

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 2021 This Form is Open to Public Inspection
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Part I Annual Report Identification Information	
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☒ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	▶ ☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	▶ ☐

Part II Basic Plan Information—enter all requested information											
1a Name of plan <u>PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1961</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>34-0714357</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>330-543-5019</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>622000</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1961</u>		2b Employer Identification Number (EIN) <u>34-0714357</u>		2c Plan Sponsor's telephone number <u>330-543-5019</u>		2d Business code (see instructions) <u>622000</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>										
1c Effective date of plan <u>01/01/1961</u>											
2b Employer Identification Number (EIN) <u>34-0714357</u>											
2c Plan Sponsor's telephone number <u>330-543-5019</u>											
2d Business code (see instructions) <u>622000</u>											
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>CHILDREN'S HOSPITAL MED CNTR AKRON</u> <u>AKRON CHILDREN'S HOSPITAL</u> <u>ONE PERKINS SQUARE</u> <u>AKRON, OH 44308-1062</u>											

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	09/21/2022	RHONDA LARIMORE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor 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	2362
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)	1138
a(2) Total number of active participants at the end of the plan year		6a(2)	1037
b Retired or separated participants receiving benefits.....		6b	755
c Other retired or separated participants entitled to future benefits		6c	380
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	2172
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	78
f Total. Add lines 6d and 6e		6f	2250
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	1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

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

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

A Name of plan <u>PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>CHILDREN'S HOSPITAL MED CNTR AKRON</u>	D Employer Identification Number (EIN) <u>34-0714357</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>	
2 Assets:	
a Market value	2a <u>312711261</u>
b Actuarial value	2b <u>290998715</u>
3 Funding target/participant count breakdown	
a For retired participants and beneficiaries receiving payment.....	(1) Number of participants <u>840</u> (2) Vested Funding Target <u>94125336</u> (3) Total Funding Target <u>94125336</u>
b For terminated vested participants.....	<u>391</u> <u>25765040</u> <u>25765040</u>
c For active participants	<u>1138</u> <u>120262986</u> <u>121910544</u>
d Total.....	<u>2369</u> <u>240153362</u> <u>241800920</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b
5 Effective interest rate	5 <u>5.65</u> %
6 Target normal cost.....	
a Present value of current plan year accruals.....	6a <u>0</u>
b Expected plan-related expenses	6b <u>0</u>
c Total (line 6a + line 6b)	6c <u>0</u>

Statement by Enrolled Actuary

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

SIGN HERE		<u>09/02/2022</u>
Signature of actuary		Date
<u>MAX T MURPHY</u>		<u>20-08791</u>
Type or print name of actuary		Most recent enrollment number
<u>WILLIS TOWERS WATSON US LLC</u>		<u>216-937-4000</u>
Firm name		Telephone number (including area code)
<u>1001 LAKESIDE AVENUE STE 1500</u> <u>2169374000</u> <u>CLEVELAND, OH 44114-1172</u>		
Address of the firm		

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

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

Schedule SB (Form 5500) 2021
v. 201209

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)		
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)		
10 Interest on line 9 using prior year's actual return of <u>13.21</u> %		
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		50895842
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.46</u> %		2778913
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		53674755
d Portion of (c) to be added to prefunding balance		48311236
12 Other reductions in balances due to elections or deemed elections		10734312
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)		37576924

Part III Funding Percentages

14 Funding target attainment percentage	14	104.80 %
15 Adjusted funding target attainment percentage	15	120.34 %
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	94.53 %
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
07/29/2022	23650000				
Totals ▶			18(b)	23650000	18(c)

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

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	21685547

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
4.75 %2nd segment:
5.36 %3rd segment:
6.11 %☐ N/A, full yield curve used**b** Applicable month (enter code)**21b**

4

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****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 6c)..... **31a** 0**b** Excess assets, if applicable, but not greater than line 31a **31b** 0**32** Amortization installments:**a** Net shortfall amortization installment**b** Waiver amortization installment

Outstanding Balance

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** 0

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** 0**37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)..... **37** 21685547**38** Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36)..... **38a** 21685547**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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CHILDREN'S HOSPITAL MED CNTR AKRON	D Employer Identification Number (EIN) 34-0714357	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

PACIFIC INVESTMENT MANAGEMENT CO

33-0629048

(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	INVESTMENT MANAGEMENT	294680	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☒

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

OAK ASSOCIATES

34-1818085

(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	INVESTMENT MANAGEMENT	176384	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☒

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

INTEGRITY

86-1063006

(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	INVESTMENT MANAGEMENT	58988	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☒

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

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

KEYBANK NATIONAL ASSOCIATION

34-0797057

(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?
13	CONTRACT ADMINISTRATOR	42808	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☒

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(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:	BRIAN A HARTMAN	b EIN:	34-0526850
c Position:	ENROLLED ACTUARY		
d Address:	101 PROSPECT AVE NE SHERWIN-WILLIAM CLEVELAND, OH 44101	e Telephone:	216-566-2000

Explanation: REASSIGNMENT OF WORK WITHIN WTW

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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 CHILDREN'S HOSPITAL MED CNTR AKRON	D Employer Identification Number (EIN) 34-0714357	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	5530000	23650000
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	39957	522331
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	16478118	11339133
(2) U.S. Government securities	1c(2)		30988215
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		15230779
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	291126596	241045718
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(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	313174671 322776176
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	313174671 322776176

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	23650000
	(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)	23650000
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)	3129
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	3129
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	14170086
	(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)	14170086
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2398784215
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	2400885791
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	-2101576
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	11991629
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	11991629

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		47713268
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	37538903	
(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)		37538903
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	530052	
(4) Other.....	2i(4)	42808	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		572860
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		38111763
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		9601505
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) ☐ 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) ☐ 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: **BOBER, MARKEY, FEDOROVICH & CO**

(2) EIN: **34-1523030**

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
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?	X		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		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.)	X		
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.)	X		
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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 0.			
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 437320.			

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 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 CHILDREN'S HOSPITAL MED CNTR AKRON	D Employer Identification Number (EIN) 34-0714357

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

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	82

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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4	Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.				
5	If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6	a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	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
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
---------	--

10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2021
v. 201209

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: 27.5 % Investment-Grade Debt: 68.7 % High-Yield Debt: _____ % Real Estate: _____ % Other: 3.8 %

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 _____

The Pension Plan of Children's Hospital
Medical Center of Akron

Audited Financial Statements and Supplemental Schedules
With Independent Auditors' Report

December 31, 2021 and 2020

The Pension Plan of Children's Hospital Medical Center of Akron
Audited Financial Statements and Supplemental Schedule

December 31, 2021 and 2020

Independent Auditors' Report	1-3
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Financial Statements

Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6-13

Supplemental Schedules

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)	14-17
Schedule H, Line 4j – Schedule of Reportable Transactions	18-20

Note: Certain schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because of the absence of the conditions under which they are required.

INDEPENDENT AUDITOR'S REPORT

To the Participants and Audit Committee of the Board of Directors
of Children's Hospital Medical Center of Akron
The Pension Plan of Children's Hospital Medical Center of Akron
Akron, Ohio

Opinion

We have audited the financial statements of The Pension Plan of Children's Hospital Medical Center of Akron (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, 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.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of The Pension Plan of Children's Hospital Medical Center of Akron as of December 31, 2021 and 2020, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the plan, and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. Misstatements are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users made on the basis of these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks.
- Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal controls relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter—Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2021, and Schedule H, Line 4j – Schedule of Reportable Transactions for the year then ended December 31, 2021, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

A handwritten signature in black ink, reading "Bober, Markey, Fedorovich & Company". The signature is written in a cursive, flowing style.

BOBER, MARKEY, FEDOROVICH & COMPANY
Akron, Ohio

August 11, 2022

The Pension Plan of Children's Hospital Medical Center of Akron
Statements of Net Assets Available for Benefits
December 31, 2021 and 2020
(In Thousands)

	<u>2021</u>	<u>2020</u>
Assets		
Investments, at fair value	\$ 298,604	\$ 307,605
Receivables:		
Contributions	23,650	5,530
Dividends	<u>522</u>	<u>40</u>
Total receivables	<u>24,172</u>	<u>5,570</u>
Net assets available for benefits	<u><u>\$ 322,776</u></u>	<u><u>\$ 313,175</u></u>

The accompanying notes are an integral part of these financial statements.

The Pension Plan of Children's Hospital Medical Center of Akron
Statements of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2021 and 2020
(In Thousands)

	<u>2021</u>	<u>2020</u>
Additions:		
Investment income:		
Interest	\$ 3	\$ 99
Dividends	14,170	9,083
Total investment income	<u>14,173</u>	<u>9,182</u>
Employer contributions	<u>23,650</u>	<u>65,530</u>
Total additions	37,823	74,712
Deductions:		
Benefit payments to participants	37,539	26,868
Administrative fees and expenses	<u>573</u>	<u>328</u>
Total deductions	<u>38,112</u>	<u>27,196</u>
Net (decrease) increase	(289)	47,516
Net appreciation in fair value of investments	9,890	23,555
Net assets available for benefits beginning of year	<u>313,175</u>	<u>242,104</u>
Net assets available for benefits end of year	<u><u>\$ 322,776</u></u>	<u><u>\$ 313,175</u></u>

The accompanying notes are an integral part of these financial statements.

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

1. Description of the Plan

The Pension Plan of Children's Hospital Medical Center of Akron (the "Plan") is a defined benefit plan that covers substantially all employees and provides for pension, disability, and death benefits. Participants become fully vested in the Plan after five years of credited service. Children's Hospital Medical Center of Akron ("Children's" and "Plan Sponsor") has agreed to voluntarily contribute such amounts as are necessary to provide assets sufficient to meet the benefits to be paid to the Plan participants. The Plan has met the Employee Retirement Income Security Act of 1974 ("ERISA") minimum funding requirements. Children's has the right under the Plan to discontinue such contributions at any time and to terminate the Plan. On January 1, 2007, the Plan was amended to exclude from eligibility any employee whose date of employment was on or after January 1, 2007. Children's froze the plan to cease benefit payment accruals to active participants after December 31, 2020, resulting in a curtailment.

Should the Plan terminate at some future time, the assets then remaining in the trust fund, subject to provisions for expenses of administration or liquidation, shall be allocated to the Plan participants in accordance with the provisions of the Plan and Trust Agreement. The assets shall first be allocated to provide benefits to all the Plan participants, their joint annuitants, and beneficiaries to whom benefits have been paid for at least three years prior to the date of the Plan termination and to whom benefits would have been paid had an eligible participant actually retired on a retirement date at least three years prior to the date of the Plan termination. Secondly, amounts then remaining shall be allocated to provide additional benefits to participants entitled to them to the extent such benefits are guaranteed by the Pension Benefit Guaranty Corporation ("PBGC"). Thirdly, amounts then remaining shall be allocated to provide benefits to other participants entitled to them as described in the Plan and not provided for in the allocation described above.

The Plan is subject to the provisions of ERISA.

Information about the Plan agreement, the vesting and benefit provisions, and the PBGC's guarantee is contained in the *Summary Plan Description* ("SPD"). Copies of the SPD are available from the Human Resources Department at Children's.

2. Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Investment Valuation and Income Recognition

Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value in the December 31, 2021 and 2020 Statements of Net Assets Available for Benefits. Fair values of investments in debt and equity securities are based on quoted market prices.

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

2. Significant Accounting Policies (continued)

Investment income or loss and net realized and unrealized gains and losses are reflected in the Statements of Changes in Net Assets Available for Benefits.

Dividend income is accrued on the ex-dividend date. Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses from security transactions are reported based on historical cost.

Fair Value of Financial Assets and Liabilities

Fair value estimates are made at a specific point in time based on relevant market information about the financial instrument. These estimates are subjective in nature and involve uncertainties and matters of significant judgment and, therefore, cannot be determined with precision. Changes in assumptions could significantly affect the estimates.

The framework for measuring fair value is comprised of a three-level hierarchy based upon the transparency of inputs to the valuation of an asset or liability as of the measurement date. The three levels are defined as follows:

- Level 1 – inputs to the valuation methodology are quoted prices (unadjusted) for identical assets or liabilities in active markets.
- Level 2 – inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument.
- Level 3 – inputs to the valuation methodology are unobservable and significant to the fair value measurement.

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement.

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

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

2. Significant Accounting Policies (continued)

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, and (b) present employees or their beneficiaries. Benefits for retired or terminated employees or their beneficiaries are based on employees' compensation for the highest consecutive five out of the last ten years of credited service. The accumulated plan benefits for active employees are based on their average compensation during the five years preceding the valuation date. 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.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Administrative Fees

Trustee fees, consulting fees and other administrative expenses are paid from Children's general assets. Individual investment management fees are paid from Plan assets.

Payment of Benefits

Benefits are recorded when paid.

Subsequent Events

The Plan has evaluated subsequent events through August 11, 2022, the date the financial statements were available to be issued. The Board of Directors of Children's has decided to terminate the Plan effective October 31, 2022.

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

3. Accumulated Plan Benefits

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

The accumulated plan benefits information as of the beginning of each plan year is as follows:

	2021	2020
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving payments	\$ 89,842	\$ 76,385
Other participants	169,654	138,172
Total	259,496	214,557
Nonvested benefits:	2,859	2,311
Total	\$ 262,355	\$ 216,868

The changes in the actuarial present value of accumulated plan, are as follows:

	2021	2020
Actuarial present value of accumulated plan benefits - beginning of year	\$ 216,868	\$ 209,447
Increase during the year attributable to:		
Benefits accumulated	7,979	8,583
Actuarial (gain) loss	4,830	(1,930)
Decrease in the discount period	15,856	15,497
Assumption changes	43,427	8,090
Plan Amendment	263	-
Benefits paid	(26,868)	(22,819)
Actuarial present value of accumulated plan benefits - end of year (January 1)	\$ 262,355	\$ 216,868

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

3. Accumulated Plan Benefits (continued)

Significant assumptions underlying the actuarial computations are:

	2021	2020
Actuarial cost method	Projected Unit Credit Cost Method	Projected Unit Credit Cost Method
Discount rate	5.70%	7.50%
Mortality basis	Pri-2012 Employee and Annuitant Tables for males and females, projected with Scale MP-2020	Pri-2012 Employee and Annuitant Tables for males and females, projected with Scale MP-2019
Salary increases	N/A	Age graded from 4.5% to 2.5%
Disability	Revenue Ruling 96-7 Mortality Tables	Revenue Ruling 96-7 Mortality Tables

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

Children's froze the plan to cease benefit payment accruals to active participants after December 31, 2020, resulting in a curtailment in 2020. Children's funding policy is to contribute amounts to the plan sufficient to meet minimum funding requirements of the Employee Retirement Income Security Act of 1974 and the Pension Protection Act of 2006, and other such amounts as Children's may contribute.

4. Assets and Liabilities Measured at Fair Value

The Plan's investments are held by KeyBank National Association. The following table summarizes Children's investments measured at fair value on a recurring basis as of December 31, 2021 and 2020, aggregated by the level in the fair value hierarchy within which those measurements are measured:

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

4. Assets and Liabilities Measured at Fair Value (continued)

	2021			
	Level 1	Level 2	Level 3	Total
Equities - U.S.	\$ 36,402	\$ -	\$ -	\$ 36,402
Equities - International	5,134	-	-	5,134
Mutual funds - U.S. equities	15,498	-	-	15,498
Mutual funds - International equities	25,238	-	-	25,238
Mutual funds - U.S. bonds	152,559	-	-	152,559
International bonds	-	6,215	-	6,215
U. S. Bonds	-	15,231	-	15,231
U. S. government	-	30,988	-	30,988
Certificates of Deposit	-	1,001	-	1,001
Money market funds	10,338	-	-	10,338
Total investment in hierarchy at fair value	<u>\$ 245,169</u>	<u>\$ 53,435</u>	<u>\$ -</u>	<u>\$ 298,604</u>

	2020			
	Level 1	Level 2	Level 3	Total
Equities - U.S.	\$ 45,164	\$ -	\$ -	\$ 45,164
Equities - International	4,572	-	-	4,572
Mutual funds - U.S. equities	52,522	-	-	52,522
Mutual funds - International equities	61,691	-	-	61,691
Mutual funds - International bonds	127,178	-	-	127,178
Money market funds	16,478	-	-	16,478
Total investment in hierarchy at fair value	<u>\$ 307,605</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 307,605</u>

* In accordance with ASC 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient 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 amounts presented in the Statement of Net Assets Available for Benefits.

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

4. Assets and Liabilities Measured at Fair Value (continued)

Valuation methodologies used for assets and liabilities measured at fair value are as follows:

- Equities and mutual funds: Securities and mutual funds listed or traded on securities exchanges are valued at the closing price on the exchange where the security is principally traded. These securities are classified as Level 1 because quoted prices in active markets are available.
- Debt securities: Debt securities include U.S. government securities, U.S. government asset-backed securities, corporate debt-backed securities, corporate asset-backed securities, and corporate obligations. These securities are valued using evaluated prices provided by nationally recognized pricing services. Because the evaluated prices are based on observable inputs, such as available trade information, spreads, bids and offers, prepayment speeds, U.S. Treasury curves and interest rate movements, securities in this category are classified as Level 2.
- Money market funds: Money market funds are valued at net asset value ("NAV"). NAV is equal to the market value of each money market fund's investments and other assets, less liabilities, divided by the number of fund shares. These funds are valued at a daily close price as reported by the fund. The funds are required to publish their daily NAV and transact at that price. Additionally, money market funds are actively traded, and are classified as Level 1.

5. Income Tax Status

The Internal Revenue Service ("IRS") determined and informed the Plan by a letter dated April 22, 2014, that the Plan is qualified, under the appropriate sections of the Internal Revenue Code ("IRC"). Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require the Plan Sponsor to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by taxing authorities. The Plan Sponsor has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2021, and 2020 and for the years then ended, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

6. Transactions with Parties in Interest

Parties-in-interest transactions include the purchases and sales of investments and payments to the Plan trustee for services and expenses. There are also indirect fees deducted directly from investments earnings of the Plan.

The Pension Plan of Children's Hospital Medical Center of Akron
Notes to Financial Statements

December 31, 2021 and 2020
(Dollars in Thousands)

7. 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 change could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

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

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value	
US Government				
Gnma Ii Jumbo 2.500%	100,000 shares	\$ 102,000	\$ 102,184	
United States Treas Bds	9,900,000 shares	9,537,209	9,405,727	
United States Treas Bds	11,100,000 shares	10,462,131	10,986,891	
United States Treas Bds	9,780,000 shares	9,462,767	9,482,003	
United States Treas Bds	1,000,000 shares	1,016,413	1,011,410	
Total US Government		30,580,520	30,988,215	
Equities - U.S.				
Agco Corp	189 shares	25,533	21,928	
Alaska Air Group Inc	217 shares	11,284	11,306	
Alcoa Upstream Corp	686 shares	15,366	40,872	
Allete Inc	459 shares	29,864	30,455	
Alphabet Inc	797 shares	1,396,248	2,306,191	
Alphabet Inc	795 shares	1,393,349	2,303,147	
Altra Industrial Motion Corp	382 shares	22,500	19,700	
Amazon Com Inc	1,040 shares	3,387,207	3,467,714	
American Financial Group Inc	222 shares	27,519	30,485	
Amgen Inc	7,700 shares	1,770,384	1,732,269	
Apartment Income Reit Corp	697 shares	27,569	38,105	
Aramark	851 shares	31,718	31,359	
Arconic Corp	546 shares	15,762	18,023	
Artisan Partners Asset Mgmt Inc	563 shares	28,220	26,821	
Asbury Automotive Group Inc	113 shares	17,438	19,518	
Assurant Inc	182 shares	24,792	28,367	
Atkore Inc	278 shares	15,040	30,911	
Atlantic Union Bankshares Co	721 shares	26,926	26,886	
Belden Inc	505 shares	21,980	33,194	
Blackstone Mortgage Trust Inc	817 shares	23,792	25,017	
Bloomin Brands Inc	932 shares	24,191	19,553	
Brunswick Corp	293 shares	22,338	29,514	
Builders Firstsource Inc	437 shares	31,944	37,455	
Cactus Inc	719 shares	27,909	27,415	
Caesars Entertainment Inc	237 shares	17,602	22,167	
Carlisle Cos Inc	145 shares	22,646	35,977	
Cf Industries Holdings Inc	520 shares	27,270	36,806	
Ciena Corp	457 shares	25,566	35,175	
Cinemark Holdings Inc	1,261 shares	22,109	20,327	
Cisco Sys Inc	31,900 shares	1,427,525	2,021,503	
Clean Harbors Inc	246 shares	18,721	24,543	
Cleveland-Cliffs Inc	1,711 shares	35,141	37,248	
Cognizant Tech Solutions Corp	12,700 shares	1,040,765	1,126,744	
Comerica Inc	426 shares	27,611	37,062	
Conduent Inc	2,648 shares	13,907	14,140	
Consol Energy Inc	848 shares	27,475	19,258	
Coterra Energy Inc	1,634 shares	24,472	31,046	
Coty Inc	3,077 shares	21,821	32,309	
Crane Co	254 shares	20,255	25,839	
Devon Energy Corp	854 shares	13,502	37,619	
Diamondback Energy Inc	330 shares	18,496	35,591	
Diamondrock Hospitality Co	2,852 shares	24,148	27,408	
Digital Realty Trust Inc	5,248 shares	732,148	928,214	
East West Bancorp Inc	411 shares	20,842	32,337	
Edgewell Personal Care Co	399 shares	14,520	18,238	
Emcor Group Inc	227 shares	20,761	28,918	
Encompass Health Corp	436 shares	35,762	28,453	
Enpro Industries Inc	204 shares	15,406	22,454	
Euronet Worldwide Inc	249 shares	34,808	29,673	
Facebook Inc	6,000 shares	1,638,960	2,018,100	
Federal Realty Invs Trust	244 shares	29,020	33,262	
First Indl Rlty Tr Inc	490 shares	21,555	32,438	
Flex Ltd	1,571 shares	28,006	28,796	
Formfactor Inc	496 shares	20,874	22,677	
Gaming & Leisure Properties Inc	651 shares	28,364	31,678	
Gap Inc Del	1,060 shares	28,332	18,709	
Gilead Sciences Inc	13,800 shares	803,988	1,002,018	
Granite Constr Inc	710 shares	27,749	27,477	
Green Plains Inc	954 shares	26,950	33,161	
Hancock Whitney Corp	864 shares	29,393	43,217	
Hanover Insurance Group Inc	162 shares	18,941	21,232	
Highwoods Pptys Inc	706 shares	27,963	31,481	
Howmet Aerospace Inc	887 shares	24,373	28,233	
Hudson Pacific Properties Inc	995 shares	28,322	24,586	
Infinera Corp	2,058 shares	20,871	19,736	
International Business Machs	4,395 shares	529,844	587,436	
Itt Inc	302 shares	23,260	30,861	
Jabil Inc	365 shares	15,523	25,678	

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
		Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value
		Jp Morgan Chase & Co	10,970 shares	1,442,528
		Kinsale Capital Group Inc	96 shares	18,632
		Kirby Corp	338 shares	17,515
		Kla Corp	5,411 shares	1,400,962
		Knight-Swift Transportation Hldgs Inc	470 shares	22,819
		Korn Ferry	302 shares	13,137
		Kyndryl Holdings Inc	879 shares	23,399
		Laboratory Corp Amer Hldgs	3,025 shares	615,739
		Lear Corp	114 shares	18,129
		Lincoln Natl Corp Ind	284 shares	15,382
		Lowes Cos Inc	10,900 shares	1,749,559
		Lpl Financial Holdings Inc	217 shares	22,616
		Macys Inc	845 shares	19,142
		Manpowergroup Inc	224 shares	20,534
		Medical Properties Trust Inc	1,508 shares	31,956
		Meritor Inc	839 shares	23,100
		Mgic Investment Corp	1,621 shares	20,344
		Mgp Ingredients Inc	225 shares	18,594
		Millerknoll Inc	549 shares	21,400
		Mks Instruments Inc	126 shares	19,115
		Molson Coors Beverage Co	371 shares	17,349
		Mosaic Co	950 shares	24,736
		Ncr Corp New	600 shares	22,843
		Newell Brands Inc	991 shares	21,365
		Nexstar Media Group Inc	198 shares	21,620
		Olin Corp	716 shares	17,585
		On Semiconductor Corp	539 shares	17,641
		Organon & Co	979 shares	34,659
		Oshkosh Corp	214 shares	18,419
		Pacwest Bancorp	904 shares	22,962
		Pdc Energy Inc	697 shares	14,866
		Peoples United Financial Inc	1,524 shares	20,281
		Performance Food Group Co	531 shares	25,704
		Primerica Inc	149 shares	19,956
		Pulte Group Inc	407 shares	18,359
		Qualcomm Inc	10,000 shares	1,614,804
		Quanta Services Inc	267 shares	21,883
		Ralph Lauren Corp	268 shares	28,512
		Regal Rexnord Corporation	162 shares	18,183
		Reinsurance Group Of America Inc	201 shares	23,041
		Ryder Sys Inc	294 shares	18,157
		Saia Inc	106 shares	19,165
		Schwab Charles Corp New	40,170 shares	2,130,617
		Select Medical Holdings Corp	720 shares	19,915
		Site Centers Corp	1,822 shares	18,301
		Skywest Inc	421 shares	16,971
		Skyworks Solutions Inc	5,949 shares	1,004,383
		Southstate Corp	457 shares	33,379
		Spire Inc	508 shares	34,806
		Spirit Aerosystems Holdings Inc	581 shares	26,765
		State Str Corp	8,505 shares	618,994
		Steven Madden Ltd	589 shares	22,078
		Stifel Finl Corp	418 shares	21,092
		Store Capital Corp	634 shares	21,275
		Summit Materials Inc	799 shares	23,908
		Synovus Finl Corp	822 shares	30,245
		Tegna Inc	1,008 shares	14,544
		Textron Inc	415 shares	26,516
		Travel Plus Leisure Co	502 shares	23,035
		Trinity Inds Inc	646 shares	17,464
		Ugi Corp New	629 shares	23,717
		Univar Solutions Inc	1,093 shares	28,137
		Verint Systems Inc	523 shares	23,160
		Veris Residential Inc	1,200 shares	16,696
		Vici Properties Inc	1,262 shares	33,655
		Victoria'S Secret And Co	399 shares	23,801
		Visteon Corp	200 shares	24,486
		Vistra Corp	1,411 shares	26,833
		Voya Financial Inc	427 shares	25,112
		Wabtec Corp	258 shares	18,886
		Westlake Chemical Corp	289 shares	23,582
		Whiting Petroleum Corp	505 shares	17,453
		Wintrust Financial Corp	355 shares	30,059
		Wolverine World Wide Inc	891 shares	27,870
		Zimmer Biomet Holdings Inc	4,700 shares	724,223
		Zum Water Solutions Corp	445 shares	9,213
		Zynga Inc	2,818 shares	18,420
		Total Equities - U.S.	\$	28,290,723
			\$	36,402,299
		Equities - International		

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
		Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value
	Identity of Issue, Borrower Lessor, or Similar Party			
	Alcon Inc	16,529 shares	\$ 1,090,583	\$ 1,440,006
	Assured Guaranty Ltd	371 shares	16,152	18,624
	Capri Holdings Ltd	376 shares	20,348	24,406
	Chubb Limited	7,475 shares	1,150,552	1,444,992
	Invesco Ltd	1,228 shares	23,699	28,269
	Jazz Pharmaceuticals Plc	178 shares	27,321	22,677
	Lions Gate Entertainment Corp	1,398 shares	14,659	21,515
	Norwegian Cruise Line Hldgs Ltd	1,219 shares	30,040	25,282
	Novartis Ag	10,340 shares	976,406	904,440
	Nvent Electric Plc	702 shares	16,350	26,676
	Nxp Semiconductor Nv	5,055 shares	1,007,604	1,151,428
	Perrigo Co Plc	681 shares	30,995	26,491
	Total Equities - International		\$ 4,404,709	\$ 5,134,806
	Mutual funds - U.S. bonds			
	American Homes 4 Rent L P	200,000 shares	197,026	196,008
	Amfam Holdings Inc	200,000 shares	200,000	204,214
	Assured Guaranty Us Hldgs Inc	100,000 shares	99,717	103,243
	Boston Properties L P	800,000 shares	796,560	794,016
	Brixmor Operating Partnership L P	400,000 shares	399,268	397,872
	Broadcom Inc	380,000 shares	416,598	421,443
	Broadcom Inc	200,000 shares	204,024	209,334
	Broadcom Inc	20,000 shares	19,377	19,965
	Caesars Resort Collection Llc/Crc Finco	200,000 shares	211,250	208,864
	Cbre Services Inc	200,000 shares	196,902	201,152
	Centene Corp	400,000 shares	400,000	394,000
	Cigna Corp	600,000 shares	596,748	627,372
	Coca-Cola Co	300,000 shares	295,206	317,493
	Commonwealth Edison Co	800,000 shares	798,912	829,360
	Corporate Office Properties L P	800,000 shares	791,624	795,416
	Dcp Midstream Operating L P	200,000 shares	200,000	201,500
	Dish Dbs Corp	400,000 shares	400,000	406,316
	Ebay Inc	200,000 shares	199,912	201,954
	Equinix Inc	200,000 shares	199,712	196,030
	Flex Inter Holdco Llc	500,000 shares	499,985	501,900
	Hilton Grand Vacations	200,000 shares	200,000	205,000
	Hyundai Capital America Inc	300,000 shares	299,670	301,453
	Indigo Merger Sub Inc	200,000 shares	200,000	200,250
	Jersey Central Pwr & Lt Co	200,000 shares	199,452	202,680
	Keurig Dr Pepper Inc	400,000 shares	398,496	415,928
	Marvell Technology Inc	200,000 shares	199,962	202,842
	Mozart Debt Merger Sub Inc	100,000 shares	100,000	99,647
	Mph Acquisition Holdings Llc	300,000 shares	300,000	304,125
	Nissan Motor Acceptance Corp	500,000 shares	499,525	492,505
	Omega Healthcare Investors Inc	700,000 shares	695,128	682,276
	Oracle Corp	1,300,000 shares	1,297,725	1,349,543
	Organon Finance 1 Llc	400,000 shares	400,000	406,500
	Pacific Gas & Electric Co	100,000 shares	99,509	100,726
	Pacific Gas & Electric Co	100,000 shares	99,991	100,000
	Sammons Financial Group Inc	200,000 shares	199,544	201,524
	Sitka Holdings Llc	300,000 shares	297,000	307,062
	Southern Co	300,000 shares	300,000	300,000
	Square Inc	200,000 shares	200,000	200,238
	Starwood Property Trust Inc	100,000 shares	100,000	99,500
	Switch Ltd	200,000 shares	200,000	204,500
	Synnex Corp	200,000 shares	200,000	194,140
	T-Mobile Usa Inc	200,000 shares	199,380	201,232
	T-Mobile Usa Inc	200,000 shares	201,878	198,104
	Verizon Communications Inc	800,000 shares	799,536	837,552
	Wynn Las Vegas Llc/Corp	200,000 shares	213,500	206,000
	Total Mutual funds - U.S. bonds		\$ 15,023,117	\$ 15,230,779
	Mutual funds - U.S. equities			
	Bny Mellon Small/Mid Cap Growth Fund	107,035 shares	4,110,252	3,646,687
	Calamos Market Neutral Income Fd	816,182 shares	11,338,241	11,850,955
	Total Mutual Funds - U.S. equity		\$ 15,448,493	\$ 15,497,642
	Mutual funds - International equities			
	American Europacific Growth Fd	111,714 shares	\$ 7,708,461	\$ 7,224,563
	Artisan International Value Fund	184,690 shares	7,402,781	7,827,171
	T Rowe Price Emerging Mkts Stk	52,616 shares	2,842,522	2,382,449
	Blackrock Global Allocation Fund	372,137 shares	\$ 8,058,414	\$ 7,803,705
	Total Mutual funds - International equities		\$ 26,012,178	\$ 25,237,888
	Mutual funds - US bonds			

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

ELN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
		Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value
	Identity of Issue, Borrower Lessor, or Similar Party			
	Pimco Long Dur Cred Bond Portfolio Inst	11,913,838 shares	\$ 151,461,198	\$ 152,258,850
	Pimco Prv Short-Term Flt(ii)(776) Nav Port	29,949 shares	299,818	299,818
	Total Mutual funds - US bonds		\$ 151,761,016	\$ 152,558,668
	International bonds			
	Aercap Ireland Capital Ltd	150,000 shares	149,748	151,230
	Australia Commonwealth	350,000 shares	250,492	239,195
	Barclays Plc	400,000 shares	440,520	429,248
	Credit Suisse	200,000 shares	222,250	216,000
	Credit Suisse Group Ag	400,000 shares	431,650	423,000
	Csn Resources S A	300,000 shares	300,000	285,378
	Deutsche Bk Ag N Y	300,000 shares	315,066	315,738
	Lundin Energy Finance B.V.	200,000 shares	199,654	198,598
	Mpt Oper Ptnrship L P / Fin Corp	200,000 shares	278,996	269,421
	Natwest Group Plc	400,000 shares	400,000	392,000
	Nissan Motor Co Ltd	300,000 shares	333,702	335,508
	Nomura Holdings Inc	300,000 shares	300,000	296,046
	Rolls Royce Plc	300,000 shares	300,750	304,500
	Rolls Royce Plc	200,000 shares	221,541	216,111
	Santos Finance Ltd	200,000 shares	200,000	203,638
	Siemens Financieringsmat	700,000 shares	698,411	713,930
	Societe Generale	300,000 shares	300,000	304,623
	Vodafone Group Plc	900,000 shares	900,000	920,250
	Total Mutual funds - International bonds		\$ 6,242,780	\$ 6,214,414
	Certificates of Deposit			
	Covanta Holding Corp Tr B 1L Tag 4038	186,063	\$ 185,598	\$ 186,470
	Covanta Holding Corp Tr C 1L Tag 4037	13,937	13,902	13,968
	Gip Ii Blue Holding Lp TI B 1L 2776	200,000	197,000	199,750
	Ii-Vi TI B 1L 4532	200,000	198,000	200,042
	Medline TI B 3739	100,000	99,134	100,031
	Yahoo (Verizon Media) TI B2 II Tag 4608	300,000	298,500	300,938
	Total Certificates of Deposit		\$ 992,134	\$ 1,001,199
	Money market funds			
	Federated Government Obligations Fund - Pmm	10,337,935 units	\$ 10,337,935	\$ 10,337,935
	Total Money market funds		\$ 10,337,935	\$ 10,337,935
	Total assets held for investment purposes		\$ 289,093,605	\$ 298,603,845

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4j- Schedule of Reportable Transactions
For the Year Ended December 31, 2021

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Sales Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset at Transaction Date	(i) Net Gain (Loss)
Single Transactions in Same Security exceed 5% of value								
Federated Government Obligation Fund - Prm	Money market funds	\$ 37,120,757	N/A	-	-	\$ 37,120,757	\$ 37,120,757	-
Federated Government Obligation Fund - Prm	Money market funds	N/A	\$ 56,000,000	-	-	\$ 56,000,000	\$ 56,000,000	-
Federated Government Obligation Fund - Prm	Money market funds	\$ 19,390,074	N/A	-	-	\$ 19,390,074	\$ 19,390,074	-
Federated Government Obligation Fund - Prm	Money market funds	\$ 172,646,995	N/A	-	-	\$ 172,646,995	\$ 172,646,995	-
Federated Government Obligation Fund - Prm	Money market funds	\$ 168,363,355	N/A	-	-	\$ 168,363,355	\$ 168,363,355	-
Federated Government Obligation Fund - Prm	Money market funds	\$ 19,705,728	N/A	-	-	\$ 19,705,728	\$ 19,705,728	-
Federated Government Obligation Fund - Prm	Money market funds	N/A	\$ 24,153,528	-	-	\$ 24,153,528	\$ 24,153,528	-
Pimco Long Duration Total Return Fund	Mutual funds - International bonds	\$ 56,000,000	N/A	-	-	\$ 56,000,000	\$ 56,000,000	-
Pimco Long Duration Total Return Fund	Mutual funds - International bonds	N/A	\$ 172,783,293	-	-	\$ 183,927,936	\$ 183,927,936	\$ (11,144,643)
Pimco Long Dur Cred Bond	Mutual funds - International bonds	\$ 131,942,556	N/A	-	-	\$ 131,942,556	\$ 131,942,556	-
Pimco Long Dur Cred Bond	Mutual funds - International bonds	\$ 16,152,423	N/A	-	-	\$ 16,152,423	\$ 16,152,423	-
Pimco Piv Short-Herm Fund	Mutual funds - International bonds	\$ 15,600,000	N/A	-	-	\$ 15,600,000	\$ 15,600,000	-
Pimco Piv Short-Herm Fund	Mutual funds - International bonds	\$ 1,558,130	\$ 15,600,000	-	-	\$ 15,600,019	\$ 15,600,019	\$ (19)
United States Treasury Bonds	US Government	\$ 18,000,000	N/A	-	-	\$ 16,315,260	\$ 16,315,260	-
United States Treasury Bonds	US Government	\$ 17,700,000	N/A	-	-	\$ 16,205,619	\$ 16,205,619	-
United States Treasury Bonds	US Government	\$ 18,000,000	N/A	-	-	\$ 16,604,035	\$ 16,604,035	-
United States Treasury Bonds	US Government	\$ 17,400,000	N/A	-	-	\$ 16,197,370	\$ 16,197,370	-
United States Treasury Bonds	US Government	\$ 17,500,000	N/A	-	-	\$ 16,295,941	\$ 16,295,941	-
United States Treasury Bonds	US Government	\$ 17,200,000	N/A	-	-	\$ 16,165,246	\$ 16,165,246	-
United States Treasury Bonds	US Government	\$ 17,200,000	N/A	-	-	\$ 16,129,457	\$ 16,129,457	-
United States Treasury Bonds	US Government	\$ 17,800,000	N/A	-	-	\$ 16,460,051	\$ 16,460,051	-
United States Treasury Bonds	US Government	\$ 18,100,000	N/A	-	-	\$ 16,547,497	\$ 16,547,497	-
United States Treasury Bonds	US Government	\$ 18,700,000	N/A	-	-	\$ 16,865,991	\$ 16,865,991	-
United States Treasury Bonds	US Government	\$ 16,800,000	N/A	-	-	\$ 15,892,906	\$ 15,892,906	-
United States Treasury Bonds	US Government	\$ 17,100,000	N/A	-	-	\$ 15,890,001	\$ 15,890,001	-
United States Treasury Bonds	US Government	\$ 18,300,000	N/A	-	-	\$ 16,204,051	\$ 16,204,051	-
United States Treasury Bonds	US Government	\$ 17,400,000	N/A	-	-	\$ 17,212,490	\$ 17,212,490	-
United States Treasury Bonds	US Government	\$ 17,400,000	N/A	-	-	\$ 16,463,830	\$ 16,463,830	-
United States Treasury Bonds	US Government	\$ 18,100,000	N/A	-	-	\$ 16,626,951	\$ 16,626,951	-
United States Treasury Bonds	US Government	\$ 18,100,000	N/A	-	-	\$ 17,201,697	\$ 17,201,697	-
United States Treasury Bonds	US Government	\$ 18,100,000	N/A	-	-	\$ 17,471,224	\$ 17,471,224	-
United States Treasury Bonds	US Government	\$ 16,700,000	N/A	-	-	\$ 16,317,320	\$ 16,317,320	-
United States Treasury Bonds	US Government	\$ 15,700,000	N/A	-	-	\$ 15,309,239	\$ 15,309,239	-
United States Treasury Bonds	US Government	\$ 17,000,000	N/A	-	-	\$ 16,562,670	\$ 16,562,670	-
United States Treasury Bonds	US Government	\$ 17,000,000	N/A	-	-	\$ 16,791,863	\$ 16,791,863	-
United States Treasury Bonds	US Government	\$ 16,300,000	N/A	-	-	\$ 16,374,727	\$ 16,374,727	-
United States Treasury Bonds	US Government	\$ 15,500,000	N/A	-	-	\$ 15,367,630	\$ 15,367,630	-
United States Treasury Bonds	US Government	\$ 15,900,000	N/A	-	-	\$ 15,613,505	\$ 15,613,505	-
United States Treasury Bonds	US Government	\$ 16,200,000	N/A	-	-	\$ 16,011,009	\$ 16,011,009	-
United States Treasury Bonds	US Government	\$ 16,000,000	N/A	-	-	\$ 15,805,834	\$ 15,805,834	-
United States Treasury Bonds	US Government	\$ 17,900,000	N/A	-	-	\$ 17,336,990	\$ 17,336,990	-
United States Treasury Bonds	US Government	\$ 16,500,000	N/A	-	-	\$ 16,353,980	\$ 16,353,980	-
United States Treasury Bonds	US Government	\$ 18,100,000	N/A	-	-	\$ 15,861,935	\$ 15,861,935	-
United States Treasury Bonds	US Government	\$ 15,900,000	N/A	-	-	\$ 15,593,787	\$ 15,593,787	-
United States Treasury Bonds	US Government	\$ 16,200,000	N/A	-	-	\$ 15,732,643	\$ 15,732,643	-
United States Treasury Bonds	US Government	\$ 17,300,000	N/A	-	-	\$ 16,555,075	\$ 16,555,075	-
United States Treasury Bonds	US Government	\$ 16,800,000	N/A	-	-	\$ 16,089,601	\$ 16,089,601	-
United States Treasury Bonds	US Government	\$ 16,700,000	N/A	-	-	\$ 15,942,793	\$ 15,942,793	-
United States Treasury Bonds	US Government	\$ 17,200,000	N/A	-	-	\$ 16,382,151	\$ 16,382,151	-

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4j- Schedule of Reportable Transactions

For the Year Ended December 31, 2021

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Sales Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset at Transaction Date	(i) Net Gain (Loss)
United States Treasury Bonds	US Government	\$ 15,779,336	N/A	-	-	\$ 15,779,336	\$ 15,779,336	-
United States Treasury Bonds	US Government	\$ 16,620,385	N/A	-	-	\$ 16,620,385	\$ 16,620,385	-
United States Treasury Bonds	US Government	\$ 15,382,441	N/A	-	-	\$ 15,382,441	\$ 15,382,441	-
United States Treasury Bonds	US Government	\$ 15,495,205	N/A	-	-	\$ 15,495,205	\$ 15,495,205	-
United States Treasury Bonds	US Government	\$ 16,492,031	N/A	-	-	\$ 16,492,031	\$ 16,492,031	-
United States Treasury Bonds	US Government	\$ 15,779,540	N/A	-	-	\$ 15,779,540	\$ 15,779,540	-
United States Treasury Bonds	US Government	\$ 17,662,445	N/A	-	-	\$ 17,662,445	\$ 17,662,445	-
United States Treasury Bonds	US Government	\$ 16,479,266	N/A	-	-	\$ 16,479,266	\$ 16,479,266	-
United States Treasury Bonds	US Government	\$ 16,182,409	N/A	-	-	\$ 16,182,409	\$ 16,182,409	-
United States Treasury Bonds	US Government	\$ 15,635,185	N/A	-	-	\$ 15,635,185	\$ 15,635,185	-
United States Treasury Bonds	US Government	\$ 17,540,869	N/A	-	-	\$ 17,540,869	\$ 17,540,869	-
United States Treasury Bonds	US Government	\$ 18,000,000	\$ 16,318,125	-	-	\$ 16,343,920	\$ 16,343,920	\$ (25,795)
United States Treasury Bonds	US Government	\$ 17,700,000	\$ 16,206,563	-	-	\$ 16,121,385	\$ 16,121,385	\$ 85,177
United States Treasury Bonds	US Government	\$ 18,000,000	\$ 16,605,000	-	-	\$ 16,473,320	\$ 16,473,320	\$ 131,680
United States Treasury Bonds	US Government	\$ 17,400,000	\$ 16,198,313	-	-	\$ 16,024,696	\$ 16,024,696	\$ 173,617
United States Treasury Bonds	US Government	\$ 17,500,000	\$ 16,298,875	-	-	\$ 16,182,933	\$ 16,182,933	\$ 113,942
United States Treasury Bonds	US Government	\$ 17,200,000	\$ 16,169,000	-	-	\$ 16,000,362	\$ 16,000,362	\$ 167,638
United States Treasury Bonds	US Government	\$ 17,200,000	\$ 16,130,375	-	-	\$ 16,047,505	\$ 16,047,505	\$ 82,870
United States Treasury Bonds	US Government	\$ 17,700,000	\$ 16,461,000	-	-	\$ 16,493,940	\$ 16,493,940	\$ (32,940)
United States Treasury Bonds	US Government	\$ 18,100,000	\$ 16,548,438	-	-	\$ 16,572,338	\$ 16,572,338	\$ (23,901)
United States Treasury Bonds	US Government	\$ 17,800,000	\$ 16,866,938	-	-	\$ 16,857,056	\$ 16,857,056	\$ 9,882
United States Treasury Bonds	US Government	\$ 16,700,000	\$ 15,896,313	-	-	\$ 15,674,937	\$ 15,674,937	\$ 221,376
United States Treasury Bonds	US Government	\$ 16,800,000	\$ 15,891,750	-	-	\$ 15,812,400	\$ 15,812,400	\$ 79,350
United States Treasury Bonds	US Government	\$ 17,100,000	\$ 16,207,594	-	-	\$ 16,134,526	\$ 16,134,526	\$ 73,067
United States Treasury Bonds	US Government	\$ 18,300,000	\$ 17,213,438	-	-	\$ 17,246,164	\$ 17,246,164	\$ (32,726)
United States Treasury Bonds	US Government	\$ 17,400,000	\$ 16,464,750	-	-	\$ 16,422,212	\$ 16,422,212	\$ 42,539
United States Treasury Bonds	US Government	\$ 17,400,000	\$ 16,827,875	-	-	\$ 16,497,528	\$ 16,497,528	\$ 130,347
United States Treasury Bonds	US Government	\$ 18,100,000	\$ 17,206,313	-	-	\$ 17,176,484	\$ 17,176,484	\$ 29,826
United States Treasury Bonds	US Government	\$ 18,100,000	\$ 17,472,156	-	-	\$ 17,287,625	\$ 17,287,625	\$ 184,531
United States Treasury Bonds	US Government	\$ 16,700,000	\$ 16,319,031	-	-	\$ 16,094,228	\$ 16,094,228	\$ 234,803
United States Treasury Bonds	US Government	\$ 15,700,000	\$ 15,312,406	-	-	\$ 15,187,033	\$ 15,187,033	\$ 125,373
United States Treasury Bonds	US Government	\$ 17,000,000	\$ 16,564,375	-	-	\$ 16,488,113	\$ 16,488,113	\$ 76,262
United States Treasury Bonds	US Government	\$ 17,100,000	\$ 16,795,406	-	-	\$ 16,661,631	\$ 16,661,631	\$ 133,775
United States Treasury Bonds	US Government	\$ 16,300,000	\$ 16,376,406	-	-	\$ 16,058,993	\$ 16,058,993	\$ 317,413
United States Treasury Bonds	US Government	\$ 15,900,000	\$ 15,369,219	-	-	\$ 15,304,466	\$ 15,304,466	\$ 64,753
United States Treasury Bonds	US Government	\$ 16,200,000	\$ 15,816,781	-	-	\$ 15,669,063	\$ 15,669,063	\$ (52,282)
United States Treasury Bonds	US Government	\$ 16,200,000	\$ 16,012,688	-	-	\$ 15,981,265	\$ 15,981,265	\$ 31,423
United States Treasury Bonds	US Government	\$ 16,000,000	\$ 15,810,000	-	-	\$ 15,791,724	\$ 15,791,724	\$ 18,276
United States Treasury Bonds	US Government	\$ 17,900,000	\$ 17,340,625	-	-	\$ 17,637,545	\$ 17,637,545	\$ (296,920)
United States Treasury Bonds	US Government	\$ 16,500,000	\$ 16,355,625	-	-	\$ 16,292,775	\$ 16,292,775	\$ 62,850
United States Treasury Bonds	US Government	\$ 16,100,000	\$ 15,863,531	-	-	\$ 15,885,024	\$ 15,885,024	\$ (21,493)
United States Treasury Bonds	US Government	\$ 15,900,000	\$ 15,596,906	-	-	\$ 15,718,983	\$ 15,718,983	\$ (122,076)
United States Treasury Bonds	US Government	\$ 16,200,000	\$ 15,734,250	-	-	\$ 15,911,648	\$ 15,911,648	\$ (177,398)
United States Treasury Bonds	US Government	\$ 17,300,000	\$ 16,559,344	-	-	\$ 16,829,137	\$ 16,829,137	\$ (269,794)
United States Treasury Bonds	US Government	\$ 16,800,000	\$ 16,091,250	-	-	\$ 16,250,092	\$ 16,250,092	\$ (158,842)
United States Treasury Bonds	US Government	\$ 18,700,000	\$ 15,948,500	-	-	\$ 16,076,584	\$ 16,076,584	\$ (128,084)
United States Treasury Bonds	US Government	\$ 17,200,000	\$ 16,383,000	-	-	\$ 16,492,623	\$ 16,492,623	\$ (109,623)
United States Treasury Bonds	US Government	\$ 16,400,000	\$ 15,785,000	-	-	\$ 15,744,920	\$ 15,744,920	\$ 40,080
United States Treasury Bonds	US Government	\$ 17,600,000	\$ 16,626,500	-	-	\$ 16,792,743	\$ 16,792,743	\$ (166,243)
United States Treasury Bonds	US Government	\$ 15,600,000	\$ 15,385,500	-	-	\$ 15,058,263	\$ 15,058,263	\$ 327,237
United States Treasury Bonds	US Government	\$ 15,900,000	\$ 15,497,531	-	-	\$ 15,399,912	\$ 15,399,912	\$ 97,619
United States Treasury Bonds	US Government	\$ 16,900,000	\$ 16,498,625	-	-	\$ 16,415,495	\$ 16,415,495	\$ 83,130

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4j- Schedule of Reportable Transactions

For the Year Ended December 31, 2021

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Sales Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset at Transaction Date	(i) Net Gain (Loss)
	SHARES							
United States Treasury Bonds	US Government	N/A	\$ 15,785,000	-	-	\$ 15,631,841	\$ 15,631,841	\$ 153,159
United States Treasury Bonds	US Government	N/A	\$ 17,665,063	-	-	\$ 17,559,040	\$ 17,559,040	\$ 106,023
United States Treasury Bonds	US Government	N/A	\$ 16,485,000	-	-	\$ 16,479,708	\$ 16,479,708	\$ 5,292
United States Treasury Bonds	US Government	N/A	\$ 16,187,938	-	-	\$ 16,063,501	\$ 16,063,501	\$ 124,437
United States Treasury Bonds	US Government	N/A	\$ 15,640,469	-	-	\$ 15,588,686	\$ 15,588,686	\$ 51,783
United States Treasury Bonds	US Government	N/A	\$ 17,552,250	-	-	\$ 17,516,082	\$ 17,516,082	\$ 36,168
Series of Transactions in Same Security exceed 5% of value								
Pimco Long Duration Total Return Fund	Mutual funds - International bonds	\$ 169,647,802	N/A	-	-	\$ 169,647,802	\$ 169,647,802	-
Pimco Long Duration Total Return Fund	Mutual funds - International bonds	N/A	\$ 18,548,712	-	-	\$ 18,186,604	\$ 18,186,604	\$ 362,108
Pimco Piv Short-Term FFI(776) Nav Port	Mutual funds - International bonds	\$ 46,900,257	N/A	-	-	\$ 46,900,257	\$ 46,900,257	-
Pimco Piv Short-Term FFI(776) Nav Port	Mutual funds - International bonds	N/A	\$ 46,600,000	-	-	\$ 46,600,439	\$ 46,600,439	\$ (439)
Federated Government Obligation Fund - Pim	Money market funds	\$ 347,050,960	N/A	-	-	\$ 347,050,960	\$ 347,050,960	-
Federated Government Obligation Fund - Pim	Money market funds	N/A	\$ 353,191,144	-	-	\$ 353,191,144	\$ 353,191,144	-
United States Treasury Bonds	US Government	\$ 1,737,259,813	N/A	-	-	\$ 1,737,259,813	\$ 1,737,259,813	-
United States Treasury Bonds	US Government	N/A	\$ 1,692,722,538	-	-	\$ 1,690,044,380	\$ 1,690,044,380	\$ 2,678,158

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value	
US Government				
Gnma Ii Jumbo 2.500%	100,000 shares	\$ 102,000	\$ 102,184	
United States Treas Bds	9,900,000 shares	9,537,209	9,405,727	
United States Treas Bds	11,100,000 shares	10,462,131	10,986,891	
United States Treas Bds	9,780,000 shares	9,462,767	9,482,003	
United States Treas Bds	1,000,000 shares	1,016,413	1,011,410	
Total US Government		30,580,520	30,988,215	
Equities - U.S.				
Agco Corp	189 shares	25,533	21,928	
Alaska Air Group Inc	217 shares	11,284	11,306	
Alcoa Upstream Corp	686 shares	15,366	40,872	
Allete Inc	459 shares	29,864	30,455	
Alphabet Inc	797 shares	1,396,248	2,306,191	
Alphabet Inc	795 shares	1,393,349	2,303,147	
Altra Industrial Motion Corp	382 shares	22,500	19,700	
Amazon Com Inc	1,040 shares	3,387,207	3,467,714	
American Financial Group Inc	222 shares	27,519	30,485	
Amgen Inc	7,700 shares	1,770,384	1,732,269	
Apartment Income Reit Corp	697 shares	27,569	38,105	
Aramark	851 shares	31,718	31,359	
Arconic Corp	546 shares	15,762	18,023	
Artisan Partners Asset Mgmt Inc	563 shares	28,220	26,821	
Asbury Automotive Group Inc	113 shares	17,438	19,518	
Assurant Inc	182 shares	24,792	28,367	
Atkore Inc	278 shares	15,040	30,911	
Atlantic Union Bankshares Co	721 shares	26,926	26,886	
Belden Inc	505 shares	21,980	33,194	
Blackstone Mortgage Trust Inc	817 shares	23,792	25,017	
Bloomin Brands Inc	932 shares	24,191	19,553	
Brunswick Corp	293 shares	22,338	29,514	
Builders Firstsource Inc	437 shares	31,944	37,455	
Cactus Inc	719 shares	27,909	27,415	
Caesars Entertainment Inc	237 shares	17,602	22,167	
Carlisle Cos Inc	145 shares	22,646	35,977	
Cf Industries Holdings Inc	520 shares	27,270	36,806	
Ciena Corp	457 shares	25,566	35,175	
Cinemark Holdings Inc	1,261 shares	22,109	20,327	
Cisco Sys Inc	31,900 shares	1,427,525	2,021,503	
Clean Harbors Inc	246 shares	18,721	24,543	
Cleveland-Cliffs Inc	1,711 shares	35,141	37,248	
Cognizant Tech Solutions Corp	12,700 shares	1,040,765	1,126,744	
Comerica Inc	426 shares	27,611	37,062	
Conduent Inc	2,648 shares	13,907	14,140	
Consol Energy Inc	848 shares	27,475	19,258	
Coterra Energy Inc	1,634 shares	24,472	31,046	
Coty Inc	3,077 shares	21,821	32,309	
Crane Co	254 shares	20,255	25,839	
Devon Energy Corp	854 shares	13,502	37,619	
Diamondback Energy Inc	330 shares	18,496	35,591	
Diamondrock Hospitality Co	2,852 shares	24,148	27,408	
Digital Realty Trust Inc	5,248 shares	732,148	928,214	
East West Bancorp Inc	411 shares	20,842	32,337	
Edgewell Personal Care Co	399 shares	14,520	18,238	
Emcor Group Inc	227 shares	20,761	28,918	
Encompass Health Corp	436 shares	35,762	28,453	
Enpro Industries Inc	204 shares	15,406	22,454	
Euronet Worldwide Inc	249 shares	34,808	29,673	
Facebook Inc	6,000 shares	1,638,960	2,018,100	
Federal Realty Invs Trust	244 shares	29,020	33,262	
First Indl Rlty Tr Inc	490 shares	21,555	32,438	
Flex Ltd	1,571 shares	28,006	28,796	
Formfactor Inc	496 shares	20,874	22,677	
Gaming & Leisure Properties Inc	651 shares	28,364	31,678	
Gap Inc Del	1,060 shares	28,332	18,709	
Gilead Sciences Inc	13,800 shares	803,988	1,002,018	
Granite Constr Inc	710 shares	27,749	27,477	
Green Plains Inc	954 shares	26,950	33,161	
Hancock Whitney Corp	864 shares	29,393	43,217	
Hanover Insurance Group Inc	162 shares	18,941	21,232	
Highwoods Pptys Inc	706 shares	27,963	31,481	
Howmet Aerospace Inc	887 shares	24,373	28,233	
Hudson Pacific Properties Inc	995 shares	28,322	24,586	
Infinera Corp	2,058 shares	20,871	19,736	
International Business Machs	4,395 shares	529,844	587,436	
Itt Inc	302 shares	23,260	30,861	
Jabil Inc	365 shares	15,523	25,678	

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
Description of Investment				
Including Maturity Date,				
Rate of Interest, Par, or				
Identity of Issue, Borrower		Maturity Value	Cost	Current
Lessor, or Similar Party				Value
Jp Morgan Chase & Co	10,970	shares	1,442,528	1,737,100
Kinsale Capital Group Inc	96	shares	18,632	22,837
Kirby Corp	338	shares	17,515	20,084
Kla Corp	5,411	shares	1,400,962	2,327,325
Knight-Swift Transportation Hldgs Inc	470	shares	22,819	28,642
Korn Ferry	302	shares	13,137	22,870
Kyndryl Holdings Inc	879	shares	23,399	15,910
Laboratory Corp Amer Hldgs	3,025	shares	615,739	950,485
Lear Corp	114	shares	18,129	20,856
Lincoln Natl Corp Ind	284	shares	15,382	19,386
Lowes Cos Inc	10,900	shares	1,749,559	2,817,432
Lpl Financial Holdings Inc	217	shares	22,616	34,740
Macys Inc	845	shares	19,142	22,122
Manpowergroup Inc	224	shares	20,534	21,802
Medical Properties Trust Inc	1,508	shares	31,956	35,634
Meritor Inc	839	shares	23,100	20,790
Mgic Investment Corp	1,621	shares	20,344	23,375
Mgp Ingredients Inc	225	shares	18,594	19,123
Millerknoll Inc	549	shares	21,400	21,515
Mks Instruments Inc	126	shares	19,115	21,945
Molson Coors Beverage Co	371	shares	17,349	17,196
Mosaic Co	950	shares	24,736	37,326
Ncr Corp New	600	shares	22,843	24,120
Newell Brands Inc	991	shares	21,365	21,643
Nexstar Media Group Inc	198	shares	21,620	29,894
Olin Corp	716	shares	17,585	41,184
On Semiconductor Corp	539	shares	17,641	36,609
Organon & Co	979	shares	34,659	29,811
Oshkosh Corp	214	shares	18,419	24,120
Pacwest Bancorp	904	shares	22,962	40,834
Pdc Energy Inc	697	shares	14,866	34,000
Peoples United Financial Inc	1,524	shares	20,281	27,158
Performance Food Group Co	531	shares	25,704	24,368
Primerica Inc	149	shares	19,956	22,837
Pulte Group Inc	407	shares	18,359	23,264
Qualcomm Inc	10,000	shares	1,614,804	1,938,422
Quanta Services Inc	267	shares	21,883	30,614
Ralph Lauren Corp	268	shares	28,512	31,854
Regal Rexnord Corporation	162	shares	18,183	27,569
Reinsurance Group Of America Inc	201	shares	23,041	22,008
Ryder Sys Inc	294	shares	18,157	24,234
Saia Inc	106	shares	19,165	35,725
Schwab Charles Corp New	40,170	shares	2,130,617	3,378,297
Select Medical Holdings Corp	720	shares	19,915	21,168
Site Centers Corp	1,822	shares	18,301	28,842
Skywest Inc	421	shares	16,971	16,545
Skyworks Solutions Inc	5,949	shares	1,004,383	922,928
Southstate Corp	457	shares	33,379	36,610
Spire Inc	508	shares	34,806	33,132
Spirit Aerosystems Holdings Inc	581	shares	26,765	25,035
State Str Corp	8,505	shares	618,994	790,965
Steven Madden Ltd	589	shares	22,078	27,371
Stifel Finl Corp	418	shares	21,092	29,436
Store Capital Corp	634	shares	21,275	21,810
Summit Materials Inc	799	shares	23,908	32,072
Synovus Finl Corp	822	shares	30,245	39,349
Tegna Inc	1,008	shares	14,544	18,709
Textron Inc	415	shares	26,516	32,038
Travel Plus Leisure Co	502	shares	23,035	27,746
Trinity Inds Inc	646	shares	17,464	19,509
Ugi Corp New	629	shares	23,717	28,877
Univar Solutions Inc	1,093	shares	28,137	30,987
Verint Systems Inc	523	shares	23,160	27,463
Veris Residential Inc	1,200	shares	16,696	22,056
Vici Properties Inc	1,262	shares	33,655	37,999
Victoria'S Secret And Co	399	shares	23,801	22,161
Visteon Corp	200	shares	24,486	22,228
Vistra Corp	1,411	shares	26,833	32,129
Voya Financial Inc	427	shares	25,112	28,314
Wabtec Corp	258	shares	18,886	23,764
Westlake Chemical Corp	289	shares	23,582	28,071
Whiting Petroleum Corp	505	shares	17,453	32,663
Wintrust Financial Corp	355	shares	30,059	32,241
Wolverine World Wide Inc	891	shares	27,870	25,670
Zimmer Biomet Holdings Inc	4,700	shares	724,223	597,088
Zum Water Solutions Corp	445	shares	9,213	16,198
Zynga Inc	2,818	shares	18,420	18,035
Total Equities - U.S.			\$ 28,290,723	\$ 36,402,299
Equities - International				

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

EIN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
		Description of Investment Including Maturity Date, Rate of Interest, Par, or		
Identity of Issue, Borrower Lessor, or Similar Party		Maturity Value	Cost	Current Value
Alcon Inc	16,529 shares	\$	1,090,583	\$ 1,440,006
Assured Guaranty Ltd	371 shares		16,152	18,624
Capri Holdings Ltd	376 shares		20,348	24,406
Chubb Limited	7,475 shares		1,150,552	1,444,992
Invesco Ltd	1,228 shares		23,699	28,269
Jazz Pharmaceuticals Plc	178 shares		27,321	22,677
Lions Gate Entertainment Corp	1,398 shares		14,659	21,515
Norwegian Cruise Line Hldgs Ltd	1,219 shares		30,040	25,282
Novartis Ag	10,340 shares		976,406	904,440
Nvent Electric Plc	702 shares		16,350	26,676
Nxp Semiconductor Nv	5,055 shares		1,007,604	1,151,428
Perrigo Co Plc	681 shares		30,995	26,491
Total Equities - International		\$	4,404,709	\$ 5,134,806
Mutual funds - U.S. bonds				
American Homes 4 Rent L P	200,000 shares		197,026	196,008
Amfam Holdings Inc	200,000 shares		200,000	204,214
Assured Guaranty Us Hldgs Inc	100,000 shares		99,717	103,243
Boston Properties L P	800,000 shares		796,560	794,016
Brixmor Operating Partnership L P	400,000 shares		399,268	397,872
Broadcom Inc	380,000 shares		416,598	421,443
Broadcom Inc	200,000 shares		204,024	209,334
Broadcom Inc	20,000 shares		19,377	19,965
Caesars Resort Collection Llc/Crc Finco	200,000 shares		211,250	208,864
Cbre Services Inc	200,000 shares		196,902	201,152
Centene Corp	400,000 shares		400,000	394,000
Cigna Corp	600,000 shares		596,748	627,372
Coca-Cola Co	300,000 shares		295,206	317,493
Commonwealth Edison Co	800,000 shares		798,912	829,360
Corporate Office Properties L P	800,000 shares		791,624	795,416
Dcp Midstream Operating L P	200,000 shares		200,000	201,500
Dish Dbs Corp	400,000 shares		400,000	406,316
Ebay Inc	200,000 shares		199,912	201,954
Equinix Inc	200,000 shares		199,712	196,030
Flex Inter Holdco Llc	500,000 shares		499,985	501,900
Hilton Grand Vacations	200,000 shares		200,000	205,000
Hyundai Capital America Inc	300,000 shares		299,670	301,453
Indigo Merger Sub Inc	200,000 shares		200,000	200,250
Jersey Central Pwr & Lt Co	200,000 shares		199,452	202,680
Keurig Dr Pepper Inc	400,000 shares		398,496	415,928
Marvell Technology Inc	200,000 shares		199,962	202,842
Mozart Debt Merger Sub Inc	100,000 shares		100,000	99,647
Mph Acquisition Holdings Llc	300,000 shares		300,000	304,125
Nissan Motor Acceptance Corp	500,000 shares		499,525	492,505
Omega Healthcare Investors Inc	700,000 shares		695,128	682,276
Oracle Corp	1,300,000 shares		1,297,725	1,349,543
Organon Finance 1 Llc	400,000 shares		400,000	406,500
Pacific Gas & Electric Co	100,000 shares		99,509	100,726
Pacific Gas & Electric Co	100,000 shares		99,991	100,000
Sammons Financial Group Inc	200,000 shares		199,544	201,524
Sitka Holdings Llc	300,000 shares		297,000	307,062
Southern Co	300,000 shares		300,000	300,000
Square Inc	200,000 shares		200,000	200,238
Starwood Property Trust Inc	100,000 shares		100,000	99,500
Switch Ltd	200,000 shares		200,000	204,500
Synnex Corp	200,000 shares		200,000	194,140
T-Mobile Usa Inc	200,000 shares		199,380	201,232
T-Mobile Usa Inc	200,000 shares		201,878	198,104
Verizon Communications Inc	800,000 shares		799,536	837,552
Wynn Las Vegas Llc/Corp	200,000 shares		213,500	206,000
Total Mutual funds - U.S. bonds		\$	15,023,117	\$ 15,230,779
Mutual funds - U.S. equities				
Bny Mellon Small/Mid Cap Growth Fund	107,035 shares		4,110,252	3,646,687
Calamos Market Neutral Income Fd	816,182 shares		11,338,241	11,850,955
Total Mutual Funds - U.S. equity		\$	15,448,493	\$ 15,497,642
Mutual funds - International equities				
American Europacific Growth Fd	111,714 shares	\$	7,708,461	\$ 7,224,563
Artisan International Value Fund	184,690 shares		7,402,781	7,827,171
T Rowe Price Emerging Mkts Stk	52,616 shares		2,842,522	2,382,449
Blackrock Global Allocation Fund	372,137 shares	\$	8,058,414	\$ 7,803,705
Total Mutual funds - International equities		\$	26,012,178	\$ 25,237,888
Mutual funds - US bonds				

The Pension Plan of Children's Hospital Medical Center of Akron

Schedule H, Line 4i - Schedule of Assets
Held at End of Year

December 31, 2021

ELN 34-0714357 Plan #001

(a)	(b)	(c)	(d)	(e)
		Description of Investment Including Maturity Date, Rate of Interest, Par, or Maturity Value	Cost	Current Value
	Identity of Issue, Borrower Lessor, or Similar Party			
	Pimco Long Dur Cred Bond Portfolio Inst	11,913,838 shares	\$ 151,461,198	\$ 152,258,850
	Pimco Prv Short-Term Flt(ii)(776) Nav Port	29,949 shares	<u>299,818</u>	<u>299,818</u>
	Total Mutual funds - US bonds		\$ 151,761,016	\$ 152,558,668
	International bonds			
	Aercap Ireland Capital Ltd	150,000 shares	149,748	151,230
	Australia Commonwealth	350,000 shares	250,492	239,195
	Barclays Plc	400,000 shares	440,520	429,248
	Credit Suisse	200,000 shares	222,250	216,000
	Credit Suisse Group Ag	400,000 shares	431,650	423,000
	Csn Resources S A	300,000 shares	300,000	285,378
	Deutsche Bk Ag N Y	300,000 shares	315,066	315,738
	Lundin Energy Finance B.V.	200,000 shares	199,654	198,598
	Mpt Oper Ptnrship L P / Fin Corp	200,000 shares	278,996	269,421
	Natwest Group Plc	400,000 shares	400,000	392,000
	Nissan Motor Co Ltd	300,000 shares	333,702	335,508
	Nomura Holdings Inc	300,000 shares	300,000	296,046
	Rolls Royce Plc	300,000 shares	300,750	304,500
	Rolls Royce Plc	200,000 shares	221,541	216,111
	Santos Finance Ltd	200,000 shares	200,000	203,638
	Siemens Financieringsmat	700,000 shares	698,411	713,930
	Societe Generale	300,000 shares	300,000	304,623
	Vodafone Group Plc	900,000 shares	<u>900,000</u>	<u>920,250</u>
	Total Mutual funds - International bonds		\$ 6,242,780	\$ 6,214,414
	Certificates of Deposit			
	Covanta Holding Corp Tr B 1L Tag 4038	186,063	\$ 185,598	\$ 186,470
	Covanta Holding Corp Tr C 1L Tag 4037	13,937	13,902	13,968
	Gip Ii Blue Holding Lp TI B 1L 2776	200,000	197,000	199,750
	Ii-Vi TI B 1L 4532	200,000	198,000	200,042
	Medline TI B 3739	100,000	99,134	100,031
	Yahoo (Verizon Media) TI B2 II Tag 4608	300,000	<u>298,500</u>	<u>300,938</u>
	Total Certificates of Deposit		\$ 992,134	\$ 1,001,199
	Money market funds			
	Federated Government Obligations Fund - Pmm	10,337,935 units	\$ <u>10,337,935</u>	\$ <u>10,337,935</u>
	Total Money market funds		\$ <u>10,337,935</u>	\$ <u>10,337,935</u>
	Total assets held for investment purposes		\$ <u>289,093,605</u>	\$ <u>298,603,845</u>

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4]- Schedule of Reportable Transactions

For the Year Ended December 31, 2021

(a)			(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	DATE	SHARES	Description of Asset	Purchase Price	Sales Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset at Transaction Date	Net Gain (Loss)	
Single Transactions in Same Security exceed 5% of value											
Federated Government Obligation Fund - Prm	2/16/2021	37,120,757	Money market funds	\$ 37,120,757	N/A	-	-	\$ 37,120,757	\$ 37,120,757	-	
Federated Government Obligation Fund - Prm	2/16/2021	56,000,000	Money market funds	N/A	\$ 56,000,000	-	-	\$ 56,000,000	\$ 56,000,000	-	
Federated Government Obligation Fund - Prm	2/17/2021	19,390,074	Money market funds	\$ 19,390,074	N/A	-	-	\$ 19,390,074	\$ 19,390,074	-	
Federated Government Obligation Fund - Prm	3/2/2021	172,646,995	Money market funds	\$ 172,646,995	N/A	-	-	\$ 172,646,995	\$ 172,646,995	-	
Federated Government Obligation Fund - Prm	3/3/2021	168,363,355	Money market funds	N/A	\$ 168,363,355	-	-	\$ 168,363,355	\$ 168,363,355	-	
Federated Government Obligation Fund - Prm	3/11/2021	19,705,728	Money market funds	\$ 19,705,728	N/A	-	-	\$ 19,705,728	\$ 19,705,728	-	
Federated Government Obligation Fund - Prm	3/15/2021	24,153,528	Money market funds	N/A	\$ 24,153,528	-	-	\$ 24,153,528	\$ 24,153,528	-	
Pimco Long Duration Total Return Fund	2/17/2021	5,318,139	Mutual funds - International bonds	\$ 56,000,000	N/A	-	-	\$ 56,000,000	\$ 56,000,000	-	
Pimco Long Duration Total Return Fund	3/1/2021	16,856,907	Mutual funds - International bonds	\$ 172,783,293	N/A	-	-	\$ 183,927,936	\$ 183,927,936	\$ (11,144,643)	
Pimco Long Dur Cred Bond	3/1/2021	10,348,436	Mutual funds - International bonds	\$ 131,942,556	N/A	-	-	\$ 131,942,556	\$ 131,942,556	-	
Pimco Long Dur Cred Bond	3/12/2021	1,308,948	Mutual funds - International bonds	\$ 16,152,423	N/A	-	-	\$ 16,152,423	\$ 16,152,423	-	
Pimco Prv Short-Term Fund	11/12/2021	1,556,130	Mutual funds - International bonds	\$ 15,600,000	N/A	-	-	\$ 15,600,000	\$ 15,600,000	-	
Pimco Prv Short-Term Fund	11/15/2021	1,558,130	Mutual funds - International bonds	N/A	\$ 15,600,000	-	-	\$ 15,600,019	\$ 15,600,019	\$ (19)	
United States Treasury Bonds	6/4/2021	18,000,000	US Government	\$ 16,315,260	N/A	-	-	\$ 16,315,260	\$ 16,315,260	-	
United States Treasury Bonds	6/7/2021	17,700,000	US Government	\$ 16,205,619	N/A	-	-	\$ 16,205,619	\$ 16,205,619	-	
United States Treasury Bonds	6/8/2021	18,000,000	US Government	\$ 16,604,035	N/A	-	-	\$ 16,604,035	\$ 16,604,035	-	
United States Treasury Bonds	6/9/2021	17,400,000	US Government	\$ 16,197,370	N/A	-	-	\$ 16,197,370	\$ 16,197,370	-	
United States Treasury Bonds	6/10/2021	17,500,000	US Government	\$ 16,295,941	N/A	-	-	\$ 16,295,941	\$ 16,295,941	-	
United States Treasury Bonds	6/11/2021	17,200,000	US Government	\$ 16,165,246	N/A	-	-	\$ 16,165,246	\$ 16,165,246	-	
United States Treasury Bonds	6/14/2021	17,200,000	US Government	\$ 16,129,457	N/A	-	-	\$ 16,129,457	\$ 16,129,457	-	
United States Treasury Bonds	6/15/2021	17,700,000	US Government	\$ 16,460,051	N/A	-	-	\$ 16,460,051	\$ 16,460,051	-	
United States Treasury Bonds	6/16/2021	17,800,000	US Government	\$ 16,547,497	N/A	-	-	\$ 16,547,497	\$ 16,547,497	-	
United States Treasury Bonds	6/17/2021	18,100,000	US Government	\$ 16,865,991	N/A	-	-	\$ 16,865,991	\$ 16,865,991	-	
United States Treasury Bonds	6/18/2021	16,700,000	US Government	\$ 15,892,906	N/A	-	-	\$ 15,892,906	\$ 15,892,906	-	
United States Treasury Bonds	6/22/2021	16,800,000	US Government	\$ 15,890,001	N/A	-	-	\$ 15,890,001	\$ 15,890,001	-	
United States Treasury Bonds	6/24/2021	17,100,000	US Government	\$ 16,204,051	N/A	-	-	\$ 16,204,051	\$ 16,204,051	-	
United States Treasury Bonds	6/28/2021	18,300,000	US Government	\$ 17,212,490	N/A	-	-	\$ 17,212,490	\$ 17,212,490	-	
United States Treasury Bonds	6/29/2021	17,400,000	US Government	\$ 16,463,830	N/A	-	-	\$ 16,463,830	\$ 16,463,830	-	
United States Treasury Bonds	6/30/2021	17,400,000	US Government	\$ 16,626,951	N/A	-	-	\$ 16,626,951	\$ 16,626,951	-	
United States Treasury Bonds	7/1/2021	18,100,000	US Government	\$ 17,201,697	N/A	-	-	\$ 17,201,697	\$ 17,201,697	-	
United States Treasury Bonds	7/6/2021	18,100,000	US Government	\$ 17,471,224	N/A	-	-	\$ 17,471,224	\$ 17,471,224	-	
United States Treasury Bonds	7/7/2021	16,700,000	US Government	\$ 16,317,320	N/A	-	-	\$ 16,317,320	\$ 16,317,320	-	
United States Treasury Bonds	7/9/2021	15,700,000	US Government	\$ 15,309,239	N/A	-	-	\$ 15,309,239	\$ 15,309,239	-	
United States Treasury Bonds	7/13/2021	17,000,000	US Government	\$ 16,562,670	N/A	-	-	\$ 16,562,670	\$ 16,562,670	-	
United States Treasury Bonds	7/15/2021	17,100,000	US Government	\$ 16,791,863	N/A	-	-	\$ 16,791,863	\$ 16,791,863	-	
United States Treasury Bonds	7/19/2021	16,300,000	US Government	\$ 16,374,727	N/A	-	-	\$ 16,374,727	\$ 16,374,727	-	
United States Treasury Bonds	7/21/2021	15,500,000	US Government	\$ 15,367,630	N/A	-	-	\$ 15,367,630	\$ 15,367,630	-	
United States Treasury Bonds	7/23/2021	15,900,000	US Government	\$ 15,613,505	N/A	-	-	\$ 15,613,505	\$ 15,613,505	-	
United States Treasury Bonds	7/27/2021	16,200,000	US Government	\$ 16,011,009	N/A	-	-	\$ 16,011,009	\$ 16,011,009	-	
United States Treasury Bonds	7/29/2021	16,000,000	US Government	\$ 15,805,834	N/A	-	-	\$ 15,805,834	\$ 15,805,834	-	
United States Treasury Bonds	8/12/2021	17,900,000	US Government	\$ 17,336,990	N/A	-	-	\$ 17,336,990	\$ 17,336,990	-	
United States Treasury Bonds	8/16/2021	16,500,000	US Government	\$ 16,353,980	N/A	-	-	\$ 16,353,980	\$ 16,353,980	-	
United States Treasury Bonds	8/18/2021	16,100,000	US Government	\$ 15,861,935	N/A	-	-	\$ 15,861,935	\$ 15,861,935	-	
United States Treasury Bonds	8/26/2021	15,900,000	US Government	\$ 15,593,787	N/A	-	-	\$ 15,593,787	\$ 15,593,787	-	
United States Treasury Bonds	9/27/2021	16,200,000	US Government	\$ 15,732,643	N/A	-	-	\$ 15,732,643	\$ 15,732,643	-	
United States Treasury Bonds	9/29/2021	17,300,000	US Government	\$ 16,555,075	N/A	-	-	\$ 16,555,075	\$ 16,555,075	-	
United States Treasury Bonds	10/4/2021	16,800,000	US Government	\$ 16,089,601	N/A	-	-	\$ 16,089,601	\$ 16,089,601	-	
United States Treasury Bonds	10/6/2021	16,700,000	US Government	\$ 15,942,793	N/A	-	-	\$ 15,942,793	\$ 15,942,793	-	
United States Treasury Bonds	10/13/2021	17,200,000	US Government	\$ 16,382,151	N/A	-	-	\$ 16,382,151	\$ 16,382,151	-	

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4]- Schedule of Reportable Transactions

For the Year Ended December 31, 2021

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)		
Identity of Party Involved	DATE	SHARES	Description of Asset	Purchase Price	Sales Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset at Transaction Date	Net Gain (Loss)
United States Treasury Bonds	10/14/2021	16,400,000	US Government	\$ 15,779,336	N/A	-	-	\$ 15,779,336	\$ 15,779,336	-
United States Treasury Bonds	10/21/2021	17,600,000	US Government	\$ 16,620,385	N/A	-	-	\$ 16,620,385	\$ 16,620,385	-
United States Treasury Bonds	10/28/2021	15,600,000	US Government	\$ 15,382,441	N/A	-	-	\$ 15,382,441	\$ 15,382,441	-
United States Treasury Bonds	11/1/2021	15,900,000	US Government	\$ 15,495,205	N/A	-	-	\$ 15,495,205	\$ 15,495,205	-
United States Treasury Bonds	11/4/2021	16,900,000	US Government	\$ 16,492,031	N/A	-	-	\$ 16,492,031	\$ 16,492,031	-
United States Treasury Bonds	11/12/2021	16,000,000	US Government	\$ 15,779,540	N/A	-	-	\$ 15,779,540	\$ 15,779,540	-
United States Treasury Bonds	11/19/2021	17,900,000	US Government	\$ 17,662,445	N/A	-	-	\$ 17,662,445	\$ 17,662,445	-
United States Treasury Bonds	11/22/2021	16,800,000	US Government	\$ 16,479,266	N/A	-	-	\$ 16,479,266	\$ 16,479,266	-
United States Treasury Bonds	11/29/2021	16,300,000	US Government	\$ 16,182,409	N/A	-	-	\$ 16,182,409	\$ 16,182,409	-
United States Treasury Bonds	12/13/2021	15,500,000	US Government	\$ 15,635,185	N/A	-	-	\$ 15,635,185	\$ 15,635,185	-
United States Treasury Bonds	12/17/2021	17,400,000	US Government	\$ 17,540,869	N/A	-	-	\$ 17,540,869	\$ 17,540,869	-
United States Treasury Bonds	6/4/2021	18,000,000	US Government	N/A	\$ 16,318,125	-	-	\$ 16,343,920	\$ 16,343,920	\$ (25,795)
United States Treasury Bonds	6/7/2021	17,700,000	US Government	N/A	\$ 16,206,563	-	-	\$ 16,121,385	\$ 16,121,385	\$ 85,177
United States Treasury Bonds	6/8/2021	18,000,000	US Government	N/A	\$ 16,605,000	-	-	\$ 16,473,320	\$ 16,473,320	\$ 131,680
United States Treasury Bonds	6/9/2021	17,400,000	US Government	N/A	\$ 16,198,313	-	-	\$ 16,024,696	\$ 16,024,696	\$ 173,617
United States Treasury Bonds	6/10/2021	17,500,000	US Government	N/A	\$ 16,296,875	-	-	\$ 16,182,933	\$ 16,182,933	\$ 113,942
United States Treasury Bonds	6/11/2021	17,200,000	US Government	N/A	\$ 16,168,000	-	-	\$ 16,000,362	\$ 16,000,362	\$ 167,638
United States Treasury Bonds	6/14/2021	17,200,000	US Government	N/A	\$ 16,130,375	-	-	\$ 16,047,505	\$ 16,047,505	\$ 82,870
United States Treasury Bonds	6/15/2021	17,700,000	US Government	N/A	\$ 16,461,000	-	-	\$ 16,493,940	\$ 16,493,940	\$ (32,940)
United States Treasury Bonds	6/16/2021	17,800,000	US Government	N/A	\$ 16,548,438	-	-	\$ 16,572,338	\$ 16,572,338	\$ (23,901)
United States Treasury Bonds	6/17/2021	18,100,000	US Government	N/A	\$ 16,866,938	-	-	\$ 16,857,056	\$ 16,857,056	\$ 9,882
United States Treasury Bonds	6/18/2021	16,700,000	US Government	N/A	\$ 15,896,313	-	-	\$ 15,674,937	\$ 15,674,937	\$ 221,376
United States Treasury Bonds	6/22/2021	16,800,000	US Government	N/A	\$ 15,891,750	-	-	\$ 15,812,400	\$ 15,812,400	\$ 79,350
United States Treasury Bonds	6/24/2021	17,100,000	US Government	N/A	\$ 16,207,594	-	-	\$ 16,134,526	\$ 16,134,526	\$ 73,067
United States Treasury Bonds	6/28/2021	18,300,000	US Government	N/A	\$ 17,213,438	-	-	\$ 17,246,164	\$ 17,246,164	\$ (32,726)
United States Treasury Bonds	6/29/2021	17,400,000	US Government	N/A	\$ 16,464,750	-	-	\$ 16,422,212	\$ 16,422,212	\$ 42,539
United States Treasury Bonds	6/30/2021	17,400,000	US Government	N/A	\$ 16,627,875	-	-	\$ 16,497,528	\$ 16,497,528	\$ 130,347
United States Treasury Bonds	7/1/2021	18,100,000	US Government	N/A	\$ 17,206,313	-	-	\$ 17,176,484	\$ 17,176,484	\$ 29,828
United States Treasury Bonds	7/6/2021	18,100,000	US Government	N/A	\$ 17,472,156	-	-	\$ 17,287,625	\$ 17,287,625	\$ 184,531
United States Treasury Bonds	7/7/2021	16,700,000	US Government	N/A	\$ 16,319,031	-	-	\$ 16,084,228	\$ 16,084,228	\$ 234,803
United States Treasury Bonds	7/9/2021	15,700,000	US Government	N/A	\$ 15,312,406	-	-	\$ 15,187,033	\$ 15,187,033	\$ 125,373
United States Treasury Bonds	7/13/2021	17,000,000	US Government	N/A	\$ 16,564,375	-	-	\$ 16,488,113	\$ 16,488,113	\$ 76,262
United States Treasury Bonds	7/15/2021	17,100,000	US Government	N/A	\$ 16,795,406	-	-	\$ 16,661,631	\$ 16,661,631	\$ 133,775
United States Treasury Bonds	7/19/2021	16,300,000	US Government	N/A	\$ 16,376,406	-	-	\$ 16,058,993	\$ 16,058,993	\$ 317,413
United States Treasury Bonds	7/21/2021	15,500,000	US Government	N/A	\$ 15,369,219	-	-	\$ 15,304,466	\$ 15,304,466	\$ 64,753
United States Treasury Bonds	7/23/2021	15,900,000	US Government	N/A	\$ 15,616,781	-	-	\$ 15,669,063	\$ 15,669,063	\$ (52,282)
United States Treasury Bonds	7/27/2021	16,200,000	US Government	N/A	\$ 16,012,688	-	-	\$ 15,981,265	\$ 15,981,265	\$ 31,423
United States Treasury Bonds	7/29/2021	16,000,000	US Government	N/A	\$ 15,810,000	-	-	\$ 15,791,724	\$ 15,791,724	\$ 18,276
United States Treasury Bonds	8/12/2021	17,900,000	US Government	N/A	\$ 17,340,625	-	-	\$ 17,637,545	\$ 17,637,545	\$ (296,920)
United States Treasury Bonds	8/16/2021	16,500,000	US Government	N/A	\$ 16,355,625	-	-	\$ 16,292,775	\$ 16,292,775	\$ 82,850
United States Treasury Bonds	8/18/2021	16,100,000	US Government	N/A	\$ 15,863,531	-	-	\$ 15,885,024	\$ 15,885,024	\$ (21,493)
United States Treasury Bonds	8/26/2021	15,900,000	US Government	N/A	\$ 15,596,906	-	-	\$ 15,718,983	\$ 15,718,983	\$ (122,076)
United States Treasury Bonds	9/27/2021	16,200,000	US Government	N/A	\$ 15,734,250	-	-	\$ 15,911,648	\$ 15,911,648	\$ (177,398)
United States Treasury Bonds	9/29/2021	17,300,000	US Government	N/A	\$ 16,559,344	-	-	\$ 16,829,137	\$ 16,829,137	\$ (269,794)
United States Treasury Bonds	10/4/2021	16,800,000	US Government	N/A	\$ 16,091,250	-	-	\$ 16,250,092	\$ 16,250,092	\$ (158,842)
United States Treasury Bonds	10/6/2021	16,700,000	US Government	N/A	\$ 15,948,500	-	-	\$ 16,076,584	\$ 16,076,584	\$ (128,084)
United States Treasury Bonds	10/13/2021	17,200,000	US Government	N/A	\$ 16,383,000	-	-	\$ 16,492,623	\$ 16,492,623	\$ (109,623)
United States Treasury Bonds	10/14/2021	16,400,000	US Government	N/A	\$ 15,785,000	-	-	\$ 15,744,920	\$ 15,744,920	\$ 40,080
United States Treasury Bonds	10/21/2021	17,600,000	US Government	N/A	\$ 16,626,500	-	-	\$ 16,792,743	\$ 16,792,743	\$ (166,243)
United States Treasury Bonds	10/28/2021	15,600,000	US Government	N/A	\$ 15,385,500	-	-	\$ 15,058,263	\$ 15,058,263	\$ 327,237
United States Treasury Bonds	11/1/2021	15,900,000	US Government	N/A	\$ 15,497,531	-	-	\$ 15,399,912	\$ 15,399,912	\$ 97,619
United States Treasury Bonds	11/4/2021	16,900,000	US Government	N/A	\$ 16,498,625	-	-	\$ 16,415,495	\$ 16,415,495	\$ 83,130

The Pension Plan of Children's Hospital
Medical Center of Akron

EIN #34-0714357 Plan #001

Schedule H, Line 4j- Schedule of Reportable Transactions

For the Year Ended December 31, 2021

(a)		(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	DATE	SHARES	Description of Asset	Purchase Price	Sales Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset at Transaction Date	Net Gain (Loss)
United States Treasury Bonds	11/12/2021	16,000,000	US Government	N/A	\$ 15,785,000	-	-	\$ 15,631,841	\$ 15,631,841	\$ 153,159
United States Treasury Bonds	11/19/2021	17,900,000	US Government	N/A	\$ 17,665,063	-	-	\$ 17,559,040	\$ 17,559,040	\$ 106,023
United States Treasury Bonds	11/22/2021	16,800,000	US Government	N/A	\$ 16,485,000	-	-	\$ 16,479,708	\$ 16,479,708	\$ 5,292
United States Treasury Bonds	11/29/2021	16,300,000	US Government	N/A	\$ 16,187,938	-	-	\$ 16,063,501	\$ 16,063,501	\$ 124,437
United States Treasury Bonds	12/13/2021	15,500,000	US Government	N/A	\$ 15,640,469	-	-	\$ 15,588,686	\$ 15,588,686	\$ 51,783
United States Treasury Bonds	12/17/2021	17,400,000	US Government	N/A	\$ 17,552,250	-	-	\$ 17,516,082	\$ 17,516,082	\$ 36,168
Series of Transactions in Same Security exceed 5% of value										
Pimco Long Duration Total Return Fund	10 Transactions	13,345,346	Mutual funds - International bonds	\$ 169,647,802	N/A	-	-	\$ 169,647,802	\$ 169,647,802	-
Pimco Long Duration Total Return Fund	8 Transactions	1,431,508	Mutual funds - International bonds	N/A	\$ 18,548,712	-	-	\$ 18,186,604	\$ 18,186,604	\$ 362,108
Pimco Prv Short-term Fd(776) Nav Port	63 Transactions	4,314,512	Mutual funds - International bonds	\$ 46,900,257	N/A	-	-	\$ 46,900,257	\$ 46,900,257	-
Pimco Prv Short-term Fd(776) Nav Port	47 Transactions	4,654,085	Mutual funds - International bonds	N/A	\$ 46,600,000	-	-	\$ 46,600,439	\$ 46,600,439	\$ (439)
Federated Government Obligation Fund - Pfm	335 Transactions	356,550,960	Money market funds	\$ 347,050,960	N/A	-	-	\$ 347,050,960	\$ 347,050,960	-
Federated Government Obligation Fund - Pfm	284 Transactions	353,191,144	Money market funds	N/A	\$ 353,191,144	-	-	\$ 353,191,144	\$ 353,191,144	-
United States Treasury Bonds	122 Transactions	1,849,380,000	US Government	\$ 1,737,259,813	N/A	-	-	\$ 1,737,259,813	\$ 1,737,259,813	-
United States Treasury Bonds	125 Transactions	1,802,400,000	US Government	N/A	\$ 1,692,722,538	-	-	\$ 1,690,044,380	\$ 1,690,044,380	\$ 2,678,158

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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

► **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 PENSION PLAN OF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF CHILDREN'S HOSPITAL MEDICAL CENTER OF AKRON	D Employer Identification Number (EIN) 34-0714357	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I	Basic Information		
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>		
2	Assets:		
	a Market value	2a	312,711,261
	b Actuarial value	2b	290,998,715
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	840	94,125,336
	b For terminated vested participants	391	25,765,040
	c For active participants	1,138	120,262,986
	d Total	2,369	240,153,362
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	5.65%
6	Target normal cost		
	a Present value of current plan year accruals	6a	0
	b Expected plan-related expenses	6b	0
	c Total (line 6a + line 6b)	6c	0

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	Max T. Murphy Signature of actuary	09/02/2022 Date 2008791 Most recent enrollment number 216-937-4000 Telephone number (including area code)
	Max T. Murphy Type or print name of actuary Willis Towers Watson US LLC Firm name 1001 Lakeside Avenue Suite 1500 Cleveland OH 44114-1172 Address of the firm	

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

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

Schedule SB (Form 5500) 2021
v. 201209

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.36 %	3rd segment: 6.11 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
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 6c).....	31a	0	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
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	21,685,547	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	21,685,547	
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

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Children's Hospital Medical Center of Akron
EIN/PN	34-0714357/001
Plan Name	The Pension Plan of Children's Hospital Medical Center of Akron
Valuation Date	January 1, 2021
Enrolled Actuary	Max T. Murphy
Enrollment Number	20-08791

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2021

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

Age of Retirement (A)	Rates of Retirement (B)	% of Retiring (C)	Weighted Ages (A) * (C)
55	0.030	0.030000	1.650000
56	0.030	0.029100	1.629600
57	0.030	0.028227	1.608939
58	0.030	0.027380	1.588051
59	0.050	0.044265	2.611614
60	0.050	0.042051	2.523085
61	0.050	0.039949	2.436879
62	0.125	0.094878	5.882466
63	0.125	0.083019	5.230177
64	0.125	0.072641	4.649046
65	0.250	0.127122	8.262953
66	0.400	0.152547	10.068090
67	0.300	0.068646	4.599287
68	0.300	0.048052	3.267553
69	0.300	0.033637	2.320924
70	0.300	0.023546	1.648192
71	0.300	0.016482	1.170216
72	1.000	0.038458	2.768963

Weighted Retirement Age: 63.916035

Average Retirement Age: 64

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- | | |
|-----------------------|-----------------|
| ■ Applicable month | September |
| ■ Interest rate basis | 3-Segment Rates |

Interest rates:

- | | Reflecting
Corridors | Not Reflecting
Corridors |
|---------------------------|-------------------------|-----------------------------|
| ■ First segment rate | 4.75% | 2.22% |
| ■ Second segment rate | 5.36% | 3.38% |
| ■ Third segment rate | 6.11% | 3.92% |
| ■ Effective interest rate | 5.65% | 3.62% |
| ■ Lump sum interest rate | 3 segment rates | |

Annual rates of increase:

- | | |
|--------------------------------------|-------|
| ■ Compensation: | N/A |
| ■ Future Social Security wage bases | N/A |
| ■ Statutory limits on compensation | N/A |
| ■ Assumed cost of living adjustments | 0.00% |

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality:

- **Healthy** Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019).
- **Disabled** Alternative disabled life mortality tables as defined under Revenue Ruling 96-7.
- **Lump sum** Pension Protection Act unisex mortality table for 2021.

Termination Rates at which participants terminate by service are given below:

Service	Rate
0	.0550
5	.0550
10	.0550
15 – 19	.0275
20 – 24	.0225
25 +	.0225

Disability The annual rates (per 1,000 lives) at which participants become disabled by age and gender are given below:

Age	Male	Female
25	.38	.47
35	.69	1.36
45	2.02	3.23
55	7.22	9.52

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Age	Rate (%)
55	3.0%
56	3.0
57	3.0
58	3.0
59	5.0
60	5.0
61	5.0
62	12.5
63	12.5
64	12.5
65	25.0
66	40.0
67	30.0
68	30.0
69	30.0
70	30.0
71	30.0
72	100.0

The average retirement age is age 64.

Benefit commencement date:

- Pre-retirement death benefit The later of the death of the active participant or the date the participant would have attained age 55 with 10 years of service or age 65, if earlier
- Deferred vested benefit The later of age 65 or termination of employment
- Disability benefit Age 65
- Retirement benefit Upon termination of employment

Form of payment

25% of participants are assumed to elect a single life annuity, 15% of married participants are assumed to elect a joint and 50% survivor annuity (40% single life annuity assumption for single participants), and 60% of participants are assumed to elect a lump sum.

Percent married

85% of males; 50% of females.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Spouse age	Female spouses are assumed to be three years younger than the male spouses.
Covered pay	Compensation assumed paid in the current year is the actual compensation from the prior year increased by the assumed salary growth. Not applicable for 2021 due to plan freeze effective December 31, 2020.
Administrative expenses	Because the plan sponsor pays administrative expenses directly, none.
At-risk assumptions	N/A
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the date of decrement.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Because the plan is frozen and benefit accruals ceased effective December 31, 2020 and the plan sponsor pays administrative expense directly, none.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2020 plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Benefits not valued

None

Sources of Data and Other Information

The plan sponsor's third-party administrator furnished participant data as of 1/1/2021. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussion with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
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Assumptions Rationale - Significant Demographic Assumptions

Healthy mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on an experience study conducted in 2018, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Retirement rates were based on an experience study conducted in 2018, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law," as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

- Change in assumptions and methods since prior valuation**
- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
 - The mortality projection scale used to calculate the funding target and target normal cost was updated from Scale MP-2018 to Scale MP-2019, as required by IRC §430.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The Plan was amended and restated effective January 1, 2020. The most recent amendment was executed December 21, 2020 and is effective December 31, 2020.

Covered employees All non-excludable employees whose customary employment is for at least 1,000 hours per year and who have attained age 21 and completed one year of service are eligible. Employees hired after December 31, 2006 are not eligible to enter the Plan.

Participation date Date of becoming a covered employee.

Definitions

Vesting service Since January 1, 1976, one year is credited for each 1,000-hour calendar year of employment by Children's Hospital Medical Center of Akron. Only hours of service earned as a Covered employee shall be counted for purposes of determining a participant's retirement benefit. Service prior to January 1, 1976 was calculated as elapsed time from date of hire.

Service used for benefit accrual purposes is frozen effective December 31, 2020. Service used for all other purposes will continue to accrue.

Compensation "Compensation" shall generally mean the total compensation paid to a participant by the Employer during any calendar year, as reported on Internal Revenue Service Form W-2 including Code Section 403(b) and 125 Employee Deferrals and excluding expense reimbursements of any kind. Compensation shall also include any compensation which a participant would have been paid but was not actually paid due to temporary absence from work and in lieu of which the Participant received sick pay under the Employer's sick pay plan. Compensation earned in any year shall be limited in accordance with the Internal Revenue Code Section 401(a)(17).

Compensation earned after December 31, 2020 is not included.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Average monthly compensation	The average of the highest five consecutive calendar years of compensation during the 10-year period ending on the earlier of the participant's termination date or retirement date divided by 60.
Normal retirement date (NRD)	First of the month following the attainment of age 65 and the fifth anniversary of becoming a participant in the plan.
Monthly pension benefit	The monthly benefit is equal to the greater of: a) The sum of (i) 1.0% of final 5-year average monthly compensation multiplied by years of vesting service, and (ii) 0.65% of final 5-year average monthly compensation in excess of Social Security Covered Compensation, multiplied by years of vesting service, not to exceed 35 years. If the Social Security Retirement Age is age 66, the 1.0% factor becomes 0.9333% and the 0.65% factor becomes 0.606645%. If the Social Security Retirement Age is age 67, the 1.0% factor becomes 0.8667% and the 0.65% factor becomes 0.563355%. These changes are not applicable for participants born before 1938. Or b) \$15.00 multiplied by the sum of (i) years of benefit service at January 1, 1989, and (ii) years of vesting service after January 1, 1989. Benefit accruals for all participants were frozen effective December 31, 2020.
Monthly preretirement death benefit	The benefit paid to the surviving spouse is equal to the benefit she would have received if the employee had retired on the day prior to his death and had elected a 50% Joint and Survivor option.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing 10 years of vesting service.
Postponed retirement	Retirement after NRD.
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service.
Disability	Permanent and total disability.
Pre-retirement death benefit	Death after completion of five years of vesting service, provided the employee has been married to his current spouse for at least one year.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of actual retirement date but reduced for early commencement if benefit is payable prior to normal retirement date. Reductions are based on Social Security Retirement Age as follows:

Age when benefit begins	Reduction factors		
	SSRA of age 65	SSRA of age 66	SSRA of age 67
65	1.0000	1.0000	1.0000
64	.9333	.9286	.9230
63	.8667	.8572	.8461
62	.8000	.7857	.7692
61	.7333	.7143	.7307
60	.6667	.6786	.6923
59	.6333	.6429	.6539
58	.6000	.6072	.6153
57	.5667	.5714	.5769
56	.5333	.5357	.5292
55	.5000	.4915	.4861

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
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SCHEDULE SB ATTACHMENTS

However, if the benefit is based on the \$15.00 multiplier, reduction factors are as follows:

Age when benefit begins	Reduction factor
65	1.0000
64	.923
63	.846
62	.769
61	.730
60	.692
59	.653
58	.615
57	.576
56	.529
55	.486

Postponed retirement	Monthly pension benefit determined as of actual retirement date.
Vested termination	Monthly pension benefit (determined in the same manner as for early retirement) is payable commencing at age 65.
Total disability retirement	The monthly pension benefit is determined based on the participant's average monthly compensation at the earlier of date of retirement or December 31, 2020, and years of vesting and benefit commencement date on which LTD payments cease, if earlier. This benefit is payable as of the participant's Normal Retirement Date.
Pre-retirement death	The monthly pre-retirement death benefit is payable to the spouse at the later of: a) the date of the employee's death or b) the date of which the employee would have been age 55 with 10 years of service or age 65.
Post-retirement death	A lump sum death benefit of \$5,000 is payable to the beneficiary of the participant.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
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Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	A participant may elect to receive his benefit on a straight-life, 100% Joint and Survivor, 75% Joint and Survivor, 50% Joint and Survivor basis, 180 months certain and continuous, 120 months certain and continuous, 60 months certain and continuous, or a lump sum. Unless otherwise elected, any benefit payable under the Plan shall be paid: a) on a 50% Joint and Survivor basis, if the employee has been married to his current spouse for at least one year; or b) on a straight-life basis otherwise, with the further provision that any benefits payable under (a) above shall be actuarially equivalent to a straight-life benefit.
Death benefit	The beneficiary of a participant who dies while receiving a normal, early, or disability retirement benefit shall be entitled to receive a lump sum death benefit of \$5,000, if retired after January 1, 1971.
Pension increases	None
Plan participants' contributions	None
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

Effective December 31, 2020, benefit accruals under the Plan are frozen and the accrued benefit for all participants shall be determined as of such date, with no increases thereafter. The plan freeze is reflected in the results presented in this report.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

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Schedule SB, Line 26

Schedule of Active Participant Data as of January 1, 2021

Number and average annual frozen benefit distributed by attained age and attained years of credited service

Attained Age	Attained Years of Credited Service ¹													Total
	0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25-29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
30-34	0	0	0	0	0	0	4	0	0	0	0	0	0	4
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
35-39	0	0	0	0	1	7	64	35	1	0	0	0	0	108
	-	-	-	-	-	-	8,723	8,621	-	-	-	-	-	8,177
40-44	0	0	1	1	0	12	47	79	18	1	0	0	0	159
	-	-	-	-	-	-	10,502	10,919	-	-	-	-	-	10,608
45-49	0	0	1	1	0	7	34	64	37	6	2	0	0	152
	-	-	-	-	-	-	10,246	13,428	14,539	-	-	-	-	12,542
50-54	0	1	0	1	1	12	19	62	45	37	22	2	0	202
	-	-	-	-	-	-	-	13,268	18,960	23,762	23,109	-	-	16,735
55-59	0	2	0	0	2	7	28	58	43	32	43	17	2	234
	-	-	-	-	-	-	7,858	18,401	19,341	21,346	24,523	-	-	18,379
60-64	0	1	0	2	0	9	20	48	33	20	35	31	20	219
	-	-	-	-	-	-	8,404	14,369	23,019	22,343	25,240	31,777	27,666	20,610
65-69	0	0	0	0	0	2	4	17	10	1	6	3	6	49
	-	-	-	-	-	-	-	-	-	-	-	-	-	22,962
70 & over	2	0	0	0	0	0	2	0	2	1	0	1	3	11
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	2	4	2	5	4	56	222	363	189	98	108	54	31	1,138
	-	-	-	-	-	4,515	9,732	13,560	18,300	21,618	23,905	28,534	33,684	15,901

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
 EIN / PN: 34-0714357/001
 Plan Sponsor: Children's Hospital Medical Center of Akron
 Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- | | |
|-----------------------|-----------------|
| ■ Applicable month | September |
| ■ Interest rate basis | 3-Segment Rates |

Interest rates:

- | | Reflecting
Corridors | Not Reflecting
Corridors |
|---------------------------|-------------------------|-----------------------------|
| ■ First segment rate | 4.75% | 2.22% |
| ■ Second segment rate | 5.36% | 3.38% |
| ■ Third segment rate | 6.11% | 3.92% |
| ■ Effective interest rate | 5.65% | 3.62% |
| ■ Lump sum interest rate | 3 segment rates | |

Annual rates of increase:

- | | |
|--------------------------------------|-------|
| ■ Compensation: | N/A |
| ■ Future Social Security wage bases | N/A |
| ■ Statutory limits on compensation | N/A |
| ■ Assumed cost of living adjustments | 0.00% |

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality:

- **Healthy** Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019).
- **Disabled** Alternative disabled life mortality tables as defined under Revenue Ruling 96-7.
- **Lump sum** Pension Protection Act unisex mortality table for 2021.

Termination Rates at which participants terminate by service are given below:

Service	Rate
0	.0550
5	.0550
10	.0550
15 – 19	.0275
20 – 24	.0225
25 +	.0225

Disability The annual rates (per 1,000 lives) at which participants become disabled by age and gender are given below:

Age	Male	Female
25	.38	.47
35	.69	1.36
45	2.02	3.23
55	7.22	9.52

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Age	Rate (%)
55	3.0%
56	3.0
57	3.0
58	3.0
59	5.0
60	5.0
61	5.0
62	12.5
63	12.5
64	12.5
65	25.0
66	40.0
67	30.0
68	30.0
69	30.0
70	30.0
71	30.0
72	100.0

The average retirement age is age 64.

Benefit commencement date:

- Pre-retirement death benefit The later of the death of the active participant or the date the participant would have attained age 55 with 10 years of service or age 65, if earlier
- Deferred vested benefit The later of age 65 or termination of employment
- Disability benefit Age 65
- Retirement benefit Upon termination of employment

Form of payment

25% of participants are assumed to elect a single life annuity, 15% of married participants are assumed to elect a joint and 50% survivor annuity (40% single life annuity assumption for single participants), and 60% of participants are assumed to elect a lump sum.

Percent married

85% of males; 50% of females.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Spouse age	Female spouses are assumed to be three years younger than the male spouses.
Covered pay	Compensation assumed paid in the current year is the actual compensation from the prior year increased by the assumed salary growth. Not applicable for 2021 due to plan freeze effective December 31, 2020.
Administrative expenses	Because the plan sponsor pays administrative expenses directly, none.
At-risk assumptions	N/A
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the date of decrement.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Because the plan is frozen and benefit accruals ceased effective December 31, 2020 and the plan sponsor pays administrative expense directly, none.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2020 plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Benefits not valued

None

Sources of Data and Other Information

The plan sponsor's third-party administrator furnished participant data as of 1/1/2021. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussion with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
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Assumptions Rationale - Significant Demographic Assumptions

Healthy mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates were based on an experience study conducted in 2018, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Retirement rates were based on an experience study conducted in 2018, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law," as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

- Change in assumptions and methods since prior valuation**
- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
 - The mortality projection scale used to calculate the funding target and target normal cost was updated from Scale MP-2018 to Scale MP-2019, as required by IRC §430.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Children's Hospital Medical Center of Akron
EIN/PN	34-0714357/001
Plan Name	The Pension Plan of Children's Hospital Medical Center of Akron
Valuation Date	January 1, 2021
Enrolled Actuary	Max T. Murphy
Enrollment Number	20-08791

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The Plan was amended and restated effective January 1, 2020. The most recent amendment was executed December 21, 2020 and is effective December 31, 2020.

Covered employees All non-excludable employees whose customary employment is for at least 1,000 hours per year and who have attained age 21 and completed one year of service are eligible. Employees hired after December 31, 2006 are not eligible to enter the Plan.

Participation date Date of becoming a covered employee.

Definitions

Vesting service Since January 1, 1976, one year is credited for each 1,000-hour calendar year of employment by Children's Hospital Medical Center of Akron. Only hours of service earned as a Covered employee shall be counted for purposes of determining a participant's retirement benefit. Service prior to January 1, 1976 was calculated as elapsed time from date of hire.

Service used for benefit accrual purposes is frozen effective December 31, 2020. Service used for all other purposes will continue to accrue.

Compensation "Compensation" shall generally mean the total compensation paid to a participant by the Employer during any calendar year, as reported on Internal Revenue Service Form W-2 including Code Section 403(b) and 125 Employee Deferrals and excluding expense reimbursements of any kind. Compensation shall also include any compensation which a participant would have been paid but was not actually paid due to temporary absence from work and in lieu of which the Participant received sick pay under the Employer's sick pay plan. Compensation earned in any year shall be limited in accordance with the Internal Revenue Code Section 401(a)(17).

Compensation earned after December 31, 2020 is not included.

Plan Name: The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN: 34-0714357/001
Plan Sponsor: Children's Hospital Medical Center of Akron
Valuation Date: January 1, 2021

SCHEDULE SB ATTACHMENTS

Average monthly compensation	The average of the highest five consecutive calendar years of compensation during the 10-year period ending on the earlier of the participant's termination date or retirement date divided by 60.
Normal retirement date (NRD)	First of the month following the attainment of age 65 and the fifth anniversary of becoming a participant in the plan.
Monthly pension benefit	The monthly benefit is equal to the greater of: a) The sum of (i) 1.0% of final 5-year average monthly compensation multiplied by years of vesting service, and (ii) 0.65% of final 5-year average monthly compensation in excess of Social Security Covered Compensation, multiplied by years of vesting service, not to exceed 35 years. If the Social Security Retirement Age is age 66, the 1.0% factor becomes 0.9333% and the 0.65% factor becomes 0.606645%. If the Social Security Retirement Age is age 67, the 1.0% factor becomes 0.8667% and the 0.65% factor becomes 0.563355%. These changes are not applicable for participants born before 1938. Or b) \$15.00 multiplied by the sum of (i) years of benefit service at January 1, 1989, and (ii) years of vesting service after January 1, 1989. Benefit accruals for all participants were frozen effective December 31, 2020.
Monthly preretirement death benefit	The benefit paid to the surviving spouse is equal to the benefit she would have received if the employee had retired on the day prior to his death and had elected a 50% Joint and Survivor option.

Plan Name:	The Pension Plan of Children's Hospital Medical Center of Akron
EIN / PN:	34-0714357/001
Plan Sponsor:	Children's Hospital Medical Center of Akron
Valuation Date:	January 1, 2021

SCHEDULE SB ATTACHMENTS

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing 10 years of vesting service.
Postponed retirement	Retirement after NRD.
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service.
Disability	Permanent and total disability.
Pre-retirement death benefit	Death after completion of five years of vesting service, provided the employee has been married to his current spouse for at least one year.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit determined as of actual retirement date but reduced for early commencement if benefit is payable prior to normal retirement date. Reductions are based on Social Security Retirement Age as follows:

Age when benefit begins	Reduction factors		
	SSRA of age 65	SSRA of age 66	SSRA of age 67
65	1.0000	1.0000	1.0000
64	.9333	.9286	.9230
63	.8667	.8572	.8461
62	.8000	.7857	.7692
61	.7333	.7143	.7307
60	.6667	.6786	.6923
59	.6333	.6429	.6539
58	.6000	.6072	.6153
57	.5667	.5714	.5769
56	.5333	.5357	.5292
55	.5000	.4915	.4861

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However, if the benefit is based on the \$15.00 multiplier, reduction factors are as follows:

Age when benefit begins	Reduction factor
65	1.0000
64	.923
63	.846
62	.769
61	.730
60	.692
59	.653
58	.615
57	.576
56	.529
55	.486

Postponed retirement	Monthly pension benefit determined as of actual retirement date.
Vested termination	Monthly pension benefit (determined in the same manner as for early retirement) is payable commencing at age 65.
Total disability retirement	The monthly pension benefit is determined based on the participant's average monthly compensation at the earlier of date of retirement or December 31, 2020, and years of vesting and benefit commencement date on which LTD payments cease, if earlier. This benefit is payable as of the participant's Normal Retirement Date.
Pre-retirement death	The monthly pre-retirement death benefit is payable to the spouse at the later of: a) the date of the employee's death or b) the date of which the employee would have been age 55 with 10 years of service or age 65.
Post-retirement death	A lump sum death benefit of \$5,000 is payable to the beneficiary of the participant.

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Other Plan Provisions

Forms of payment	A participant may elect to receive his benefit on a straight-life, 100% Joint and Survivor, 75% Joint and Survivor, 50% Joint and Survivor basis, 180 months certain and continuous, 120 months certain and continuous, 60 months certain and continuous, or a lump sum. Unless otherwise elected, any benefit payable under the Plan shall be paid: a) on a 50% Joint and Survivor basis, if the employee has been married to his current spouse for at least one year; or b) on a straight-life basis otherwise, with the further provision that any benefits payable under (a) above shall be actuarially equivalent to a straight-life benefit.
Death benefit	The beneficiary of a participant who dies while receiving a normal, early, or disability retirement benefit shall be entitled to receive a lump sum death benefit of \$5,000, if retired after January 1, 1971.
Pension increases	None
Plan participants' contributions	None
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

Effective December 31, 2020, benefit accruals under the Plan are frozen and the accrued benefit for all participants shall be determined as of such date, with no increases thereafter. The plan freeze is reflected in the results presented in this report.

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Schedule SB, Line 26

Schedule of Active Participant Data as of January 1, 2021

Number and average annual frozen benefit distributed by attained age and attained years of credited service

Attained Age	Attained Years of Credited Service ¹													Total
	0	1	2	3	4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25-29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
30-34	0	0	0	0	0	0	4	0	0	0	0	0	0	4
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
35-39	0	0	0	0	1	7	64	35	1	0	0	0	0	108
	-	-	-	-	-	-	8,723	8,621	-	-	-	-	-	8,177
40-44	0	0	1	1	0	12	47	79	18	1	0	0	0	159
	-	-	-	-	-	-	10,502	10,919	-	-	-	-	-	10,608
45-49	0	0	1	1	0	7	34	64	37	6	2	0	0	152
	-	-	-	-	-	-	10,246	13,428	14,539	-	-	-	-	12,542
50-54	0	1	0	1	1	12	19	62	45	37	22	2	0	202
	-	-	-	-	-	-	-	13,268	18,960	23,762	23,109	-	-	16,735
55-59	0	2	0	0	2	7	28	58	43	32	43	17	2	234
	-	-	-	-	-	-	7,858	18,401	19,341	21,346	24,523	-	-	18,379
60-64	0	1	0	2	0	9	20	48	33	20	35	31	20	219
	-	-	-	-	-	-	8,404	14,369	23,019	22,343	25,240	31,777	27,666	20,610
65-69	0	0	0	0	0	2	4	17	10	1	6	3	6	49
	-	-	-	-	-	-	-	-	-	-	-	-	-	22,962
70 & over	2	0	0	0	0	0	2	0	2	1	0	1	3	11
	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	2	4	2	5	4	56	222	363	189	98	108	54	31	1,138
	-	-	-	-	-	4,515	9,732	13,560	18,300	21,618	23,905	28,534	33,684	15,901

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

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Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2021

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

Age of Retirement (A)	Rates of Retirement (B)	% of Retiring (C)	Weighted Ages (A) * (C)
55	0.030	0.030000	1.650000
56	0.030	0.029100	1.629600
57	0.030	0.028227	1.608939
58	0.030	0.027380	1.588051
59	0.050	0.044265	2.611614
60	0.050	0.042051	2.523085
61	0.050	0.039949	2.436879
62	0.125	0.094878	5.882466
63	0.125	0.083019	5.230177
64	0.125	0.072641	4.649046
65	0.250	0.127122	8.262953
66	0.400	0.152547	10.068090
67	0.300	0.068646	4.599287
68	0.300	0.048052	3.267553
69	0.300	0.033637	2.320924
70	0.300	0.023546	1.648192
71	0.300	0.016482	1.170216
72	1.000	0.038458	2.768963

Weighted Retirement Age: 63.916035

Average Retirement Age: 64

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