 Shares	158,911	764,808
	Coca Cola Co	4,736 Shares	211,738	259,722

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Cognex Corp	5,800 Shares	$ 315,280	$ 465,653
Cognizant Tech Solutions Crp Com	11,100 Shares	689,228	909,645
Colgate Palmolive Co	5,500 Shares	293,196	470,305
Compass Group 11p	23,100 Shares	404,847	430,386
Costar Group Inc	1,077 Shares	915,726	995,450
Coupa Software Incorporated	611 Shares	186,659	207,074
Crowsstrike Holdings Inc	2,467 Shares	342,151	522,560
Danaher Corp	3,784 Shares	316,772	840,578
Dollar Tree Inc	6,771 Shares	560,458	731,539
Dropbox Inc	25,126 Shares	451,460	557,546
Ecolab Inc	6,796 Shares	1,386,905	1,470,383
Edwards Lifesciencescorp	9,500 Shares	360,630	866,685
Electronicarts Inc	4,696 Shares	432,345	668,745
Envestnet Inc	7,296 Shares	591,301	600,388
Experian PLC	13,300 Shares	249,797	504,868
Facebook Inc	5,434 Shares	1,015,171	1,484,351
Fanuc Co JPY Ords	2,600 Shares	417,706	622,388
Fastenal Co	17,700 Shares	497,264	864,291
Fastenal Co	18,984 Shares	891,620	926,989
Guidwire Software Inc	5,093 Shares	540,193	655,622
Heico Corp CL A	6,889 Shares	645,162	806,426
Home Depot Inc	2,027 Shares	310,990	538,412
Idexx Corp	1,034 Shares	393,100	516,866
Illumina Inc	1,100 Shares	274,972	407,000
Illumina Inc	3,548 Shares	1,227,256	1,312,760
Industria De Diseno Textil EUR	19,300 Shares	543,496	614,925
Insperity Inc	4,117 Shares	308,980	335,206
Intuitivesurgical Inc	1,200 Shares	166,203	981,720
Intuitivesurgical Inc	954 Shares	145,457	780,467
Jacobs Engr Group Inc	2,709 Shares	151,408	295,173
Jardine Matheson Holdings USD 0.25	6,700 Shares	294,497	375,200
Johnson & Johnson	4,100 Shares	277,841	645,258
Jones Lang Lasalle Inc	3,940 Shares	553,330	584,578
Keyence Co NPV	2,600 Shares	168,830	1,481,896
KKR & Co Inc	12,206 Shares	312,448	494,221
Kone Corp New NPV	5,480 Shares	293,462	450,732
Lamb Weston Holdings Inc	4,819 Shares	308,069	379,448
Lam Research Corp Com	1,527 Shares	409,235	721,156
Liberty Sirius XM Group	10,861 Shares	483,663	469,087
Linde Public Limited Company	1,927 Shares	328,587	507,784
Linde Public Limited Company	3,400 Shares	555,747	895,934
L'Oreal SA EUR	2,300 Shares	290,513	874,647
LVMH Moet Hennessy Loui EUR	1,400 Shares	247,758	875,161
Markel Holdings	1,392 Shares	1,516,181	1,438,354
Martin Marietta Matls Inc Com	1,190 Shares	218,231	337,924
Masmo Corp	700 Shares	184,831	187,866
Mastercard Inc	3,400 Shares	147,956	1,213,596
Mccormick & Co Inc Non V	4,990 Shares	361,303	477,044
Merck & Co Inc New	6,382 Shares	493,751	522,048
Metlife Inc	7,818 Shares	369,211	367,055

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Micron Technology Inc	11,253 Shares	$ 467,748	$ 846,001
Microsoft Corp	11,492 Shares	652,624	2,555,828
Microsoft Corp	6,200 Shares	190,973	1,379,004
Middleby Corp Com	2,467 Shares	328,229	318,046
Moodys Corp	4,461 Shares	1,295,839	1,294,761
Morgan Stanley	8,147 Shares	353,091	558,314
Nestle SA CHF	5,000 Shares	313,015	606,300
Nexstar Broadcasting Group Inc	4,185 Shares	414,155	456,960
Nextera Energy Partners LP	5,824 Shares	374,222	390,499
Nike Inccl B	8,200 Shares	203,671	1,160,054
Norfolk Southern Corp	1,967 Shares	369,594	467,379
Northrop Grumman Corp	1,693 Shares	546,114	515,891
Novartis AG CHF	5,900 Shares	450,920	553,715
Novo Nordisk A/S DKK	12,100 Shares	418,104	867,570
NVR Inc Com	107 Shares	296,198	436,545
Okta Inc	1,933 Shares	403,439	491,485
Old Dominion Freight Line Inc	2,515 Shares	498,230	490,878
Oracle Corporation	10,800 Shares	351,388	698,652
Performance Food Group Co	7,703 Shares	218,288	366,740
Pros Holdings Inc	16,703 Shares	627,179	848,011
Qualys Inc	4,916 Shares	509,994	599,113
Reckitt Benckiser PLC GBP	5,600 Shares	339,206	500,782
Restaurant Brands International Inc	7,310 Shares	438,330	446,714
Roche Hldfs Ag Genussscheine	2,200 Shares	459,458	745,800
Roper Technologies	2,703 Shares	1,162,915	1,165,236
SBA Communications Corp	5,962 Shares	1,767,388	1,682,059
SFS SA CHF	160 Shares	335,357	483,285
Signature Bk New York, NY	2,677 Shares	351,956	362,171
Shin-Etsu Chemical Co Ltd NPV	4,800 Shares	263,307	857,520
SMC Corp JPY	800 Shares	261,777	471,229
Stryker Corp	3,200 Shares	172,886	784,128
Taiwan Semi Conductor Manufactu - ADR	14,100 Shares	205,000	1,537,464
Teleflex Inc	3,644 Shares	1,442,414	1,499,761
Texas Instruments	4,460 Shares	560,910	732,020
Texas Pacld Tr Sub Sh Ctf	716 Shares	492,143	520,532
Thermo Fisher Scientific Inc	1,332 Shares	394,597	620,419
TJX Companies Inc	9,611 Shares	332,741	656,335
TJX Companies Inc	11,800 Shares	286,901	805,822
T Mobile US Inc	5,212 Shares	585,650	702,838
Transdigm Group Inc	1,895 Shares	933,771	1,172,721
Twilio Inc	1,384 Shares	342,989	468,484
Tyler Technologies Inc	559 Shares	189,756	244,015
Unitedhealthgroup Inc	2,368 Shares	241,203	830,410
Universal display Corp	2,549 Shares	311,899	585,760
Veeva Systems Inc	3,149 Shares	880,924	857,315
Verisk Analytics Inc	7,006 Shares	1,309,963	1,454,376
V F Corp	4,267 Shares	348,426	364,444
Visa Inc - Class A Shrs	2,554 Shares	217,657	558,636
Vulcan Materials Company	10,024 Shares	1,237,274	1,486,659
Walmart Inc	4,807 Shares	575,156	692,929

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Common Stocks			
Walt Disney Co	4,500 Shares	$ 432,039	$ 815,310
Waste Connections, Inc	11,035 Shares	1,109,031	1,131,860
Waters Corp	2,700 Shares	535,182	668,034
Willis Towers Watson	1,721 Shares	236,579	362,580
Xpo Logistics Inc	3,669 Shares	259,541	437,345
Total common stocks		71,874,337	107,526,095
U.S. Government and Agency Obligations			
Fed Home LN MTG Corp	217,241 Shares	218,497	223,782
Fed Home LN MTG Corp	131,324 Shares	136,002	133,436
Fed Home LN MTG Corp	169,940 Shares	175,198	173,383
Fed Home LN MTG Corp	580,000 Shares	582,078	707,606
Fed Home LN MTG Corp	510,000 Shares	525,275	568,415
Fed Home LN MTG Corp	463,163 Shares	511,216	529,890
Fed Home LN MTG Corp Pool #G60651	376,489 Shares	397,872	412,263
Fed Home LN MTG Corp Pool #QA4336	453,664 Shares	461,213	479,232
Fed Home LN MTG Corp Pool #QA4396	601,377 Shares	596,397	634,494
Fed Home LN MTG Corp Pool #QB5838	838,543 Shares	882,566	891,547
Fed Home LN MTG Corp Pool #RA2794	408,545 Shares	435,675	433,454
Fed Home LN MTG Corp Pool #RA2970	1,175,791 Shares	1,232,009	1,242,611
Fed Home LN MTG Corp Pool #RB5090	249,033 Shares	257,087	258,795
Fed Home LN MTG Corp Pool #ZA2413	181,878 Shares	197,861	198,076
Fed Home LN MTG Corp Pool #ZA2414	256,087 Shares	270,504	276,787
Fed Home LN MTG Corp Pool #ZA2439	281,438 Shares	290,849	300,100
Fed Home LN MTG Corp Pool #ZS8571	288,039 Shares	304,182	309,155
Fed Home LN MTG Corp Pool #ZS4678	181,009 Shares	183,613	193,690
Fed Home LN MTG Corp Pool #ZT1639	261,696 Shares	268,831	281,166
Fed Natl MTG Assn	425,482 Shares	423,620	430,226
Fed Natl MTG Assn	25 Shares	25	25
Fed Natl MTG Assn Pool #AI5534	162,217 Shares	172,862	172,617
Fed Natl MTG Assn Pool #AI8401	165,042 Shares	185,465	191,428
Fed Natl MTG Assn Pool #AL6104	202,707 Shares	212,209	212,524
Fed Natl MTG Assn Pool #AL6895	572,072 Shares	593,093	621,968
Fed Natl MTG Assn Pool #AP0495	640,579 Shares	673,809	696,687
Fed Natl MTG Assn Pool #AS4170	163,744 Shares	175,180	178,751
Fed Natl MTG Assn Pool #AS7568	138,923 Shares	152,837	152,381
Fed Natl MTG Assn Pool #BM3900	495,066 Shares	511,716	531,062
Fed Natl MTG Assn Pool #BQ0538	413,178 Shares	437,065	435,932
Fed Natl MTG Assn Pool #BQ2883	393,422 Shares	414,138	415,088
Fed Natl MTG Assn Pool #BR0479	689,525 Shares	714,951	716,334
Fed Natl MTG Assn Pool #CA2219	315,526 Shares	335,073	349,356
Fed Natl MTG Assn Pool #CA6307	650,782 Shares	679,253	688,677
Fed Natl MTG Assn Pool #CA6613	923,974 Shares	976,813	969,156
Fed Natl MTG Assn Pool #CA6799	620,338 Shares	646,848	646,808
Fed Natl MTG Assn Pool #FM2714	692,344 Shares	736,156	731,094
Fed Natl MTG Assn Pool #FM2875	159,902 Shares	168,072	167,828
Fed Natl MTG Assn Pool #FM2995	189,472 Shares	201,729	200,058
Fed Natl MTG Assn Pool #MA2028	108,983 Shares	119,063	121,308
Fed Natl MTG Assn Pool #MA2158	406,725 Shares	444,474	449,285
Fed Natl MTG Assn Pool #MA2211	444,767 Shares	480,626	484,907

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
U.S. Government and Agency Obligations			
Fed Natl MTG Assn Pool #MA2260	180,627 Shares	$ 190,223	$ 194,733
Fed Natl MTG Assn Pool #MA2279	247,247 Shares	265,334	271,301
FRESB Multifamily Mortgage Pass-through	457,283 Shares	454,561	488,636
Govt Natl Mtg Assn Pool #711067	135,503 Shares	152,822	154,948
U.S. Treasury Bond	1,190,900 Shares	1,142,800	1,115,349
U.S. Treasury Note	385,000 Shares	385,756	387,618
U.S. Treasury Note	950,000 Shares	970,549	968,924
U.S. Treasury Note	955,000 Shares	977,529	974,396
U.S. Treasury Note	243,300 Shares	258,878	259,059
U.S. Treasury Note	775,000 Shares	788,526	784,626
U.S. Treasury Note	765,000 Shares	781,197	777,492
U.S. Treasury Note	95,000 Shares	95,910	95,656
U.S. Treasury Note	300,000 Shares	302,348	302,976
U.S. Treasury Note	615,000 Shares	629,246	629,151
U.S. Treasury Note	600,000 Shares	632,674	632,862
U.S. Treasury Note	675,700 Shares	662,901	660,605
U.S. Treasury Note	925,000 Shares	924,714	925,148
U.S. Treasury Note	730,000 Shares	729,734	730,117
Corporate Bonds			
Abbvie Inc	145,000 Shares	150,525	151,682
Abbvie Inc	153,000 Shares	162,196	206,928
Abbvie Inc	262,000 Shares	264,789	289,733
Advance Auto Parts	253,000 Shares	252,962	256,947
AERCAO Ireland Cap	325,000 Shares	349,460	352,372
Air Lease Corp	187,000 Shares	190,280	197,870
Aker BP ASA	235,000 Shares	243,225	243,129
Albemarle Corp	170,000 Shares	200,088	203,556
Albertsons COS/Safeway	40,000 Shares	40,000	41,000
Albertsons COS/Safeway	189,000 Shares	188,323	191,243
Alexandria Real Estate E	219,000 Shares	220,880	241,020
Alimentation Couche-Tard	245,000 Shares	264,213	275,868
Ally Financial Inc	97,000 Shares	99,320	97,998
Amerada Hess Corp	112,000 Shares	139,254	147,222
American Express Co	185,000 Shares	190,779	189,727
American Express Credit Accoun	225,000 Shares	230,388	227,304
American Honda Finance	180,000 Shares	179,734	183,928
American Tower Trust I	230,000 Shares	227,775	252,830
Americredit Automobile Receiva	705,000 Shares	691,120	717,316
Ameriprise Financial Inc	170,000 Shares	174,384	175,554
Amphenol Corp	65,000 Shares	65,900	66,043
Anheuser Busch Inbev Wor	174,000 Shares	196,540	267,852
Antero Midstream Part	184,000 Shares	188,029	180,780
Antero Resources Corp	110,000 Shares	111,470	112,276
Apple Inc	179,000 Shares	177,770	189,982
Arches Buyer Inc	257,000 Shares	260,037	260,264
Ari Fleet Lease Trust	1,000,000 Shares	1,024,609	1,024,800
Ari Fleet Lease Trust	725,000 Shares	724,763	745,655
Aspen Insurance Hldg Ltd	173,000 Shares	181,047	189,371
Assurant Inc	33,000 Shares	33,015	33,000

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Athene Holding Ltd	124,000 Shares	$ 123,942	$ 131,044
AT&T Inc	250,000 Shares	197,878	249,153
AT&T Inc	235,000 Shares	243,843	243,211
AT&T Inc	304,000 Shares	304,462	318,662
AT&T Inc	118,000 Shares	118,188	120,394
Aust & NZ Banking Group	204,000 Shares	204,000	215,240
Avis Budget Rental Car Funding	515,000 Shares	514,918	531,871
Avis Budget Rental Car Funding	380,000 Shares	412,107	411,730
Axis Spec Fin	242,000 Shares	247,904	253,197
Bacardi LTD	207,000 Shares	219,892	231,087
Bank of America Corp	628,000 Shares	646,946	709,351
Bank of America Corp	315,000 Shares	335,661	336,511
Bank of America Corp	565,000 Shares	571,583	570,842
Bank of America Credit Card Tr	130,000 Shares	132,092	130,391
Bank of Montreal	280,000 Shares	284,230	303,691
Bank of Montreal	280,000 Shares	287,018	289,100
Bank of Nova Scotia	205,000 Shares	201,275	205,039
Bank (SER 2020-BN27)	776,000 Shares	799,235	814,691
Bank (SER 2020-BN29)	101,000 Shares	104,022	104,629
Barclays Commerical Mortgage S	178,000 Shares	183,331	185,729
Barclays PLC	207,000 Shares	217,810	224,038
Bat Capital Corp	223,000 Shares	191,746	247,630
Bat Capital Corp	182,000 Shares	185,519	214,008
BB&T Corp	115,000 Shares	118,926	118,333
Benchmark Mortage Trust	302,000 Shares	311,036	311,573
Benchmark Mortage Trust	495,000 Shares	511,502	511,568
Berkshire Hathaway Energy	164,000 Shares	171,075	212,442
Blackrock Inc	215,000 Shares	223,415	225,047
BMW Vehicle Owner Trust	265,000 Shares	268,215	268,670
BNP Paribas	205,000 Shares	211,710	205,271
Boeing Co	70,000 Shares	69,997	70,642
Boston Properties	115,000 Shares	116,624	115,476
Bp Capital Markets Plc	190,000 Shares	196,027	195,060
Brixmor Operating Part	243,000 Shares	239,031	279,525
Brixmor Operating Part	121,000 Shares	123,683	138,880
Broadcom Inc	317,000 Shares	327,725	367,010
Burlington North Santa Fe	169,000 Shares	193,060	234,400
Capital Auto Receivable Asset	625,000 Shares	624,860	633,325
Capital One Financial Co	211,000 Shares	218,389	231,792
Capital One Financial Co	185,000 Shares	188,389	186,375
Capital One Multi-asset Execut	245,000 Shares	245,523	247,212
Capital One Multi-asset Execut	759,000 Shares	758,798	811,644
Capital One Prime Auto Receiva	6,895 Shares	6,915	6,901
Capital One Prime Auto Receiva	119,881 Shares	119,875	120,507
Cargill Inc	166,000 Shares	163,565	203,060
Carlyle Finance LLC	172,000 Shares	178,410	223,671
Caterpillar Finl Service	229,000 Shares	229,754	237,869
Caterpillar Finl Service	235,000 Shares	241,418	242,271
CD 2016-CD2 MTG TR	416,000 Shares	428,469	471,008
CD 2017-CD3 MTG TR	377,000 Shares	388,297	429,380
Centerpoint Energy Inc	190,000 Shares	195,922	195,065

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Centerpoint Energy Inc	204,000 Shares	$ 222,801	$ 222,040
CFCRE Commercial Mortgage Trust	255,000 Shares	262,648	289,196
Cheniere Corpus Christi Hldgs LLC	10,000 Shares	10,000	10,500
Cheniere Corpus Christi Hldgs LLC	120,000 Shares	121,971	133,591
Chesapeake Funding II LLC	34,175 Shares	34,233	34,204
Cintas Coporation No. 2	115,000 Shares	119,161	118,367
Citibank Credit Card Issuance	295,000 Shares	298,115	295,389
Citigroup Commercial Mortgage Trust	479,000 Shares	493,557	503,051
Citigroup Inc	178,000 Shares	175,760	198,945
Citigroup Inc	255,000 Shares	292,509	309,228
Citigroup Inc	211,000 Shares	212,767	230,530
Citigroup Inc	285,000 Shares	286,503	289,554
CMS Energy Corp	182,000 Shares	203,105	234,116
Coca Cola	220,000 Shares	221,843	235,418
Comcast Corp	259,000 Shares	295,485	341,318
Comcast Corp	236,000 Shares	246,136	259,650
Comcast Corp	144,000 Shares	146,066	158,445
Comm Mortgage Trust	719,000 Shares	786,631	778,526
Comm Mortgage Trust	129,000 Shares	135,880	141,374
Comm Mortgage Trust	700,000 Shares	744,105	772,296
Comm Mortgage Trust	500,000 Shares	514,964	567,335
Commercial Mortgage Pass-through	132,000 Shares	141,936	136,359
Consolidated Edison Co	170,000 Shares	170,210	170,301
Continental Resources	29,000 Shares	29,000	32,189
Costar Group Inc	242,000 Shares	247,155	251,448
Cott Corp	72,000 Shares	73,080	74,340
Credit Suisse Group AG	289,000 Shares	289,000	304,106
Crown Castle International Corp	171,000 Shares	177,825	187,117
CVS Health Corp	95,000 Shares	98,483	99,168
CVS Health Corp	29,000 Shares	29,097	31,025
CVS Health Corp	184,000 Shares	197,262	218,953
CVS Health Corp	263,000 Shares	263,043	266,064
Daimler Finance NA LLC	200,000 Shares	200,000	201,456
Davita Inc	60,000 Shares	60,000	60,922
Dbubs Mortgage Trust	23,416 Shares	26,239	23,414
Dbubs Mortgage Trust	148,000 Shares	163,257	148,126
Deere & Co	204,000 Shares	218,991	264,331
Deutsche Bank Commerical Mortg	162,000 Shares	166,853	167,233
Devon Energy Corp	264,000 Shares	250,553	322,867
DH Europe Finance	212,000 Shares	215,634	241,457
Diamondback Energy Inc	323,000 Shares	328,589	345,067
Diamond Sports	207,000 Shares	172,586	125,235
Discover Card Execution Note T	170,000 Shares	175,850	175,030
Discovery Communications	199,000 Shares	210,361	258,469
Discovery Communications	180,000 Shares	182,937	206,192
Dominion Energy Inc	238,000 Shares	241,008	256,928
Dow Chemical Co	215,000 Shares	237,384	263,319
DTE Energy Co	95,000 Shares	98,267	97,974
Duke Energy Progress LLC	195,000 Shares	195,013	195,033
Duke Energy Progress LLC	194,000 Shares	198,561	235,060
Duke University	215,000 Shares	215,000	248,456

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Entergy Mississippi Inc	202,000 Shares	$ 201,034	$ 214,716
Enterprise Fleet Financing LLC	788,000 Shares	787,762	811,096
Enterprise Fleet Financing LLC	590,000 Shares	589,947	598,968
Enterprise Products Oper	164,000 Shares	195,726	225,469
Enterprise Products Oper	68,000 Shares	68,848	68,332
Erac USA Finance Company	624,000 Shares	262,365	330,480
ESH Hospitality Inc	231,000 Shares	222,915	236,775
Federal Realty Investments	258,000 Shares	259,687	285,671
Fidelity	198,000 Shares	227,157	231,066
Fifth Third Auto Trust	959 Shares	959	960
First Citizens Bancshare	193,000 Shares	191,363	196,520
Fiserv Inc	182,000 Shares	182,329	203,873
FMC Corp	209,000 Shares	213,346	237,932
Ford Motor Creidt Co LLC	225,000 Shares	244,474	244,643
Ford Credit Auto Owner Trust	37,595 Shares	37,591	37,736
Ford Credit Auto Owner Trust	8,795 Shares	8,691	8,805
Ford Credit Auto Owner Trust/F	465,000 Shares	489,776	490,198
Ford Credit Auto Owner Trust/F	650,000 Shares	649,790	656,234
Fortive Corporation	135,000 Shares	151,912	166,325
Freeport-Mcmoran Inc	81,000 Shares	81,000	84,949
GE CO	77,000 Shares	78,011	87,091
General Motors Finl Co	136,000 Shares	133,399	151,928
General Motors Finl Co	217,000 Shares	229,247	232,038
Genesis Energy LP	232,000 Shares	233,107	229,726
Gilead Sciences Inc	125,000 Shares	124,605	127,356
Global Net Lease	182,000 Shares	183,472	187,640
GM Financial Securitized Term	75,000 Shares	74,995	75,024
GM Financial Securitized Term	133,736 Shares	136,221	136,254
GMRF Mortgage Acquisition Co	61,808 Shares	62,380	62,273
GMRF Mortgage Acquisition Co	193,967 Shares	194,796	197,491
GMRF Mortgage Acquisition Co	153,806 Shares	156,265	155,893
Goldman Sachs BDC Inc	20,000 Shares	20,187	20,408
Goldman Sachs Group Inc	149,000 Shares	191,208	233,359
Goldman Sachs Group Inc	415,000 Shares	458,543	461,061
Goldman Sachs Group Inc	90,000 Shares	90,237	90,365
Goldman Sachs Group Inc	278,000 Shares	278,293	281,055
Goldman Sachs Group Inc	195,000 Shares	197,600	198,959
GS Mortgage Securities Corp II	46,982 Shares	50,170	46,972
GS Mortgage Securities Trust	183,000 Shares	188,490	204,453
GS Mortgage Securities Trust	183,000 Shares	198,555	202,299
GS Mortgage Securities Trust	350,000 Shares	360,498	375,351
Harris Corporation	189,000 Shares	200,039	212,134
HCA Inc	201,000 Shares	212,510	226,119
Hertz Fleet Lease Funding LP	454,330 Shares	454,266	461,086
Hollyfrontier Corp	270,000 Shares	292,702	301,509
Homedepot Inc	120,000 Shares	120,099	120,371
Homedepot Inc	195,000 Shares	196,258	217,641
Honeywell International	40,000 Shares	40,018	40,064
Honda Auto Receivables Owner T	64,886 Shares	64,882	65,119
Hudson Pacific Poperties	247,000 Shares	247,164	263,332
Huntington Bancshares	215,000 Shares	217,474	229,755

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Hyundai Auto Receivables Trust	100,805 Shares	$ 103,411	$ 102,320
H & E Equip Services	33,000 Shares	33,000	33,353
IBM Credit Corp	180,000 Shares	179,150	180,365
HIS Market LTD	212,000 Shares	243,177	242,867
Indiana Michigan Power	175,000 Shares	182,376	228,932
ING GROEP NV	264,000 Shares	264,586	273,026
Intel Corp	175,000 Shares	239,242	244,226
Interpublic Group Cos	115,000 Shares	118,412	117,882
Interpublic Group Cos	214,000 Shares	220,592	265,405
Istar Financial Inc	47,000 Shares	43,715	47,588
Istar Financial Inc	207,000 Shares	204,998	211,140
Jefferies GRP LLC/CAP	152,000 Shares	155,782	177,168
Johnson & Son Inc	250,000 Shares	316,513	347,593
John Deere Capital Corp	155,000 Shares	154,962	155,753
John Deere Capital Corp	15,000 Shares	15,044	15,079
John Deere Owner Trust	65,000 Shares	65,033	65,056
John Deere Owner Trust	60,254 Shares	60,600	60,862
Jones Lang LaSalle Inc	206,000 Shares	212,555	218,280
JPMDB Commerical Mortgage Secu	167,000 Shares	172,010	176,003
JPMorgan Chase Commercial Mor	319,000 Shares	342,277	348,523
JPMorgan Chase Commercial Mor	151,000 Shares	155,530	171,673
JPMorgan Chase & Co	575,000 Shares	630,700	701,558
JPMorgan Chase & Co	330,000 Shares	346,587	348,523
JPMorgan Chase & Co	280,000 Shares	285,656	287,327
Keurig Dr Pepper Inc	75,000 Shares	77,128	75,935
Keysight Technologies	192,000 Shares	201,791	217,098
Kimco Realty Corp	252,000 Shares	243,507	274,809
Kinder Morgan Ener Part	75,000 Shares	79,033	78,178
Kinder Morgan Inc	173,000 Shares	185,984	197,393
KKR Group Finance Co III	175,000 Shares	184,552	229,714
Kraton Polymers LLC	217,000 Shares	219,030	221,362
Kroger Co	165,000 Shares	165,367	165,261
Lam Research Corp	237,000 Shares	240,500	265,843
Lehigh University	395,000 Shares	395,000	426,726
Lexington Realty Trust	164,000 Shares	163,981	170,721
Lions Gate Capital Hold	231,000 Shares	242,084	236,776
Live Nation Entertainment	39,000 Shares	39,000	39,972
Lloyds Banking Group PLC	205,000 Shares	219,949	234,465
Lowe's COS Inc	142,000 Shares	160,734	176,757
Loews Corp	96,000 Shares	97,253	109,058
Macquarie Bank LTD	175,000 Shares	190,030	177,732
Match Group Inc	205,000 Shares	204,688	213,200
Match Group Inc	20,000 Shares	20,000	20,963
Mcdonalds Corp	190,000 Shares	193,704	194,583
Meiji Yasuda Life Insurance	250,000 Shares	271,375	286,828
Mercedes-Benz Auto Receivables Tr	211,547 Shares	214,085	213,922
Merck & Co Inc	155,000 Shares	158,792	195,739
Microchip Technology Inc	165,000 Shares	165,313	167,343
Microsoft Corp	193,000 Shares	193,483	209,154
Midwest Connector Capital	208,000 Shares	208,593	213,200
Mitsubishi UFJ Finance Group	278,000 Shares	290,611	301,394

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Morgan Stanley	271,000 Shares	$ 272,598	$ 286,241
Morgan Stanley	188,000 Shares	184,953	231,706
Morgan Stanley	275,000 Shares	289,913	290,227
Morgan Stanley BAML Trust	520,000 Shares	535,587	595,301
Morgan Stanley Capital I	230,000 Shares	236,892	253,564
Morgan Stanley Capital I	680,000 Shares	700,360	811,104
Morgan Stanley Capital I	554,000 Shares	571,646	575,573
MPLX LP	226,000 Shares	240,185	260,655
MPLX LP	75,000 Shares	75,165	75,013
Murphy Oil Corp	193,000 Shares	193,552	191,070
NASDAQ INC	125,000 Shares	125,000	125,146
Nationwide Mutual Insura	204,000 Shares	203,525	239,643
New York University	720,000 Shares	709,315	747,396
Newfield Exploration Co	243,000 Shares	247,731	252,392
Nexstar Broadcasting Inc	236,000 Shares	238,731	246,915
Nextera Energy Capital	140,000 Shares	145,252	144,465
Nissan Auto Receivables Owner	75,000 Shares	76,954	76,598
Noble Energy Inc	126,000 Shares	126,025	177,314
NRG Energy	123,000 Shares	123,557	127,549
Nucor Corp	160,000 Shares	167,115	166,470
Nustar Logistics LP	30,000 Shares	30,225	31,950
Nvidia Corp	83,000 Shares	84,791	100,686
Occidental Petro COR	241,000 Shares	246,950	251,269
Oracle Corp	155,000 Shares	156,102	156,561
Outfront Media Cap	166,000 Shares	170,686	175,130
Owl Rock Capital Corp	247,000 Shares	246,583	250,537
Paccar Financial Corp	130,000 Shares	131,620	134,187
Pattern Energy OP	115,000 Shares	116,706	121,325
Paypal Holdings Inc	228,000 Shares	229,968	244,147
Pepsico Inc	194,000 Shares	196,342	234,573
Philip Morris Intl Inc	266,000 Shares	275,613	277,425
Physicians Realty LP	174,000 Shares	173,791	192,839
Pioneer Natural Resource	248,000 Shares	236,905	245,810
Plains All Amer Pipeline	215,000 Shares	210,506	228,180
PNC Financial Services	205,000 Shares	211,663	210,074
PNC Financial Services	239,000 Shares	244,623	261,839
Prime Secsrvc Brw/Financ	263,000 Shares	263,901	261,028
Prime Security Services	69,000 Shares	69,000	74,078
Progress Energy Inc	155,000 Shares	158,288	159,163
Public Storage	204,000 Shares	221,415	233,470
Rabobank Nederland	250,000 Shares	262,695	265,410
Radian Group Inc	195,000 Shares	198,939	214,149
Ralph Lauren Corp	80,000 Shares	79,904	81,455
Retail Opportunity Inves	10,000 Shares	10,744	10,725
Roper Tech Inc	95,000 Shares	95,142	95,154
Roper Tech Inc	95,000 Shares	94,955	96,147
Ryder System Inc	75,000 Shares	75,894	76,931
Ryder System Inc	20,000 Shares	20,626	20,660
Sabine Pass Liq	225,000 Shares	240,286	262,422
Sabra Health Capital Corp	189,000 Shares	193,502	202,737
Santander Drive Auto Receivabl	775,000 Shares	774,845	776,922

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Santander Drive Auto Receivabl	395,000 Shares	$ 394,987	$ 395,383
Saudi Arabian Oil Co	74,000 Shares	73,523	89,525
Scentre Group Trust 1/2	232,000 Shares	236,055	267,368
Sempra Energy	246,000 Shares	244,471	284,942
Smithfield Foods Inc	189,000 Shares	195,918	225,020
Southern Cal Edison	80,000 Shares	80,000	80,034
Southern Co	190,000 Shares	191,527	191,495
Southern Copper Corp	129,000 Shares	133,515	135,644
Spirit Realty LP	243,000 Shares	244,147	263,541
Stabucks Corp	201,000 Shares	214,744	217,382
Starwood Property Trust	215,000 Shares	216,388	224,675
Starwood Property Trust	37,000 Shares	37,555	37,620
Stifel Financial CORP	205,000 Shares	203,534	234,262
Store Capital Corp	97,000 Shares	96,782	98,647
Sumitomo Misui Finl Group	280,000 Shares	287,879	291,844
Suntrust Banks Inc	76,000 Shares	77,247	76,157
Symetra Finl Corp	215,000 Shares	223,076	237,603
Time Warner Inc	315,000 Shares	398,074	432,407
T-Mobile	187,000 Shares	189,071	206,631
Toronto-Dominion Bank	290,000 Shares	289,481	291,088
Toronto-Dominion Bank	232,000 Shares	232,966	263,115
Toyota Auto Loan Extended Note	240,000 Shares	239,920	256,298
Toyota Auto Loan Extended Note	265,000 Shares	264,985	272,868
Toyota Auto Receivables Owner	88,142 Shares	88,141	88,670
Toyota Auto Receivables Owner	185,000 Shares	189,459	188,689
Toyota Motor Credit Corp	190,000 Shares	189,935	192,491
Toyota Motor Credit Corp	177,000 Shares	180,590	207,079
Tractor Supply	199,000 Shares	196,999	200,011
Transatlantic Holdings	164,000 Shares	229,218	259,054
TSMC Global LTD	200,000 Shares	198,166	196,344
UBS Barclays Commercial Mort	432,311 Shares	447,119	447,001
United Technologies Corp	302,000 Shares	336,543	360,032
Upjohn Inc	241,000 Shares	241,908	255,732
U.S. Bancorp	164,000 Shares	164,747	184,733
Vereit Operating Partner	209,000 Shares	205,004	236,973
Vereit Operating Partner	72,000 Shares	71,676	75,287
Verizon Communications	147,000 Shares	145,427	147,972
Verizon Communications	182,000 Shares	230,170	237,441
Verizon Communications	115,000 Shares	115,586	116,255
VF Corp	145,000 Shares	147,531	148,115
Viacom Inc	218,000 Shares	198,351	257,560
Viacom CBS Inc	235,000 Shares	235,851	283,210
Visa Inc	84,000 Shares	84,350	91,697
Vulcan Materials Co	227,000 Shares	236,715	260,734
Walt Disney Company	155,000 Shares	153,930	155,502
Waste Connections Inc	205,000 Shares	209,768	233,833
Waste Management Inc	191,000 Shares	192,359	239,573
Wea Financial LLC	218,000 Shares	218,163	223,921
Wells Fargo & Co	285,000 Shares	292,011	293,134
Wells Fargo & Co	260,000 Shares	262,818	283,657

Parkview Health System, Inc. Employees' Pension Plan

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

December 31, 2020

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate Bonds			
Wells Fargo Commercial Mortgage	257,000 Shares	$ 264,702	$ 291,967
Wells Fargo Commercial Mortgage	483,000 Shares	497,470	550,581
Wells Fargo Commercial Mortgage	260,000 Shares	267,779	279,191
Wells Fargo Commercial Mortgage	551,000 Shares	567,503	574,164
Welltower Inc	233,000 Shares	234,238	246,542
Wesco	135,000 Shares	141,000	148,477
Westpac Bank Corp	194,000 Shares	197,223	221,214
Westpac Bank Corp	205,000 Shares	208,319	211,988
WF-RBS Commercial Mortgage Trust	160,000 Shares	176,475	176,299
WF-RBS Commercial Mortgage Trust	171,898 Shares	183,427	172,137
WPX Energy Inc	191,000 Shares	193,460	208,196
State and Municipal Bonds			
California ST Txbl	630,000 Shares	640,722	693,611
CMWLTH Fing Auth Pa Txbl Ser-A	85,000 Shares	85,000	99,959
Energy N W WA Elec Revenue Txbl	50,000 Shares	49,666	52,130
Houston TX Utility Sys Revenue Txbl	500,000 Shares	528,315	549,035
Illinois ST Sales Tax Revenue Txbl	230,000 Shares	227,813	221,649
New York NY Txbl Ser B	720,000 Shares	718,078	730,829
New York St Dorm Auth St Perso Txbl	720,000 Shares	731,369	778,305
Pittsburgh PA	130,000 Shares	130,000	130,668
Seattle WA Txbl Ser B	605,000 Shares	605,000	635,825
Univ of California CA Revenues Txbl	520,000 Shares	529,901	629,226
Total fixed income		109,163,149	114,065,226
Commingled Funds			
Wellington CTF DIH	984,788 Shares	13,572,778	11,847,004
External Cominngled Fund	3,000,000 Shares	3,000,000	3,000,000
Total commingled funds		16,572,778	14,847,004
Real Estate Investment Fund			
UBS (US) Trumbull Property Income	1,263 Shares	13,161,031	15,791,710
Real Estate Investment Trust Fund			
RREEF America REIT II, INC LLC	124,950 Shares	11,665,320	15,620,856
Total real estate funds		24,826,351	31,412,566
Investment Contract With Insurance Company			
Lincoln National Life		2,638,189	2,638,189
		$ 378,024,957	$ 445,001,511

* Party-in-interest

Parkview Health System, Inc. Employees' Pension Plan

EIN 35-1972384 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2020

Description of Asset	Purchase Price	Selling Price	Expense Incurred With Transaction	Cost of Asset	Value	Net Gain (Loss)
Series of transactions greater than 5 percent						
Blackrock Short-Term Investment Fund	$ 126,651,746	$ -	$ -	$ 126,651,746	$ 126,651,746	$ -
Blackrock Short-Term Investment Fund	-	127,125,116	-	127,125,116	127,125,116	-
Lincoln National Life	31,461,247	-	-	31,461,247	31,461,247	-
Lincoln National Life	-	33,136,752	-	33,136,752	33,136,752	-