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

2022

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] 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
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1969

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

500 W. BERKELEY STREET
UNIONTOWN, PA 15401-5596

2b Employer Identification Number (EIN) 25-0965588

2c Plan Sponsor's telephone number 724-430-5290

2d Business code (see instructions) 622000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	04/15/2024	MARY KATE BARTLEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/15/2024	MARY KATE BARTLEY
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

EXECUTIVE COUNCIL C/O UNIONTOWN HOSPITAL

500 WEST BERKELEY STREET
UNIONTOWN, PA 15401

3b Administrator's EIN: 51-0629244

3c Administrator's telephone number: 724-430-5290

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**	1069
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)**	203
a(2) Total number of active participants at the end of the plan year	**6a(2)**	183
b Retired or separated participants receiving benefits	**6b**	623
c Other retired or separated participants entitled to future benefits	**6c**	174
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	980
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	69
f Total. Add lines **6d** and **6e**	**6f**	1049
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1C 1I 3H

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 2022 Form M-1 annual report. If the plan was not required to file the 2022 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

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

▶ **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
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

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

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

Part I Basic Information

1 Enter the valuation date: Month 07 Day 01 Year 2022

2 Assets:

a Market value	**2a**	47247712
b Actuarial value	**2b**	51972483

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	683	38264118	38264118
b For terminated vested participants	183	6985236	6985236
c For active participants	203	8139096	8210166
d Total	1069	53388450	53459520

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**	5.34 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	612000
c Total (line 6a + line 6b)	**6c**	612000

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary — Date: 04/03/2024

DAVID WEAVER — Type or print name of actuary

23-07592 — Most recent enrollment number

ACRISURE — Firm name

412-394-9992 — Telephone number (including area code)

FOUR GATEWAY CENTER, SUITE 605
PITTSBURGH, PA 15222

Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of -12.28 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		445091
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.50 %		24480
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		469571
	d Portion of (c) to be added to prefunding balance		469571
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	469571

Part III Funding Percentages

14	Funding target attainment percentage	14	96.34 %
15	Adjusted funding target attainment percentage	15	96.34 %
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	109.51 %
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
07/15/2022	152667	0			
03/11/2024	186728	0			
			Totals ► 18(b)	339395	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date.	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	323340

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

	1st segment:	2nd segment:	3rd segment:	
a Segment rates:	4.75 %	5.18 %	5.92 %	☐ 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 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? 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**	612000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	1956608	180813
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**	792813

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	469571	469571

36 Additional cash requirement (line 34 minus line 35)	**36**	323242
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	323340

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

a Total (excess, if any, of line 37 over line 36)	**38a**	98
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 the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☒ 2020 ☐ 2021

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2022** **This Form is Open to Public Inspection.**

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

ALLIANCE BERNSTEIN, LP

13-4064930

(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 51 52	NONE	179496	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

COWDEN ASSOCIATES, INC

FOUR GATEWAY CENTER, SUITE 605
PITTSBURGH, PA 15222-1222

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	36300	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PNC BANK

25-1211909

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50 52 62 68	NONE	59599	Yes [ ] No [X]	Yes [ ] No [ ]	0	Yes [ ] No [ ]

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

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

GALLAGHER BENEFIT SERVICES, INC

36-4291971

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	11000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

RAYMOND JAMES FIANCIAL SERVICES ADV

59-1517485

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	30990	Yes [ ] No [X]	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:	**b** EIN:
c Position:	
d Address:	**e** Telephone:

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan 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

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: BERNSTEIN GLOBAL STYLE BLEND

b Name of sponsor of entity listed in (a): ALLIANCE BERNSTEIN

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
83-0438675-010	C	29901929

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

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	0	110403
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		186728
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	73674	86536
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1102853	1119526
(2) U.S. Government securities	1c(2)	15285703	10986989
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	3424489	4239129
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		0
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	27360993	29901929
(10) Value of interest in pooled separate accounts	1c(10)		0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		0
(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)		0
(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	47247712	46631240
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	61439	60228
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	61439	60228
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	47186273	46571012

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	339395	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		339395
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	11518	
(B) U.S. Government securities	2b(1)(B)	327964	
(C) Corporate debt instruments	2b(1)(C)	151412	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		490894
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	48349246	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	48437096	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-87850
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	-328803	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-328803

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		4174849
(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		28341
d Total income. Add all **income** amounts in column (b) and enter total	2d		4616826
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4379606	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		4379606
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)	95899	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	221486	
(4) Other	2i(4)	535096	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		852481
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		5232087
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-615261
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) [X] 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) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

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

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c 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 497781.

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

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

Part I Distributions

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

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

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 25-1211909

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** 12

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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**	

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: 61.0 % Investment-Grade Debt: 39.0 % High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

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_____

Retirement Plan for Employees of The Uniontown Hospital EIN 25-0965588 PN 001

Independent Auditor's Report and Financial Statements

June 30, 2023 and 2022

Retirement Plan for Employees of The Uniontown Hospital

June 30, 2023 and 2022

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FORVIS

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Independent Auditor's Report

Plan Administrator
Retirement Plan for Employees of The Uniontown Hospital
Uniontown, Pennsylvania

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Retirement Plan for Employees of The Uniontown Hospital, an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974* (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of June 30, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Retirement Plan for Employees of The Uniontown Hospital's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of June 30, 2023 and 2022, and for the years then ended, stating that the certified investment information, as described in *Note 4* to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

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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 Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Retirement Plan for Employees of The Uniontown Hospital 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 ERISA Section 103(a)(3)(C) 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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 Retirement Plan for Employees of The Uniontown Hospital's ability to continue as a going concern within one year after the date that these 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.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, 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 control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the 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 control 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 Retirement Plan for Employees of The Uniontown Hospital'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 Retirement Plan for Employees of The Uniontown Hospital's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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 Matters – Supplemental Schedules Required by ERISA

The supplemental schedules listed in the table of contents 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 included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to 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. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

FORVIS, LLP

Springfield, Missouri
April 15, 2024

Federal Employer Identification Number: 44-0160260

Retirement Plan for Employees of The Uniontown Hospital

Statements of Net Assets Available for Benefits

June 30, 2023 and 2022

Assets

	2023	2022
Investments, At Fair Value		
U.S. government and agency securities	$ 10,986,989	$ 15,285,703
Corporate and other bonds and notes	4,239,129	3,424,489
Collective investment trusts	29,901,929	27,360,993
Cash equivalents	1,119,526	1,102,853
	46,247,573	47,174,038
Receivables		
Employer's contribution	186,728	-
Accrued interest and dividends receivable	86,536	73,674
	273,264	73,674
Noninterest-Bearing Cash	110,403	-
Total assets	46,631,240	47,247,712

Liabilities

Accrued Expenses Payable	60,228	61,439
Net Assets Available for Benefits	$ 46,571,012	$ 47,186,273

Retirement Plan for Employees of The Uniontown Hospital

Statements of Changes in Net Assets Available for Benefits

Years Ended June 30, 2023 and 2022

	2023	2022
Investment Income (Loss)		
Net appreciation (depreciation) in fair value of investments	$ 3,758,196	$ (7,092,238)
Interest and dividends	490,894	367,021
Other	28,341	42,146
Net investment income (loss)	4,277,431	(6,683,071)
Employer Contributions	339,395	458,001
Total additions, net of investment loss	4,616,826	(6,225,070)
Deductions		
Benefits paid directly to participants	4,379,606	5,244,606
Administrative expenses	852,481	921,468
Total deductions	5,232,087	6,166,074
Net Decrease	(615,261)	(12,391,144)
Net Assets Available for Benefits, Beginning of Year	47,186,273	59,577,417
Net Assets Available for Benefits, End of Year	$ 46,571,012	$ 47,186,273

Retirement Plan for Employees of The Uniontown Hospital

Notes to Financial Statements

June 30, 2023 and 2022

Note 1: Description of the Plan

General

The following description of the Retirement Plan for Employees of The Uniontown Hospital (Plan) provides only general information. Additional information about the vesting and benefit provisions and the Pension Benefit Guarantee Corporation's (PBGC) benefit guarantee is contained in the plan document and *Summary Plan Description*, which are available from the plan administrator.

The Plan is a noncontributory defined benefit plan that covers substantially all employees of Uniontown Hospital and Fayette Regional Health System (collectively, "Health System") and provides for retirement, death, and disability benefits. Prior to June 1, 2013, Fayette Home Care (FHC) was also a participating employer. Effective May 31, 2013, FHC was consolidated into an unrelated third party and FHC employees became inactive participants in the Plan.

The Plan is subject to provisions of the *Employee Retirement Income Security Act of 1974* (ERISA). PNC Bank, N.A. (PNC) is the trustee of the Plan.

Effective December 31, 2020, Fayette Regional Health System merged into Uniontown Hospital. Effective January 1, 2021, West Virginia University Hospitals, Inc. became the sole corporate member of Uniontown Hospital.

Contributions

The Health System contributes such amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to plan members or their beneficiaries and to fund prior service costs (the estimated liability for accrued benefits arising from qualifying service before establishment of the Plan) over periods as permitted by ERISA and the Internal Revenue Code (Code). The Plan has met the minimum funding requirements established by the federal government.

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

Pension Benefits

Employees are eligible for plan participation when credited with at least 1,000 hours of service and one consecutive year of service. The Health System determined that participation in the Plan was to be frozen as of June 30, 2006, so that no new participants would be admitted to the Plan after such date.

Effective July 1, 1993, the Plan was transformed into a cash balance plan with active participants being credited with an opening balance based upon their compensation and years of service. Under the cash balance plan, each employee's individual retirement benefit is defined in the Plan's obligation as a notional cash balance retirement.

Beginning with the plan year ended June 30, 1994, the cash balance accounts earn an interest credit at the end of each plan year based upon the average interest rate on Treasury Bills during the months of March, April, and May immediately preceding the beginning of such plan year plus one percentage point, except that the applicable percentage shall never be less than 3 percent or more than 10 percent. Additionally, beginning with the plan year ended June 30, 1994, the cash balance of each participant who is an active employee as of the end of the plan year (or who retired or died during the year) receives a compensation credit based upon the participant's plan compensation multiplied by a percentage ranging from 4 percent to 6 percent based upon attained age. The pension benefit to which participants are entitled is based upon their cash balance at their benefit commencement date multiplied by a factor based upon their age at that time.

Effective July 1, 2006, the Health System adopted The Uniontown Hospital Employee Controlled Retirement Account Plan (ECRA Plan) as an alternative to the Plan. All existing employees were required to make a one-time, irrevocable election to remain in the Plan and continue to accrue benefits under the Plan or to waive further accrual of benefits under the Plan and transfer to the ECRA Plan for all accrual of benefits subsequent to that date. For plan participants who elected to become ECRA Plan participants, annual interest credits continued to apply but compensation credits were no longer earned.

Additionally, effective July 1, 2009, any participant as of June 30, 2009, who was an employee on June 30, 2009, was permitted to make a one-time, irrevocable election before July 1, 2009, to waive further accrual of benefits under the Plan and transfer to the ECRA Plan for all accrual of benefits on or after July 1, 2009.

Effective June 23, 2012, the Plan was amended to freeze the accrued benefits such that no compensation credits will be made for plan years after June 30, 2012. Any participants who had been accruing compensation benefits under this plan up through June 23, 2012, started accruing benefits under the Health System's ECRA Plan thereafter. For plan years after June 30, 2012, the interest on the cash balances will continue and will never decrease.

The Plan provides for alternative forms of payment for retirement benefits. The basic form provides for monthly income continuing for the life of the participant. The qualified joint and survivor annuity provides for monthly income payable for the lifetime of the participant and continues at 50 percent of the monthly income to the participant's spouse for life. The contingent annuitant option provides for monthly income payable for the lifetime of the participant and continuing thereafter in the amount of 50 percent or 100 percent to a beneficiary designated by the participant for the beneficiary's life. The benefits are subject to certain limitations relating to life expectancy. If the value of the cash balance account is less than or equal to $5,000, it will be paid in a lump sum.

Effective July 1, 2008, the Plan was amended to change the normal form of payment for married participants from 50 percent joint and survivor annuity to 100 percent joint and survivor annuity. The Plan has retained the 50 percent joint and survivor annuity as an additional option.

Effective July 1, 2015, the Plan was amended to allow certain participants who terminate employment with the Health System to elect to receive a single-sum distribution equal to the present value of the benefits to which the participants are entitled from the Plan.

Death Benefits

The Plan provides a death benefit for beneficiaries of vested plan participants who die before their pension benefits commence equal to their cash balance under the Plan.

Vesting

As required by the Pension Protection Act of 2006, vesting requirements changed from five years to three years for participants with at least one hour of service on or after July 1, 2008. Participants with at least one hour of service on or after July 1, 2008, are fully vested upon reaching three years of vesting service as defined by the Plan. If such participants earned less than three years of service, they are not entitled to any accrued benefit. Participants who do not have at least one hour of service on or after July 1, 2008, are fully vested if they completed five years of vesting service.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See *Note 8* for a discussion of fair value measurements.

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

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

Accumulated Plan Benefits

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

a. Retired or terminated employees or their beneficiaries

b. Beneficiaries of employees who have died

c. Present employees or their beneficiaries

Benefits payable under all circumstances—retirement, death, disability, and termination of employment—are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

Note 3: Plan Termination

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

a. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.

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

c. Vested benefits not insured by the PBGC.

d. All nonvested benefits.

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

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

Note 4: Certification of Plan Trustee

The plan administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, PNC, a qualified institution, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate:

- Investments as shown in the statements of net assets available for benefits as of June 30, 2023 and 2022.
- Investment income (loss) included in the statements of changes in net assets available for benefits for the years ended June 30, 2023 and 2022.
- Investment information included in the accompanying schedule of assets (held at end of year) as of June 30, 2023, and schedule of reportable transactions for the year ended June 30, 2023.

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

Note 5: Accumulated Plan Benefits

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

The accumulated plan benefit information as of the end of each plan year (calculated by the Plan's actuary as of July 1, 2023 and 2022) was as follows:

	2023	2022
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	$ 35,900,839	$ 35,826,033
Other participants	13,039,839	14,319,127
	48,940,678	50,145,160
Nonvested benefits	46,489	80,711
Total actuarial present value of accumulated plan benefits	$ 48,987,167	$ 50,225,871

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

	2023	2022
Actuarial present value of accumulated plan benefits, beginning of year	$ 50,225,871	$ 51,740,390
Increase (decrease) during the year attributable to		
Change in actuarial assumptions	-	957,151
Increase for interest due to the decrease in the discount period	2,884,078	2,949,377
Actuarial (gains) losses	256,824	(176,441)
Benefits paid	(4,379,606)	(5,244,606)
Net decrease	(1,238,704)	(1,514,519)
Actuarial present value of accumulated plan benefits, end of year	$ 48,987,167	$ 50,225,871

Significant assumptions underlying the actuarial computations are:

- Mortality basis: PRI-2012 mortality reflecting the total dataset with Scale MP-2021 mortality improvement for 2023 and 2022.
- Discount rate: 6.00 percent for 2023 and 2022.
- Average retirement age: Age 63.
- Cash balance interest crediting rate: 3.00 percent.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of July 1, 2023 and 2022. Had the valuations been performed as of June 30, there would be no material differences.

Note 6: Experience Dividend

The Plan was previously funded through a group annuity contract issued by Aetna Life Insurance Company (Aetna). When that contract was discontinued in November 1986, the assets were applied to the purchase of paid-up annuities guaranteed by Aetna for the full benefits of all participants then in pay status and the remainder of the assets was transferred to the new trustee. The discontinued group annuity contract provided that Aetna has the right to declare experience credits, payable in cash. Experience credits included in other income for the years ended June 30, 2023 and 2022, were $28,242 and $41,219, respectively.

Note 7: Party-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50 percent or more of such an employer, or employee association or relatives of such persons.

The Plan's investments are held by PNC, the trustee of the Plan. The Plan paid direct fees of $59,599 and $64,138 to PNC for trust department services performed for the years ended June 30, 2023 and 2022, respectively. Investment management services are provided by Alliance Bernstein to whom the Plan paid direct fees of $179,496 and $204,694 for the years ended June 30, 2023 and 2022, respectively.

The Health System provides certain administrative services at no cost to the Plan including audit and legal fees.

Note 8: Disclosures About Fair Value of Plan Assets

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

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

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

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

Recurring Measurements

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2023 and 2022.

Cash equivalents consist of money market funds valued at cost, which approximates fair value, and U.S. Treasury bills and agency notes that mature within three months of year-end and are stated at fair value which approximates maturity value.

Marketable securities are stated at fair value. Securities and U.S. Treasury notes traded on a national securities exchange are valued at the last reported sales price on the last business day of the plan year.

For certain investments consisting of U.S. government agency bonds, corporate bonds, and notes that do not have an established fair value, fair value is based on yields currently available on comparable securities of issuers with similar credit ratings. Mortgage-backed securities have been valued on the basis of their future principal and interest payments discounted at prevailing interest rates for similar instruments.

Collective investment trusts are valued at the net asset value (NAV) of shares held by the Plan at year-end, as reported by the trusts' custodial trustee, as a practical expedient.

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at June 30, 2023 and 2022:

		2023 Fair Value Measurements Using		
	Fair Value	Level 1	Level 2	Level 3
U.S. Treasury notes	$ 8,519,534	$ 8,519,534	$ -	$ -
U.S. government agency bonds	2,467,455	-	2,467,455	-
Corporate and other bonds and notes	4,239,129	-	4,239,129	-
Cash equivalents				
U.S. Treasury bills and agency notes	1,119,526	-	1,119,526	-
Investments at fair value	16,345,644	$ 8,519,534	$ 7,826,110	$ -
Investments measured at net asset value (A)	29,901,929			
	$ 46,247,573			

		2022 Fair Value Measurements Using		
	Fair Value	Level 1	Level 2	Level 3
U.S. Treasury notes	$ 12,356,535	$ 12,356,535	$ -	$ -
U.S. government agency bonds	2,929,168	-	2,929,168	-
Corporate and other bonds and notes	3,424,489	-	3,424,489	-
Cash equivalents				
Money market fund	481,854	481,854	-	-
U.S. Treasury bills and agency notes	620,999	620,999	-	-
Investments at fair value	19,813,045	$ 13,459,388	$ 6,353,657	$ -
Investments measured at net asset value (A)	27,360,993			
	$ 47,174,038			

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

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended June 30, 2023 and 2022. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections, and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy.

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following tables summarize investments for which fair value is measured using the net asset per share practical expedient as of June 30, 2023 and 2022. The Plan has the ability to liquidate this investment at any time in accordance with provisions of the trust agreements. This fund files a Department of Labor Form 5500 as a direct filing entity.

	Fair Value at 6/30/23	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective Investment Trust Fund	$ 29,901,929	$ -	Daily	1 day

	Fair Value at 6/30/22	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective Investment Trust Fund	$ 27,360,993	$ -	Daily	1 day

Note 9: Plan Tax Status

The Plan obtained its latest determination letter on March 14, 2014, in which the Internal Revenue Service (IRS) stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code and therefore not subject to tax. The Plan has been amended since receiving the determination letter and was restated effective July 1, 2018, to operate under a volume submitter plan document sponsored by Houston Harbaugh PC. This volume submitter plan document has been filed with the appropriate agency and has obtained an opinion letter dated March 30, 2018, from the IRS stating that the form of the plan is acceptable. Therefore, the plan administrator believes that the Plan and related trust are currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 10: Risks and Uncertainties

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

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

Note 11: Subsequent Events

Subsequent events have been evaluated through April 15, 2024, which is the date the financial statements were available to be issued.

Plan Amendment and Change in Plan Trustee

Effective January 2, 2024, the Plan was amended in connection with the transfer of the Plan's assets to a master trust entered into with Delaware Charter Guarantee & Trust Company, d/b/a Principal Trust Company. Substantially all of the Plan's investments were liquidated and subsequently invested in the West Virginia United Health System, Inc. Master Trust during January 2024, which resulted in the Plan changing its trustee to Principal Trust Company.

Supplemental Schedules

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to the 2022 Form 5500 - Schedule SB, line 26a - Schedule of Active Participant Data

Years of Credited Service											
Attained Age	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	Total
< 20	0	0	0	0	0	0	0	0	0	0	0
20-24	0	0	0	0	0	0	0	0	0	0	0
25-30	0	0	0	0	0	0	0	0	0	0	0
30-35	0	0	0	0	0	0	0	0	0	0	0
35-40	0	0	0	0	2	1	0	0	0	0	3
40-45	0	0	0	0	5	4	0	0	0	0	9
45-50	0	0	0	0	5	14	6	1	0	0	26
50-55	0	0	0	0	7	14	14	9	3	0	47
55-60	0	0	0	0	9	7	3	15	9	3	46
60-65	0	0	0	0	5	4	7	7	9	26	58
65-70	0	0	0	0	3	1	3	1	2	2	12
70+	0	0	0	0	0	0	0	1	0	1	2
Total	0	0	0	0	36	45	33	34	23	32	203

Plan Provisions

The following is a summary of the major provisions of the plan as of July 1, 2022. Please refer to the plan document for a more complete description of the most recent plan provisions.

General Information

- Plan Year: July 1 to June 30
- Restated Effective: October 16, 2013
- Most Recent Amendment: Effective July 27, 2015

Covered Employees:

- Non-Bargaining employees of Uniontown Hospital, Fayette Regional Health Center and Fayette Home Care hired prior to July 1, 2006, and:
- Bargaining employees electing to be covered under the Plan by collective bargaining agreement
- No new participants are admitted to the Plan after June 23, 2012

Participation Date (only if eligible prior to June 23, 2012):

- Rolling July 1 or January 1 if 1,000 hours of service completed in first 12 months after hire. If participation is not met in the year of hire, July 1 after the first plan year with 1,000 hours of service.

Plan Benefit Eligibility Provisions

- Normal Retirement: The first day of the month coincident with or next following age 65 and 5 years from date of participation.
- Early Retirement: Before Normal Retirement but after completion of 3-years of vesting service *and* attainment of age 55.
- Late Retirement: Any retirement date after a Participant's Normal Retirement Date.
- Deferred Vested Retirement: Termination of employment after completion of 3 years of vesting service prior to attainment of Normal Retirement or Early Retirement eligibility, except benefits are deferred to early retirement if not paid within 90 days after termination of employment.
- Preretirement Death: Death after attainment of 3 years of vesting service and prior to election to commence benefits under any of the above eligibility provisions.

Plan Provisions (continued)

Plan Benefit Payment Forms

- Normal Form of Benefits: An Annuity equal to the account balance at commencement divided by an annuity factor based on 1983 GAM Male Mortality set back 4 years with an interest rate of 7%. For married participants, this form is converted to Joint and 100% survivor unless a participant's spouse consents to another optional form.

- Optional Lump Sum: Participants may elect a lump sum payment in the amount of their account balance at commencement if they commence benefits within 90 days of termination of employment. Otherwise, terminating employees must wait until early retirement eligibility to commence an annuity form of payment only.

- Pre-Retirement Death Benefit: Immediate Lump Sum unless survivor elects otherwise.

Plan Benefit amounts

- Accrued Benefit: an opening account balance based on the value of the prior plan benefit at June 30, 1993, and including interest credits and end-of year annual additions prior to the earlier of June 23, 2012 or the date employees elected to participate in the ECRA.
  Interest credits continue after the cessation of annual additions.

  The schedule of annual additions before cessation was based on plan compensation under the following schedule:

  Age Less than 35: 4% of annual plan compensation
  Age 35-49: 5% of annual plan compensation
  Age 50+: 6% of annual plan compensation

  Plan compensation is generally total compensation with minor exceptions.

  Interest Credits: 90-Day Treasury Bill Average Rate for the months of March through May preceding the plan year, plus one percent. The interest credit is subject to a minimum of 3.0% and a maximum of 10%.

  Vesting Service: One year for the initial year of hire, and then one year for each calendar year where a participant completes 400 or more hours of service. Vesting Service is excluded for Fayette Home Care service prior to January 1, 1982.

Miscellaneous

- Changes since prior valuation: None.
- Maximum Benefits: Benefits may not exceed IRS Section 415 limits.

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to the 2022 Form 5500
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions

Actuarial Methods and Assumptions

As of July 1, 2022

Mortality for Minimum and Maximum Funding: 2022 IRS Static Mortality Table

Mortality for Present Value of Accumulated Benefits: PRI-2012 mortality reflecting the total dataset with SOA Scale MP-2021 Mortality Improvement. *(For the prior year, SOA Scale MP-2020 Mortality Improvement was used)*.

Summary of Rates Used

	Current Year		Prior Year	
Minimum/Maximum Funding	Minimum*	Maximum	Minimum*	Maximum
First Segment Rate	4.75%	0.85%	4.75%	1.54%
Second Segment Rate	5.18%	2.64%	5.36%	2.89%
Third Segment Rate	5.92%	3.28%	6.11%	3.55%
Lookback Month	March	March	March	March
Present Value of Accrued Benefits	6.00%		6.00%	

** ARPA rates for 2020+*

Selected Assumptions: Rates at selected ages are follows:

Age	Termination	Disability
25	13.78%	0.000%
30	12.66%	0.071%
35	10.96%	0.099%
40	9.00%	0.162%
45	6.75%	0.270%
50	4.05%	0.493%
55	1.38%	0.000%
60	0.13%	0.000%
65	0.00%	0.000%

Payment Form Election:

- Retirement Eligible Active Participants: 50% immediate annuity, 50% immediate Lump Sum
- Disability: 100% annuity at Normal Retirement Date
- Pre-Retirement Death: Immediate Lump Sum Upon Death
- Termination: 15% annuity at Normal Retirement, 85% immediate lump sum

Actuarial Methods and Assumptions (continued)

Marital Status: 85% Married, female spouse 3 years younger than male.

Inflation: 2.50% per year

Future Balance Increase: 4.5% *(3.0% in the prior year).*

Retirement Rates

Age	Rates
<58	0.00%
58	5.00%
59	5.00%
60	5.00%
61	5.00%
62	30.00%
63	10.00%
64	10.00%
65+	100.00%

Expenses: Prior Year administrative expenses rounded to the nearest thousand adjusted by removing the prior year PBGC Premium and including the estimated current year PBGC Premium.

Asset Valuation Method: The smoothed value method provided in IRS Notice 2009-22 measured at the valuation date, and the immediately preceding valuation date with phase-in (fair market value) elected beginning with the 2021 plan year.

Data: The valuation results are based upon participant census and financial data provided by the plan sponsor and trustee. The data was tested for reasonableness and consistency with the prior valuation.

Actuarial Cost Method: Projected Unit Credit

A method under which the projected benefits of each individual included in an actuarial valuation are allocated by a consistent formula to valuation years. The actuarial present value of benefits allocated to a valuation year is the normal cost. The actuarial present value of benefits allocated to all periods prior to a valuation year is called actuarial accrued liability. Under this method, the Actuarial Gains (losses), as they occur, generally reduce (increase) the unfunded Actuarial Accrued Liability.

Actuarial Methods and Assumptions (continued)

Significant Benefits Not Recognized: None

As required by Section 404(l) of the Internal Revenue Code, the current compensation used to determine retirement benefits for each participant has been limited to $305,000.

Prescribed Assumption or Method Set by Law or Legally Binding Authority:
Note that all references to the Pension Protection Act of 2006 (PPA) include subsequent amendments to that Act, and associated regulations.

- Mortality for Healthy Lives – Minimum/Maximum Funding*
- Mortality Improvement – Minimum/Maximum Funding*
- Interest Rate – Minimum Funding (including lookback month)*
- Interest Rate – Maximum Funding (including lookback month)*
- Expenses (explicit assumption required by PPA)
- Asset Valuation Method
- Funding Method (required by PPA)

*Default under the Pension Protection Act (PPA) of 2006 unless the plan sponsor made a written election of a permitted alternative.

Prescribed Assumption or Method Set by Another Party:

- Mortality and Mortality Improvement – ASC 960 (selected by the plan sponsor)
- Interest Rate – ASC 960 (selected by the plan sponsor)
- ARPA amortization election – to be effective 7/1/2020 (selected by plan sponsor)

Models Used
Cowden Associates uses a third-party actuarial software package for pension valuation work.

This software package is used worldwide by many actuarial and investment firms. The software models future benefit cash flows, present values, and attribution to various periods, based on deterministic or stochastic assumption sets and benefit parameters provided by the user. The model is highly flexible and also supports comparisons between periods, maintenance of plan specific participant databases, and preparation of reports under various accounting and regulatory structures.

In the absence of adequate review, the model's complexity and flexibility could lead to unintentional results. However, the model contains robust tools to test and verify the reasonableness of results. Our internal technical review utilizes these tools.

We have reviewed the model's documentation and have relied on the expertise of the software vendor for the underlying structure, methodology, and extensive supporting calculations. We have not performed a substantial audit of the model or its structure beyond typical use in preparing results, as this is typically not done by plan actuaries. However, we expect that the very deep market of qualified users for this same model ensures that no materially significant issues can or will persist.

2022 Non-Prescribed Assumption Changes

For 2022, the assumed future interest credited to cash balances was changed to 4.5% from 3.0% in the previous valuation.

This change was made to reflect the rising interest rates in 2022 vs. the prior year. The new assumption is based on the treasury yield curve and information that it provides to estimate future short -term risk-free rates.

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to 2022 Form 5500
Schedule SB, line 32 - Schedule of Amortization Bases

No.	Type of Base	Present Value of Remaining Installments	Valuation Date Base Established	Years Remaining in Amortization Period	Amortization Installment
1	Shortfall	1,956,608	7/1/2022	15	180,813
Total		1,956,608			180,813

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to 2022 Form 5500
Schedule SB, Line 26b - Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants & Beneficiaries Receiving Payments
2022	1,046,249	167,327	3,761,841
2023	688,345	208,721	3,674,304
2024	647,183	253,507	3,579,461
2025	654,056	316,178	3,477,549
2026	552,894	379,712	3,368,922
2027	565,733	412,242	3,254,014
2028	544,913	451,765	3,133,354
2029	441,198	469,776	3,007,571
2030	572,357	496,807	2,877,351
2031	464,091	521,893	2,743,415
2032	477,141	533,573	2,606,529
2033	573,431	565,039	2,467,411
2034	469,754	577,800	2,326,723
2035	482,214	568,492	2,185,100
2036	441,849	590,355	2,043,133
2037	463,138	594,521	1,901,386
2038	424,961	594,819	1,760,462
2039	419,323	581,384	1,621,037
2040	391,669	573,819	1,483,878
2041	358,901	562,280	1,349,841
2042	378,661	551,079	1,219,845
2043	338,176	535,900	1,094,820
2044	320,431	517,074	975,691
2045	313,695	498,070	863,333
2046	299,217	476,770	758,520
2047	278,789	456,372	661,880
2048	265,464	433,684	573,841
2049	244,087	405,742	494,618
2050	227,030	377,424	424,208
2051	209,816	349,019	362,392
2052	192,632	320,828	308,758
2053	175,671	293,146	262,742
2054	159,114	266,249	223,664
2055	143,131	240,382	190,778
2056	127,864	215,751	163,309
2057	113,429	192,519	140,491
2058	99,912	172,902	121,595
2059	87,374	152,765	105,952
2060	75,849	134,260	92,970
2061	65,353	117,388	82,137
2062	55,878	102,117	73,021
2063	47,401	88,389	65,268
2064	39,883	76,131	58,593
2065	33,272	65,250	52,775
2066	27,513	55,648	47,643
2067	22,543	47,222	43,067
2068	18,296	39,864	38,952
2069	14,702	33,470	35,224
2070	11,694	27,943	31,826
2071	9,202	23,191	28,717

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to the 2022 Form 5500 - Schedule SB, line 22 - Weighted Average Retirement Age

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
58	94.82	0.05	4.74	274.74
59	102.92	0.05	5.14	303.33
60	109.59	0.05	5.47	328.40
61	113.88	0.05	5.69	346.91
62	122.92	0.30	36.83	2,283.29
63	96.81	0.10	9.67	609.04
64	96.88	0.10	9.67	619.00
65	94.90	1.00	94.90	6,168.77
66	5.00	1.00	5.00	330.00
67	3.00	1.00	3.00	201.00
68	1.00	1.00	1.00	68.00
69	1.00	1.00	1.00	69.00
70	1.00	1.00	1.00	70.00
71	1.00	1.00	1.00	71.00
Total			184.11	11,742.47
Average				**63.78**

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to the 2022 Form 5500 - Schedule SB, line 22 - Weighted Average Retirement Age

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Valuation Set Exhibits - U.S. Qualified Pension

Name: 2022 Valuation - 1 year average AVA after phase in - PFB established
Client: Uniontown Hospital
Date created: February 6, 2023 9:58 AM

Run Date: January 2, 2024 11:31 AM
Version: 3.19 Dec 19, 2023

Valuations Included in Baseline Gain or Loss Event:
FA 2022 Valuation - 1 - Baseline (2/09/2023 5:51 PM)
------ Event: ASC 960 int cred - new seg rates ----------

Type: Assumption Change

Included Valuation(s):
FA 2022 Valuation - 4 -new mort - ARPA Rates - 4.5% CB rate (12/25/2023 12:08 PM)

Rounding: $1

---------- WARNINGS ----------
The PPA funding segmented interest rate valuation assumption of
0.0475/0.0536/0.0611 is not the same as any of the IRS stabilized
segment rates published for March 2022 through July 2022.

The PPA max tax segmented interest rate valuation assumption of
0.0154/0.0289/0.0355 is not the same as any of the IRS non-stabilized
segment rates published for March 2022 through July 2022.

Retirement Plan for Employees of Uniontown Hospital
EIN/PN: 25-0965588/001
Attachment to the 2022 Form 5500 - Schedule SB, line 22 - Weighted Average Retirement Age

The PPA PBGC segmented interest rate valuation assumption of 0.0063/0.027/0.0332 is not equal to the published PBGC segment rates of 0.0364/0.048/0.0478.

The accounting measurement and amortization schedule dates differ.

Net amount recognized and associated prior year values are not in balance. For details, see the Balance Sheet exhibit.

Reports selected:
Weighted Average Retirement Age

Weighted Average Retirement Age

(1) Ag	(2) Expecte	(3) Retirem	(4) Expecte	(5) Weighted Age (1)*(4)
58	94.8205	0.05	4.7369	274.7415
59	102.9236	0.05	5.1412	303.3299
60	109.5876	0.0499	5.4733	328.4009
61	113.879	0.0499	5.687	346.9089
62	122.9221	0.2996	36.8272	2283.288
63	96.8149	0.0999	9.6672	609.0361
64	96.8769	0.0998	9.6719	618.9986
65	94.9041	1	94.9041	6168.768
66	5	1	5	330
67	3	1	3	201
68	1	1	1	68
69	1	1	1	69
70	1	1	1	70
71	1	1	1	71
Total			184.1089	11742.47
Average				63.78

Folder: O:\Uniontown
Project: <U.S. Qualified Pension> Version: 3.19 Dec 19, 2023

Remarks

ARPA of 2021

The American Rescue Plan Act (ARPA) of 2021 was signed into law on March 11, 2021. This bill is designed to provide further relief to single employer plans by extending the amortization period to 15 years (rather than the current seven-year schedule) for funding shortfalls. In addition, the already existing shortfall bases and installments are set to zero and recalculated under the new amortization period. ARPA also aims to reduce the funding target liability by increasing the segment beginning by option in 2020, and for all years 2022 and later regardless of election. For 2022, the new segment rates reflecting this bill are:

- First Segment Rate: 4.75%
- Second Segment Rate: 5.18%
- Third Segment Rate: 5.92%

WVU Medicine Uniontown Hospital has elected to apply the 15-year shortfall option for the 2020 plan year and later and to not defer use of the higher segment rates to a later year. This revised report reflects these elections. *Note that the legislation provides relief for minimum contribution and AFTAP purposes only. Maximum deductible calculations, minimum lump sum values and PBGC-related calculations are not modified by the relief provisions.*

Minimum Contribution

The minimum required contribution for the 2022 plan year is $323,242 as of July 1, 2022 if the prefunding balance is used to satisfy the 2022 minimum, or $792,813 if the prefunding balance is used to satisfy 2023 plan year quarterly requirements. The 2021 revised minimum required contribution was $0, prior to interest. The increase in the contribution is due to investment losses incurred since the prior plan year.

Quarterly Contributions

See Contributions section for information regarding required quarterly contributions for the 2022 and 2023 plan years (page 13).

Method Changes Since the Last Valuation

For the 2021 valuation, the method to calculate the Actuarial Value of Assets was changed from the 24-month average to the 12-month average described in IRS Notice 2009-22, using 12-month experience period recognizing the difference between actual and expected investment performance. This change was granted automatic approval under revenue Procedure 2017-56.

For 2021, this method was applied with phase in, resulting in an Actuarial Value of Assets equal to the market value of assets. Since the averaging period is only two determination dates, the method is fully phased in for 2022 and later. Since investment losses were substantial in 2022, the effect of the phased-in method is to increase actuarial asset values this year by approximately $4.7MM vs. the market asset value.

Retirement Plan for Employees of The Uniontown Hospital

EIN 25-0965588 PN 001

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

June 30, 2023

Identity of Issuer	Description of Investment	Cost	Current Value
Various	See attached	$ 34,014,456	$ 46,247,573

*Party in interest as defined by ERISA

Detail

Portfolio - principal

Cash and cash equivalents

Mutual funds - money market

Description	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERATED HERMES GOVT OBLIG PREM SHS #117	$481,854.29	$1.0000	0.01 %					$676.72

Other cash equivalents

Description	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
USA TREASURY BILLS DTD 10/06/2022 DUE 10/05/2023	390,000	$384,731.10 $98.6490	0.84 %	$373,250.90 $95.71	$11,480.20	5.19 %	$19,966.36	
USA TREASURY BILLS DTD 05/11/2023 DUE 11/09/2023	175,000	171,746.75 98.1410	0.38 %	170,664.87 97.52	1,081.88	5.29 %	9,078.84	
USA TREASURY BILLS DTD 04/11/2023 DUE 08/08/2023	226,300	225,139.08 99.4870	0.49 %	222,655.14 98.39	2,483.94	4.89 %	10,998.18	
USA TREASURY BILLS DTD 04/18/2023 DUE 08/15/2023	340,000	337,909.00 99.3850	0.74 %	334,477.75 98.38	3,431.25	4.96 %	16,728.00	
Total other cash equivalents		**$1,119,525.93**	**2.42 %**	**$1,101,048.66**	**$18,477.27**	**5.07 %**	**$56,771.38**	

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
AT&T INC SER * CALL 03/01/2031 02.750% DUE 06/01/2031 RATING: BAA2 (00206RJY9)	$4,317.55 5,000	$4,218.80 $84.3760	0.01 %	$5,289.40 $105.79	- $1,070.60	3.26 %	$137.50	$11.46
ADVANCE AUTO PARTS SER WI CALL 01/15/2030 03.900% DUE 04/15/2030 RATING: BAA2 (00751YAE6)	43,645.44 48,000	40,897.44 85.2030	0.09 %	53,271.07 110.98	- 12,373.63	4.58 %	1,872.00	395.20
ADVANCE AUTO PARTS CALL 12/15/2031 COGT 03.500% DUE 03/15/2032 RATING: BAA2 (00751YAG1)	1,715.26 2,000	1,599.26 79.9630	0.01 %	1,992.10 99.61	- 392.84	4.38 %	70.00	20.61
AERCAP IRELAND CAP/GLOBA SEDOL BFNJ8W6 ISIN US00774MAE57 03.875% DUE 01/23/2028 RATING: BAA2 (00774MAE5)	135,388.50 150,000	137,905.50 91.9370	0.30 %	160,954.50 107.30	- 23,049.00	4.22 %	5,812.50	2,551.04
AIR LEASE CORP CALL 01/01/2027 UNSC 03.625% DUE 04/01/2027 RATING: N/A (00912XAV6)	4,629.75 5,000	4,614.25 92.2850	0.01 %	5,301.45 106.03	- 687.20	3.93 %	181.25	45.31
AIR LEASE CORP CALL 07/01/2028 UNSC 04.625% DUE 10/01/2028 RATING: N/A (00912XBF0)	31,440.82 34,000	31,956.26 93.9890	0.07 %	38,528.27 113.32	- 6,572.01	4.93 %	1,572.50	393.12

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
AIR LEASE CORP SER MTN CALL 12/15/2025 02.875% DUE 01/15/2026 RATING: N/A (00914AAJ1)	3,671.60 4,000	3,700.16 92.5040	0.01 %	4,054.28 101.36	- 354.12	3.11 %	115.00	53.03
AIRCASTLE LTD SEDOL 2GXZ455 ISIN US00928QAS03 04.250% DUE 06/15/2026 RATING: BAA3 (00928QAS0)	37,004.80 40,000	37,670.40 94.1760	0.09 %	44,072.80 110.18	- 6,402.40	4.52 %	1,700.00	75.56
ALLEGHANY CORP CALL 02/15/2030 UNSC 03.625% DUE 05/15/2030 RATING: A1 (017175AE0)	46,783.00 50,000	46,414.00 92.8280	0.11 %	50,689.85 101.38	- 4,275.85	3.91 %	1,812.50	231.60
AMAZON.COM INC CALL 11/01/2027 UNSC 04.550% DUE 12/01/2027 RATING: A1 (023135CP9)	47,000	46,704.84 99.3720	0.11 %	46,972.74 99.94	- 267.90	4.58 %	2,138.50	178.21
AMERICAN EXPRESS CO CALL 01/13/2026 UNSC 04.900% DUE 02/13/2026 RATING: A2 (025816DC0)	29,000	28,702.17 98.9730	0.07 %	28,977.09 99.92	- 274.92	4.96 %	1,421.00	532.87
AMERICAN TOWER CORP CALL 03/15/2030 UNSC 02.100% DUE 06/15/2030 RATING: BAA3 (03027XBC3)	4,000	3,230.12 80.7530	0.01 %	3,256.92 81.42	- 26.80	2.61 %	84.00	3.73

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
AMERICAN TOWER CORP CALL 02/15/2027 UNSC 03.650% DUE 03/15/2027 RATING: BAA3 (03027XBV1)	19,942.23 21,000	19,659.15 93.6150	0.05 %	20,898.57 99.52	- 1,239.42	3.90 %	766.50	225.69
AMERICAN TOWER CORP CALL 12/15/2031 UNSC 04.050% DUE 03/15/2032 RATING: BAA3 (03027XBW9)	12,758.06 14,000	12,748.40 91.0600	0.03 %	13,563.81 96.88	- 815.41	4.45 %	567.00	166.95
AMERICAN WATER CAPITAL C CALL 03/01/2029 UNSC 03.450% DUE 06/01/2029 RATING: BAA1 (03040WAU9)	11,290.20 12,000	11,137.44 92.8120	0.03 %	13,385.25 111.54	- 2,247.81	3.72 %	414.00	34.50
ARCHER-DANIELS-MIDLAND C CALL 05/15/2033 UNSC 04.500% DUE 08/15/2033 RATING: A2 (039482AE4)	44,000	42,927.72 97.5630	0.10 %	43,592.56 99.07	- 664.84	4.62 %	1,980.00	484.00
BAKER HUGHES LLC/CO-OBL SER WI CALL 09/15/2027 03.337% DUE 12/15/2027 RATING: A3 (05723KAE0)	89,696.15 95,000	88,012.75 92.6450	0.20 %	97,586.79 102.72	- 9,574.04	3.61 %	3,170.15	140.90
BANK OF AMERICA CORPORATION SR UNSEC CALL 04/22/2031 @ 100 VAR% DUE 04/22/2032 RATING: A1 (06051GJT7)	12,592.80 15,000	12,431.25 82.8750	0.03 %	15,000.00 100.00	- 2,568.75	3.25 %	403.05	77.25

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
BANK OF AMERICA CORPORATION SR UNSEC CALL 07/21/2031 @ 100 VAR% DUE 07/21/2032 RATING: A1 (06051GKA6)	39,596.90 49,000	39,188.73 79.9770	0.09 %	49,000.00 100.00	- 9,811.27	2.88 %	1,126.51	500.67
BANK OF AMERICA CORP CALL 04/27/2027 UNSC VAR% DUE 04/27/2028 RATING: A1 (06051GKP3)	40,363.27 41,000	39,359.18 95.9980	0.09 %	41,000.00 100.00	- 1,640.82	4.56 %	1,794.16	318.96
BANK OF NOVA SCOTIA SEDOL ISIN US06417XAN12 04.750% DUE 02/02/2026 RATING: A2 (06417XAN1)	37,000	36,426.13 98.4490	0.08 %	36,967.44 99.91	- 541.31	4.83 %	1,757.50	727.41
BOARDWALK PIPELINES LP CALL 11/15/2030 COGT 03.400% DUE 02/15/2031 RATING: BAA2 (096630AH1)	18,757.86 22,000	18,897.56 85.8980	0.05 %	21,974.92 99.89	- 3,077.36	3.96 %	748.00	282.58
BOOKING HOLDINGS INC CALL 01/13/2030 UNSC 04.625% DUE 04/13/2030 RATING: A3 (09857LAR9)	49,714.00 50,000	48,718.00 97.4360	0.11 %	60,493.96 120.99	- 11,775.96	4.75 %	2,312.50	501.04
BP CAP MARKETS AMERICA CALL 06/11/2033 COGT 04.893% DUE 09/11/2033 RATING: A2 (10373QBV1)	42,000	41,566.14 98.9670	0.09 %	41,828.16 99.59	- 262.02	4.95 %	2,055.06	285.42

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
BROADRIDGE FINANCIAL SOL UNSC 02.600% DUE 05/01/2031 RATING: BAA2 (11133TAE3)	27,559.95 33,000	27,047.13 81.9610	0.06 %	33,925.32 102.80	- 6,878.19	3.18 %	858.00	143.00
BROADCOM CRP / CAYMN FI CALL 11/15/2023 COGT 03.625% DUE 01/15/2024 RATING: BAA2 (11134LAF6)	35,962.92 36,000	35,572.32 98.8120	0.08 %	36,283.76 100.79	- 711.44	3.67 %	1,305.00	601.75
BROADCOM CRP / CAYMN FI CALL 10/15/2027 COGT 03.500% DUE 01/15/2028 RATING: BAA2 (11134LAR0)	7,404.88 8,000	7,390.08 92.3760	0.02 %	8,669.32 108.37	- 1,279.24	3.79 %	280.00	129.11
BROADCOM INC CALL 06/15/2028 COGT 04.110% DUE 09/15/2028 RATING: BAA3 (11135FAL5)	2,846.52 3,000	2,834.37 94.4790	0.01 %	3,358.62 111.95	- 524.25	4.36 %	123.30	36.30
BROADCOM INC CALL 01/15/2030 COGT 05.000% DUE 04/15/2030 RATING: BAA3 (11135FBD2)	22,551.50 23,000	22,580.25 98.1750	0.05 %	27,221.88 118.36	- 4,641.63	5.10 %	1,150.00	242.78
CNH INDUSTRIAL CAP LLC COGT 03.950% DUE 05/23/2025 RATING: BAA2 (12592BAN4)	32,650.86 33,000	31,933.77 96.7690	0.07 %	32,843.85 99.53	- 910.08	4.09 %	1,303.50	137.59

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
CVS HEALTH CORP CALL 12/25/2027 UNSC 04.300% DUE 03/25/2028 RATING: BAA2 (126650CX6)	3,957.68 4,000	3,857.68 96.4420	0.01 %	4,656.40 116.41	- 798.72	4.46 %	172.00	45.87
CAPITAL ONE FINANCIAL CO CALL 03/01/2029 UNSC VAR% DUE 03/01/2030 RATING: BAA1 (14040HCN3)	25,663.84 29,000	24,623.32 84.9080	0.06 %	29,000.00 100.00	- 4,376.68	3.86 %	949.17	316.39
CAPITAL ONE FINANCIAL CO CALL 05/10/2027 UNSC VAR% DUE 05/10/2028 RATING: BAA1 (14040HCS2)	29,711.40 30,000	28,464.60 94.8820	0.07 %	30,000.00 100.00	- 1,535.40	5.20 %	1,478.10	209.40
CHEVRON USA INC CALL 08/15/2024 COGT 03.900% DUE 11/15/2024 RATING: AA2 (166756AP1)	36,418.32 36,000	35,391.60 98.3100	0.08 %	35,937.61 99.83	- 546.01	3.97 %	1,404.00	179.40
CITIGROUP INC SR UNSEC CALL 04/23/28 @ 100 VAR% DUE 04/23/2029 RATING: A3 (172967LW9)	27,564.50 29,000	27,298.86 94.1340	0.06 %	32,636.31 112.54	- 5,337.45	4.33 %	1,181.75	223.22
CITIGROUP INC CALL 12/20/29 @ 100 VAR% DUE 03/20/2030 RATING: A3 (172967ME8)	19,640.46 21,000	19,417.44 92.4640	0.05 %	23,506.69 111.94	- 4,089.25	4.31 %	835.80	234.49

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
CITIGROUP INC CALL 05/24/2024 UNSC VAR% DUE 05/24/2025 RATING: A3 (172967NQ0)	40,832.72 41,000	40,283.73 98.2530	0.09 %	41,000.00 100.00	- 716.27	4.22 %	1,697.40	174.46
CITIZENS FINANCIAL GROUP CALL 11/03/2025 @ 100.000 SUB 04.300% DUE 12/03/2025 RATING: BAA1 (174610AK1)	51,558.52 52,000	48,224.28 92.7390	0.11 %	57,638.36 110.84	- 9,414.08	4.64 %	2,236.00	173.91
COMCAST CORP UNSC 04.250% DUE 01/15/2033 RATING: A3 (20030NBH3)	28,491.05 29,000	27,549.13 94.9970	0.06 %	34,659.35 119.52	- 7,110.22	4.48 %	1,232.50	568.32
JOHN DEERE CAPITAL CORP UNSC 05.150% DUE 03/03/2025 RATING: A2 (24422EWS4)	43,000	42,993.98 99.9860	0.10 %	42,972.48 99.94	21.50	5.16 %	2,214.50	725.86
DIGITAL REALTY TRUST LP CALL 04/01/2029 COGT 03.600% DUE 07/01/2029 RATING: BAA2 (25389JAU0)	32,535.00 36,000	31,975.92 88.8220	0.07 %	39,524.76 109.79	- 7,548.84	4.06 %	1,296.00	648.00
DOWDUPONT INC CALL 09/15/2025 UNSC 04.493% DUE 11/15/2025 RATING: BAA1 (26078JAC4)	30,204.30 30,000	29,380.50 97.9350	0.07 %	30,000.00 100.00	- 619.50	4.59 %	1,347.90	172.23

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
ENEL CHILE SA SEDOL ISIN US29278DAA37 04.875% DUE 06/12/2028 RATING: BAA2 (29278DAA3)	26,740.00 28,000	26,920.04 96.1430	0.06 %	27,670.72 98.82	- 750.68	5.08 %	1,365.00	72.04
ENERGY TRANSFER OPERATNG COGT 05.500% DUE 06/01/2027 RATING: BAA3 (29278NAN3)	31,465.31 31,000	30,831.98 99.4580	0.07 %	34,548.88 111.45	- 3,716.90	5.53 %	1,705.00	142.08
EXPEDIA INC SER WI CALL 11/15/2027 03.800% DUE 02/15/2028 RATING: BAA3 (30212PAP0)	48,302.08 53,000	49,558.71 93.5070	0.11 %	57,378.86 108.26	- 7,820.15	4.07 %	2,014.00	760.84
META PLATFORMS INC CALL 02/15/2033 UNSC 04.950% DUE 05/15/2033 RATING: A1 (30303M8N5)	17,000	16,986.91 99.9230	0.04 %	16,991.67 99.95	- 4.76	4.96 %	841.50	135.58
FISERV INC CALL 04/01/2029 UNSC 03.500% DUE 07/01/2029 RATING: BAA2 (337738AU2)	29,190.08 32,000	29,207.68 91.2740	0.07 %	35,102.40 109.70	- 5,894.72	3.84 %	1,120.00	560.00
FLOWSERVE CORPORATION CALL 10/15/2031 UNSC 02.800% DUE 01/15/2032 RATING: BAA3 (34355JAB4)	23,628.60 30,000	23,904.90 79.6830	0.06 %	29,918.63 99.73	- 6,013.73	3.52 %	840.00	387.33

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FOX CORP SER WI CALL 10/25/2028 04.709% DUE 01/25/2029 RATING: BAA2 (35137LAH8)	15,686.72 16,000	15,548.16 97.1760	0.04 %	18,836.96 117.73	- 3,288.80	4.85 %	753.44	326.49
FOX CORP CALL 01/08/2030 UNSC 03.500% DUE 04/08/2030 RATING: BAA2 (35137LAL9)	14,517.44 16,000	14,357.28 89.7330	0.04 %	17,584.48 109.90	- 3,227.20	3.91 %	560.00	129.11
GMAC INC CO GUARNT 08.000% DUE 11/01/2031 RATING: BAA3 (36186CBY8)	 50,000	51,906.00 103.8120	0.12 %	55,161.92 110.32	- 3,255.92	7.71 %	4,000.00	666.67
GENERAL MOTORS CO CALL 09/01/2025 UNSC 06.125% DUE 10/01/2025 RATING: BAA2 (37045VAV2)	10,337.40 10,000	10,068.30 100.6830	0.03 %	10,502.35 105.02	- 434.05	6.09 %	612.50	153.12
GENERAL MOTORS FINL CO CALL 12/01/2025 @ 100.000 COGT 05.250% DUE 03/01/2026 RATING: BAA2 (37045XBG0)	9,010.08 9,000	8,863.65 98.4850	0.02 %	9,687.24 107.64	- 823.59	5.34 %	472.50	157.50
GENERAL MOTORS FINL CO CALL 12/17/2023 UNSC 05.100% DUE 01/17/2024 RATING: BAA2 (37045XCR5)	50,497.50 50,000	49,817.00 99.6340	0.11 %	49,960.78 99.92	- 143.78	5.12 %	2,550.00	1,161.67

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
GENERAL MOTORS FINL CO CALL 06/20/2027 UNSC 02.700% DUE 08/20/2027 RATING: BAA2 (37045XDA1)	21,997.50 25,000	22,139.75 88.5590	0.05 %	24,944.50 99.78	- 2,804.75	3.05 %	675.00	245.63
GLOBAL PAYMENTS INC CALL 05/15/2029 UNSC 03.200% DUE 08/15/2029 RATING: BAA3 (37940XAB8)	16,603.72 19,000	16,514.61 86.9190	0.04 %	19,915.61 104.82	- 3,401.00	3.69 %	608.00	229.69
GLOBAL PAYMENTS INC CALL 05/15/2032 UNSC 05.400% DUE 08/15/2032 RATING: BAA3 (37940XAQ5)	 16,000	15,591.04 97.4440	0.04 %	15,971.68 99.82	- 380.64	5.55 %	864.00	326.40
GOLDMAN SACHS GROUP INC UNSC 04.000% DUE 03/03/2024 RATING: A2 (38141GVM3)	41,128.33 41,000	40,473.97 98.7170	0.09 %	41,545.84 101.33	- 1,071.87	4.06 %	1,640.00	537.56
GOLDMAN SACHS GROUP INC SR UNSEC CALL 04/22/2031 @ 100 VAR% DUE 04/22/2032 RATING: A2 (38141GYB4)	35,700.32 43,000	35,265.16 82.0120	0.08 %	43,000.00 100.00	- 7,734.84	3.19 %	1,124.45	215.52
GOLDMAN SACHS GROUP INC SR UNSEC CALL 07/21/2031 @ 100 VAR% DUE 07/21/2032 RATING: A2 (38141GYJ7)	9,703.92 12,000	9,612.00 80.1000	0.03 %	12,000.00 100.00	- 2,388.00	2.98 %	285.96	127.09

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
HP INC CALL 10/15/2032 UNSC 05.500% DUE 01/15/2033 RATING: BAA2 (40434LAN5)	49,747.44 51,000	50,089.14 98.2140	0.11 %	50,814.50 99.64	- 725.36	5.61 %	2,805.00	1,293.42
HOST HOTELS & RESORTS LP SER E CALL 03/15/25 @100 UNSC 04.000% DUE 06/15/2025 RATING: BAA3 (44107TAV8)	24,445.50 25,000	24,028.25 96.1130	0.06 %	26,771.32 107.09	- 2,743.07	4.17 %	1,000.00	44.44
HOST HOTELS & RESORTS LP SER I CALL 06/15/2030 03.500% DUE 09/15/2030 RATING: BAA3 (44107TAZ9)	3,416.96 4,000	3,388.44 84.7110	0.01 %	4,105.80 102.65	- 717.36	4.14 %	140.00	41.22
HUMANA INC CALL 02/01/2028 UNSC 05.750% DUE 03/01/2028 RATING: BAA3 (444859BU5)	24,000	24,419.76 101.7490	0.06 %	23,941.32 99.76	478.44	5.66 %	1,380.00	460.00
INTERPUBLIC GROUP COS CALL 07/01/2028 UNSC 04.650% DUE 10/01/2028 RATING: BAA2 (460690BP4)	12,845.17 13,000	12,505.87 96.1990	0.03 %	15,322.45 117.87	- 2,816.58	4.84 %	604.50	151.12
INTERPUBLIC GROUP COS CALL 12/30/2029 UNSC 04.750% DUE 03/30/2030 RATING: BAA2 (460690BR0)	19,624.40 20,000	19,392.20 96.9610	0.05 %	24,236.65 121.18	- 4,844.45	4.90 %	950.00	240.14

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
JPMORGAN CHASE & CO SR UNSEC CALL 04/22/2031 @ 100 VAR% DUE 04/22/2032 RATING: A1 (46647PCC8)	63,105.00 75,000	62,296.50 83.0620	0.14 %	75,339.84 100.45	- 13,043.34	3.11 %	1,935.00	370.87
JPMORGAN CHASE & CO CALL 07/25/2027 UNSC VAR% DUE 07/25/2028 RATING: A1 (46647PDG8)	20,000	19,732.00 98.6600	0.05 %	20,000.00 100.00	- 268.00	4.92 %	970.20	420.42
JPMORGAN CHASE & CO CALL 12/15/2024 UNSC VAR% DUE 12/15/2025 RATING: A1 (46647PDM5)	56,000	55,763.68 99.5780	0.13 %	56,000.00 100.00	- 236.32	5.57 %	3,105.76	138.03
KIMCO REALTY CORP CALL 07/01/2030 UNSC 02.700% DUE 10/01/2030 RATING: BAA1 (49446RAW9)	27,536.64 32,000	26,363.20 82.3850	0.06 %	33,184.00 103.70	- 6,820.80	3.28 %	864.00	216.00
LABORATORY CORP OF AMER CALL 11/01/2024 @ 100.000 UNSC 03.600% DUE 02/01/2025 RATING: BAA2 (50540RAQ5)	19,704.20 20,000	19,323.20 96.6160	0.05 %	20,272.60 101.36	- 949.40	3.73 %	720.00	300.00
LAS VEGAS SANDS CORP CALL 05/08/2029 UNSC 03.900% DUE 08/08/2029 RATING: BAA3 (517834AF4)	38,403.70 47,000	41,936.22 89.2260	0.10 %	49,842.14 106.05	- 7,905.92	4.38 %	1,833.00	728.11

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
LEAR CORP CALL 02/28/2030 UNSC 03.500% DUE 05/30/2030 RATING: BAA2 (521865BB0)	11,340.68 13,000	11,386.18 87.5860	0.03 %	13,242.28 101.86	- 1,856.10	4.00 %	455.00	39.18
LOWE&;S COS INC SER 10YR CALL 01/05/2029 03.650% DUE 04/05/2029 RATING: BAA1 (548661DR5)	18,855.80 20,000	18,532.20 92.6610	0.05 %	22,228.15 111.14	- 3,695.95	3.94 %	730.00	174.39
MARATHON PETROLEUM CORP SER WI CALL 09/15/2026 05.125% DUE 12/15/2026 RATING: BAA2 (56585ABC5)	10,233.50 10,000	9,901.40 99.0140	0.03 %	11,694.20 116.94	- 1,792.80	5.18 %	512.50	22.78
MASTERCARD INC CALL 01/26/2027 UNSC 03.300% DUE 03/26/2027 RATING: AA3 (57636QAR5)	15,721.92 16,000	15,283.36 95.5210	0.04 %	15,955.36 99.72	- 672.00	3.46 %	528.00	139.33
MASTERCARD INC CALL 02/09/2028 UNSC 04.875% DUE 03/09/2028 RATING: AA3 (57636QAW4)	28,000	28,316.68 101.1310	0.07 %	27,972.84 99.90	343.84	4.83 %	1,365.00	424.67
MCKESSON CORP CALL 06/15/2028 UNSC 04.900% DUE 07/15/2028 RATING: BAA1 (581557BT1)	17,000	16,888.14 99.3420	0.04 %	16,966.84 99.81	- 78.70	4.94 %	833.00	37.02

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
MERCK & CO INC CALL 05/10/2027 UNSC 01.700% DUE 06/10/2027 RATING: A1 (58933YBC8)	62,679.60 69,000	61,812.27 89.5830	0.14 %	68,971.02 99.96	- 7,158.75	1.90 %	1,173.00	68.42
MICRON TECHNOLOGY INC CALL 09/01/2029 UNSC 06.750% DUE 11/01/2029 RATING: BAA3 (595112BV4)	29,000	30,145.21 103.9490	0.07 %	28,995.63 99.99	1,149.58	6.50 %	1,957.50	326.25
MOODY & APOS CORPORATION CALL 11/01/2028 UNSC 04.250% DUE 02/01/2029 RATING: N/A (615369AP0)	26,723.25 27,000	25,985.07 96.2410	0.06 %	31,004.91 114.83	- 5,019.84	4.42 %	1,147.50	478.12
MORGAN STANLEY SER GMTN CALL 1/24/28 @ 100 VAR% DUE 01/24/2029 RATING: A1 (61744YAP3)	33,209.75 35,000	32,675.30 93.3580	0.08 %	39,131.75 111.81	- 6,456.45	4.05 %	1,320.20	575.75
MORGAN STANLEY CALL 04/20/2027 UNSC VAR% DUE 04/20/2028 RATING: A1 (61747YER2)	25,419.16 26,000	24,976.90 96.0650	0.06 %	25,941.68 99.78	- 964.78	4.39 %	1,094.60	215.88
MORGAN STANLEY CALL 10/18/2027 UNSC VAR% DUE 10/18/2028 RATING: A1 (61747YEV3)	38,000	39,046.90 102.7550	0.09 %	38,000.00 100.00	1,046.90	6.13 %	2,392.48	485.14

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
NATIONAL GRID PLC SEDOL 2K86M24 ISIN US636274AE20 05.809% DUE 06/12/2033 RATING: BAA2 (636274AE2)	15,000	15,263.85 101.7590	0.04 %	15,000.00 100.00	263.85	5.71 %	871.35	45.99
NORTHERN TRUST CORP SUB CALL 5/8/27 @ 100 VAR% DUE 05/08/2032 RATING: A2 (665859AS3)	48,954.88 52,000	46,123.48 88.6990	0.10 %	56,151.16 107.98	- 10,027.68	3.81 %	1,755.00	258.38
NUCOR CORP CALL 04/23/2027 UNSC 04.300% DUE 05/23/2027 RATING: BAA1 (670346AY1)	27,893.88 28,000	27,156.08 96.9860	0.06 %	27,955.20 99.84	- 799.12	4.44 %	1,204.00	127.09
NUTRIEN LTD SEDOL 2KLRJP6 ISIN US67077MAZ14 05.900% DUE 11/07/2024 RATING: BAA2 (67077MAZ1)	21,000	21,006.09 100.0290	0.05 %	20,991.60 99.96	14.49	5.90 %	1,239.00	185.85
OMEGA HLTHCARE INVESTORS CALL 11/01/2030 COGT 03.375% DUE 02/01/2031 RATING: BAA3 (681936BM1)	41,409.96 51,000	40,452.69 79.3190	0.09 %	52,741.65 103.42	- 12,288.96	4.26 %	1,721.25	717.19
ONEOK INC CALL 10/15/2030 COGT 06.350% DUE 01/15/2031 RATING: BAA2 (682680BE2)	4,178.40 4,000	4,119.76 102.9940	0.01 %	4,659.24 116.48	- 539.48	6.17 %	254.00	117.12

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
ONEOK INC CALL 08/15/2032 COGT 06.100% DUE 11/15/2032 RATING: BAA2 (682680BG7)	12,000	12,208.20 101.7350	0.03 %	11,990.28 99.92	217.92	6.00 %	732.00	93.53
ORACLE CORP CALL 12/25/2030 UNSC 02.875% DUE 03/25/2031 RATING: BAA2 (68389XCE3)	25,541.21 31,000	26,465.01 85.3710	0.06 %	31,717.03 102.31	- 5,252.02	3.37 %	891.25	237.67
OVINTIV INC CALL 04/15/2028 COGT 05.650% DUE 05/15/2028 RATING: BAA3 (69047QAB8)	8,000	7,841.36 98.0170	0.02 %	7,997.84 99.97	- 156.48	5.77 %	452.00	38.92
OVINTIV INC CALL 04/15/2033 COGT 06.250% DUE 07/15/2033 RATING: BAA3 (69047QAC6)	17,000	16,767.61 98.6330	0.04 %	16,892.57 99.37	- 124.96	6.34 %	1,062.50	91.49
PNC FINANCIAL SERVICES CALL 12/02/2027 UNSC VAR% DUE 12/02/2028 RATING: A3 (693475BK0)	49,000	48,455.12 98.8880	0.11 %	50,328.88 102.71	- 1,873.76	5.42 %	2,623.46	211.33
PNC FINANCIAL SERVICES CALL 01/24/2033 UNSC VAR% DUE 01/24/2034 RATING: A3 (693475BM6)	6,000	5,753.76 95.8960	0.02 %	6,000.00 100.00	- 246.24	5.29 %	304.08	132.61

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
PARKER-HANNIFIN CORP CALL 03/14/2029 UNSC 03.250% DUE 06/14/2029 RATING: BAA1 (701094AN4)	16,473.24 18,000	16,371.18 90.9510	0.04 %	19,588.68 108.83	- 3,217.50	3.58 %	585.00	27.62
PARKER-HANNIFIN CORP CALL 07/15/2029 UNSC 04.500% DUE 09/15/2029 RATING: BAA1 (701094AS3)	27,861.40 28,000	27,208.16 97.1720	0.06 %	27,753.00 99.12	- 544.84	4.64 %	1,260.00	371.00
PIONEER NATURAL RESOURCE UNSC 05.100% DUE 03/29/2026 RATING: BAA1 (723787AV9)	39,000	38,766.00 99.4000	0.09 %	38,980.89 99.95	- 214.89	5.14 %	1,989.00	508.30
PUBLIC SERVICE ENTERPRIS CALL 10/15/2027 UNSC 05.850% DUE 11/15/2027 RATING: BAA2 (744573AV8)	37,000	37,744.81 102.0130	0.09 %	36,961.15 99.90	783.66	5.74 %	2,164.50	276.58
PULTE HOMES INC COMPANY GUARNT 07.875% DUE 06/15/2032 RATING: BAA2 (745867AM3)	25,904.67 23,000	26,062.45 113.3150	0.06 %	33,713.86 146.58	- 7,651.41	6.95 %	1,811.25	80.50
PULTE GROUP INC COGT 06.375% DUE 05/15/2033 RATING: BAA2 (745867AP6)	20,582.80 20,000	20,699.00 103.4950	0.05 %	23,237.00 116.19	- 2,538.00	6.16 %	1,275.00	162.92

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
RELX CAPITAL INC CALL 02/20/2032 COGT 04.750% DUE 05/20/2032 RATING: BAA1 (74949LAE2)	10,156.50 10,000	9,810.50 98.1050	0.03 %	9,912.10 99.12	- 101.60	4.85 %	475.00	54.10
REXFORD INDUSTRIAL REALT CALL 09/01/2030 COGT 02.125% DUE 12/01/2030 RATING: BAA2 (76169XAA2)	25,657.28 32,000	25,243.84 78.8870	0.06 %	31,898.44 99.68	- 6,654.60	2.70 %	680.00	56.67
ROSS STORES INC CALL 02/15/2027 UNSC 04.700% DUE 04/15/2027 RATING: A2 (778296AC7)	44,231.88 44,000	42,992.84 97.7110	0.10 %	51,285.86 116.56	- 8,293.02	4.82 %	2,068.00	436.58
SANTANDER HOLDINGS USA CALL 01/06/2027 UNSC VAR% DUE 01/06/2028 RATING: BAA3 (80282KBC9)	23,829.93 27,000	23,319.36 86.3680	0.06 %	27,000.00 100.00	- 3,680.64	2.89 %	672.30	326.81
SANTANDER HOLDINGS USA CALL 06/09/2024 UNSC VAR% DUE 06/09/2025 RATING: BAA3 (80282KBD7)	21,733.36 22,000	21,115.82 95.9810	0.05 %	21,999.52 100.00	- 883.70	4.44 %	937.20	57.27
CHARLES SCHWAB CORP CALL 12/03/2031 UNSC 02.900% DUE 03/03/2032 RATING: A2 (808513CA1)	36,093.53 41,000	33,752.43 82.3230	0.08 %	40,908.16 99.78	- 7,155.73	3.53 %	1,189.00	389.73

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
SHIRE ACQ INV IRELAND DA SEDOL BYWGK4 ISIN US82481LAD10 03.200% DUE 09/23/2026 RATING: BAA1 (82481LAD1)	63,391.02 66,000	61,970.70 93.8950	0.14 %	67,923.66 102.92	- 5,952.96	3.41 %	2,112.00	574.93
SOUTHWEST AIRLINES CO CALL 04/04/2025 UNSC 05.250% DUE 05/04/2025 RATING: BAA1 (844741BJ6)	29,546.36 29,000	28,690.57 98.9330	0.07 %	32,011.25 110.38	- 3,320.68	5.31 %	1,522.50	241.06
STATE STREET CORP CALL 01/26/2025 UNSC VAR% DUE 01/26/2026 RATING: A1 (857477BZ5)	18,000	17,732.34 98.5130	0.04 %	18,000.00 100.00	- 267.66	4.94 %	874.26	376.42
SUMITOMO MITSUI FINL GRP SEDOL BGLQSR1 ISIN US86562MAV28 03.352% DUE 10/18/2027 RATING: A1 (86562MAV2)	59,000	54,218.64 91.8960	0.12 %	55,714.88 94.43	- 1,496.24	3.65 %	1,977.68	401.03
SYNCHRONY FINANCIAL CALL 09/01/2027 UNSC 03.950% DUE 12/01/2027 RATING: N/A (87165BAM5)	13,000	11,325.60 87.1200	0.03 %	11,562.78 88.94	- 237.18	4.54 %	513.50	42.79
SYNCHRONY FINANCIAL CALL 07/28/2031 UNSC 02.875% DUE 10/28/2031 RATING: N/A (87165BAR4)	30,313.20 40,000	29,086.00 72.7150	0.07 %	39,651.24 99.13	- 10,565.24	3.96 %	1,150.00	201.25

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
SYNCHRONY FINANCIAL CALL 05/13/2025 UNSC 04.875% DUE 06/13/2025 RATING: N/A (87165BAS2)	2,000	1,900.38 95.0190	0.01 %	1,977.68 98.88	- 77.30	5.14 %	97.50	4.87
T-MOBILE USA INC SER WI CALL 01/15/2030 03.875% DUE 04/15/2030 RATING: BAA2 (87264ABF1)	17,000	15,661.59 92.1270	0.04 %	15,773.98 92.79	- 112.39	4.21 %	658.75	139.07
T-MOBILE USA INC CALL 04/15/2033 COGT 05.050% DUE 07/15/2033 RATING: BAA2 (87264ACY9)	26,000	25,529.40 98.1900	0.06 %	25,613.06 98.51	- 83.66	5.15 %	1,313.00	517.91
TOSCO CORP NTS 08.125% 02/15/2030 RATING: A2 (891490AT1)	17,005.10 14,000	16,286.76 116.3340	0.04 %	20,371.54 145.51	- 4,084.78	6.99 %	1,137.50	429.72
TOYOTA MOTOR CREDIT CORP UNSC 05.400% DUE 11/10/2025 RATING: A1 (89236TKK0)	37,000	37,241.24 100.6520	0.09 %	36,956.34 99.88	284.90	5.37 %	1,998.00	283.05
TRANE TECH FIN LTD SEDOL ISIN US892938AA96 05.250% DUE 03/03/2033 RATING: BAA1 (892938AA9)	12,000	12,149.16 101.2430	0.03 %	11,984.28 99.87	164.88	5.19 %	630.00	206.50

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
TRANSCONT GAS PIPE LINE CALL 02/15/2030 UNSC 03.250% DUE 05/15/2030 RATING: BAA1 (893574AP8)	48,494.16 54,000	47,993.04 88.8760	0.11 %	56,367.90 104.39	- 8,374.86	3.66 %	1,755.00	224.25
TRUIST FINANCIAL CORP SER MTN CALL 03/05/2030 01.950% DUE 06/05/2030 RATING: A3 (89788MAB8)	6,000	4,767.30 79.4550	0.02 %	4,793.22 79.89	- 25.92	2.46 %	117.00	8.45
TRUIST FINANCIAL CORP SER MTN CALL 01/26/2033 VAR% DUE 01/26/2034 RATING: A3 (89788MAM4)	29,000	27,480.98 94.7620	0.06 %	28,403.85 97.94	- 922.87	5.41 %	1,485.38	639.54
TYSON FOODS INC CALL 05/15/2024 @ 100.000 COGT 03.950% DUE 08/15/2024 RATING: BAA2 (902494AX1)	37,927.04 38,000	37,296.62 98.1490	0.09 %	38,060.08 100.16	- 763.46	4.03 %	1,501.00	567.04
TYSON FOODS INC CALL 01/01/2026 UNSC 04.000% DUE 03/01/2026 RATING: BAA2 (902494BJ1)	6,954.99 7,000	6,764.17 96.6310	0.02 %	6,982.55 99.75	- 218.38	4.14 %	280.00	93.33
UNITED TECHNOLOGIES CORP CALL 06/16/2025 UNSC 03.950% DUE 08/16/2025 RATING: BAA1 (913017DD8)	33,068.97 33,000	32,333.40 97.9800	0.07 %	33,003.52 100.01	- 670.12	4.04 %	1,303.50	488.81

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
VENTAS REALTY LP CALL 10/15/2029 COGT 03.000% DUE 01/15/2030 RATING: BAA1 (92277GAU1)	27,122.52 31,000	26,515.23 85.5330	0.06 %	32,659.12 105.35	- 6,143.89	3.51 %	930.00	428.83
VERISK ANALYTICS INC CALL 01/01/2033 UNSC 05.750% DUE 04/01/2033 RATING: BAA2 (92345YAH9)	17,000	17,797.13 104.6890	0.04 %	16,836.63 99.04	960.50	5.50 %	977.50	309.54
VORNADO REALTY LP CALL 03/01/2031 UNSC 03.400% DUE 06/01/2031 RATING: BAA3 (929043AL1)	36,087.75 43,000	31,120.82 72.3740	0.07 %	43,557.58 101.30	- 12,436.76	4.70 %	1,462.00	121.83
WELLS FARGO & COMPANY MTN SR UNSEC CALL 5/22/27 @ 100 VAR% DUE 05/22/2028 RATING: A1 (95000U2A0)	12,333.23 13,000	12,107.42 93.1340	0.03 %	14,261.26 109.70	- 2,153.84	3.85 %	465.92	50.47
WELLS FARGO & COMPANY SER MTN CALL 03/02/2032 VAR% DUE 03/02/2033 RATING: A1 (95000U2U6)	47,035.91 53,000	45,360.05 85.5850	0.10 %	53,000.00 100.00	- 7,639.95	3.92 %	1,775.50	586.90
WELLTOWER INC CALL 10/15/2029 UNSC 03.100% DUE 01/15/2030 RATING: BAA1 (95040QAJ3)	26,567.70 30,000	25,977.30 86.5910	0.06 %	32,068.20 106.89	- 6,090.90	3.59 %	930.00	428.83

Detail

Fixed income

Corporate bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
WORKDAY INC CALL 02/01/2029 UNSC 03.700% DUE 04/01/2029 RATING: BAA2 (98138HAH4)	8,418.51 9,000	8,346.24 92.7360	0.02 %	9,011.78 100.13	- 665.54	3.99 %	333.00	83.25
WORKDAY INC CALL 01/01/2032 UNSC 03.800% DUE 04/01/2032 RATING: BAA2 (98138HAJ0)	15,532.56 17,000	15,304.59 90.0270	0.04 %	16,985.84 99.92	- 1,681.25	4.23 %	646.00	161.50
ZOETIS INC CALL 10/14/2025 UNSC 05.400% DUE 11/14/2025 RATING: BAA1 (98978VAU7)	16,000	16,048.96 100.3060	0.04 %	15,988.32 99.93	60.64	5.39 %	864.00	112.80
Total corporate bonds		**$3,688,964.85**	**7.96 %**	**$4,108,329.09**	**- $419,364.24**	**4.44 %**	**$163,950.32**	**$39,653.43**

Treasury bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
USA TREASURY NOTES 00.375% DUE 11/30/2025 RATING: AAA (91282CAZ4)	$2,037,706.16 1,789,700	$1,615,490.60 $90.2660	3.50 %	$1,780,985.79 $99.51	- $165,495.19	0.42 %	$6,711.38	$568.45
USA TREASURY NOTES 01.625% DUE 05/15/2031 RATING: AAA (91282CCB5)	625,642.70 107,800	91,609.52 84.9810	0.20 %	111,177.17 103.13	- 19,567.65	1.92 %	1,751.75	223.73

Detail

Treasury bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
USA TREASURY NOTES 02.750% DUE 07/31/2027 RATING: AAA (91282CFB2)	597,200	563,022.24 94.2770	1.22 %	586,282.46 98.17	- 23,260.22	2.92 %	16,423.00	6,850.48
USA TREASURY NOTES 03.125% DUE 08/31/2027 RATING: AAA (91282CFH9)	358,000	342,380.46 95.6370	0.75 %	350,314.73 97.85	- 7,934.27	3.27 %	11,187.50	3,739.30
USA TREASURY NOTES 04.125% DUE 11/15/2032 RATING: AAA (91282CFV8)	1,445,700	1,477,331.92 102.1880	3.20 %	1,507,480.58 104.27	- 30,148.66	4.04 %	59,635.13	7,616.44
USA TREASURY NOTES 03.875% DUE 11/30/2027 RATING: AAA (91282CFZ9)	1,556,800	1,534,724.58 98.5820	3.32 %	1,555,547.90 99.92	- 20,823.32	3.94 %	60,326.00	5,109.58
USA TREASURY NOTES 03.500% DUE 01/31/2028 RATING: AAA (91282CGH8)	161,100	156,437.77 97.1060	0.34 %	160,209.43 99.45	- 3,771.66	3.61 %	5,638.50	2,351.97
USA TREASURY NOTES 03.500% DUE 02/15/2033 RATING: AAA (91282CGM7)	143,200	139,485.39 97.4060	0.31 %	143,879.22 100.47	- 4,393.83	3.60 %	5,012.00	1,882.96
USA TREASURY NOTES 04.000% DUE 02/29/2028 RATING: AAA (91282CGP0)	115,500	114,647.61 99.2620	0.25 %	114,629.23 99.25	18.38	4.03 %	4,620.00	1,544.18
USA TREASURY NOTES 03.625% DUE 03/31/2028 RATING: AAA (91282CGT2)	154,700	151,098.58 97.6720	0.33 %	154,851.08 100.10	- 3,752.50	3.72 %	5,607.88	1,409.63
USA TREASURY NOTES 03.625% DUE 05/31/2028 RATING: AAA (91282CHE4)	1,198,200	1,171,995.37 97.8130	2.54 %	1,179,470.66 98.44	- 7,475.29	3.71 %	43,434.75	3,678.90

Detail

Treasury bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
USA TREASURY NOTES 01.625% DUE 05/15/2026 RATING: AAA (912828R36)	1,192,775.22 1,258,600	1,161,310.22 92.2700	2.52 %	1,308,618.28 103.97	- 147,308.06	1.77 %	20,452.25	2,612.11
Total treasury bonds		**$8,519,534.26**	**18.38 %**	**$8,953,446.53**	**- $433,912.27**	**2.83 %**	**$240,800.14**	**$37,587.73**

Agency bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL HOME LN MTG CORP GOLD POOL # G03205 05.500% DUE 07/01/2035 RATING: N/A (3128M43N1)	$2,851.79 2,225.814	$2,280.01 $102.4350	0.01 %	$2,183.29 $98.09	$96.72	5.37 %	$122.42	$10.54
FEDERAL HOME LOAN BANK BNDS 02.500% DUE 02/13/2024 RATING: AAA (3130AFW94)	34,742.75 35,000	34,387.50 98.2500	0.08 %	34,877.15 99.65	- 489.65	2.55 %	875.00	335.42
FEDERAL HOME LOAN MTG CORP POOL SD0932 02.500% DUE 04/01/2052 RATING: N/A (3132DNA94)	31,254.35 32,325.510	27,566.87 85.2790	0.06 %	30,234.45 93.53	- 2,667.58	2.94 %	808.14	69.59
FEDERAL HOME LOAN MTG CORP GOLD POOL Q54620 04.500% DUE 03/01/2048 RATING: N/A (3132XXD22)	7,622.52 6,440.630	6,327.73 98.2470	0.02 %	6,705.31 104.11	- 377.58	4.59 %	289.83	24.96

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL HOME LOAN MTG CORP GOLD POOL Q59042 04.500% DUE 10/01/2048 RATING: N/A (3132Y3BL7)	33,611.35 28,789.590	28,256.98 98.1500	0.07 %	29,706.13 103.18	- 1,449.15	4.59 %	1,295.53	111.56
FEDERAL HOME LOAN MTG CORP GOLD POOL Q59738 05.000% DUE 11/01/2048 RATING: N/A (3132Y3ZC1)	11,206.67 9,817.370	9,786.64 99.6870	0.03 %	10,294.43 104.86	- 507.79	5.02 %	490.87	42.27
FEDERAL HOME LOAN MTG CORP GOLD POOL Q59746 04.500% DUE 11/01/2048 RATING: N/A (3132Y3ZL1)	10,429.99 9,056.270	8,880.31 98.0570	0.02 %	9,297.18 102.66	- 416.87	4.59 %	407.53	35.09
FEDERAL HOME LOAN MTG CORP POOL QA6364 03.500% DUE 01/01/2050 RATING: N/A (3133A1B92)	64,598.49 58,259.550	53,911.64 92.5370	0.12 %	61,563.94 105.67	- 7,652.30	3.79 %	2,039.08	175.59
FEDERAL HOME LOAN MTG CORP POOL QD8682 03.000% DUE 03/01/2052 RATING: N/A (3133B6UF5)	101,737.01 102,883.200	91,042.37 88.4910	0.20 %	99,571.63 96.78	- 8,529.26	3.40 %	3,086.50	265.78
FEDERAL HOME LOAN MTG CORP POOL QE0805 02.500% DUE 04/01/2052 RATING: N/A (3133B93N2)	88,765.36 93,703.620	79,749.28 85.1080	0.18 %	88,857.40 94.83	- 9,108.12	2.94 %	2,342.59	201.72
FEDERAL HOME LOAN MTG CORP POOL QE0808 02.500% DUE 04/01/2052 RATING: N/A (3133B93R3)	53,960.62 56,917.480	48,635.99 85.4500	0.11 %	54,000.45 94.88	- 5,364.46	2.93 %	1,422.94	122.53

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL HOME LOAN MTG CORP POOL RA6963 02.000% DUE 03/01/2052 RATING: N/A (3133KNWY5)	143,249.08 154,395.130	126,316.83 81.8140	0.28 %	135,602.33 87.83	- 9,285.50	2.45 %	3,087.90	265.90
FEDERAL NATL MTG ASSN POOL QA0641 04.000% DUE 06/01/2049 RATING: N/A (31334WWA5)	29,412.24 24,817.150	23,691.44 95.4640	0.06 %	26,174.30 105.47	- 2,482.86	4.20 %	992.69	85.48
FEDERAL HOME LOAN MTG CORP GOLD POOL G60732 04.000% DUE 02/01/2046 RATING: N/A (31335AY51)	30,709.66 27,779.930	26,740.68 96.2590	0.06 %	29,164.60 104.98	- 2,423.92	4.16 %	1,111.20	95.69
FEDERAL HOME LOAN MTG CORP GOLD POOL G60886 04.000% DUE 07/01/2044 RATING: N/A (31335A6X1)	20,323.92 17,980.650	17,307.99 96.2590	0.04 %	18,868.44 104.94	- 1,560.45	4.16 %	719.23	61.93
FEDERAL HOME LOAN MTG POOL QA4520 03.500% DUE 11/01/2049 RATING: N/A (31346YAV5)	15,567.57 13,030.530	12,011.93 92.1830	0.03 %	13,571.07 104.15	- 1,559.14	3.80 %	456.07	39.27
FEDERAL HOME LOAN MTG POOL QA4525 03.500% DUE 10/01/2049 RATING: N/A (31346YA29)	11,215.24 10,261.740	9,466.97 92.2550	0.03 %	10,734.74 104.61	- 1,267.77	3.80 %	359.16	30.93
FEDERAL NATL MTG ASSN POOL AL1489 03.500% DUE 02/01/2042 RATING: N/A (3138EHUP5)	8,552.30 7,726.750	7,234.32 93.6270	0.02 %	8,152.34 105.51	- 918.02	3.74 %	270.44	23.29

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL AQ0543 03.500% DUE 11/01/2042 RATING: N/A (3138MFS99)	75,025.24 68,435.570	64,074.17 93.6270	0.14 %	72,204.86 105.51	- 8,130.69	3.74 %	2,395.24	206.26
FEDERAL NATL MTG ASSN POOL AS4884 03.000% DUE 05/01/2045 RATING: N/A (3138WENA3)	27,678.02 25,848.615	23,335.10 90.2760	0.06 %	26,228.25 101.47	- 2,893.15	3.33 %	775.46	66.78
FEDERAL NATL MTG ASSN POOL AS8483 03.000% DUE 12/01/2046 RATING: N/A (3138WJM96)	153,101.58 147,393.090	132,527.02 89.9140	0.29 %	148,187.62 100.54	- 15,660.60	3.34 %	4,421.79	380.77
FEDERAL NATL MTG ASSN POOL AT2020 03.500% DUE 04/01/2043 RATING: N/A (3138WPG65)	47,535.88 42,224.640	39,507.91 93.5660	0.09 %	44,550.30 105.51	- 5,042.39	3.75 %	1,477.86	127.26
FEDERAL NATL MTG ASSN POOL AT3008 03.500% DUE 04/01/2043 RATING: N/A (3138WQKW1)	4,353.52 3,934.020	3,674.22 93.3960	0.01 %	4,150.70 105.51	- 476.48	3.75 %	137.69	11.86
FEDERAL NATL MTG ASSN POOL AU6743 04.000% DUE 10/01/2043 RATING: N/A (3138X6P58)	44,497.20 39,480.430	37,934.38 96.0840	0.09 %	41,608.69 105.39	- 3,674.31	4.17 %	1,579.22	135.99
FEDERAL NATL MTG ASSN POOL# 555677 05.500% DUE 07/01/2033 RATING: N/A (31385XJW8)	8,765.43 6,773.218	6,930.36 102.3200	0.02 %	6,829.85 100.84	100.51	5.38 %	372.53	32.08

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL BA2106 03.000% DUE 08/01/2045 RATING: N/A (3140E6KU5)	57,807.24 54,544.160	49,239.19 90.2740	0.11 %	55,157.78 101.13	- 5,918.59	3.33 %	1,636.32	140.91
FEDERAL NATL MTG ASSN POOL BD8897 02.500% DUE 11/01/2031 RATING: N/A (3140FG3F4)	54,796.57 46,983.700	43,534.16 92.6580	0.10 %	48,305.09 102.81	- 4,770.93	2.70 %	1,174.59	101.15
FEDERAL NATL MTG ASSN POOL BD9359 02.500% DUE 11/01/2031 RATING: N/A (3140FHMH7)	75,340.78 61,914.090	57,375.79 92.6700	0.13 %	63,645.74 102.80	- 6,269.95	2.70 %	1,547.85	133.29
FEDERAL NATL MTG ASSN POOL BE2237 02.500% DUE 01/01/2032 RATING: N/A (3140FMPX8)	50,119.09 44,026.870	40,794.86 92.6590	0.09 %	44,257.32 100.52	- 3,462.46	2.70 %	1,100.67	94.78
FEDERAL NATL MTG ASSN POOL BJ9166 03.500% DUE 05/01/2048 RATING: N/A (3140HBFG8)	117,790.41 114,164.880	105,363.91 92.2910	0.23 %	113,397.82 99.33	- 8,033.91	3.80 %	3,995.77	344.08
FEDERAL NATL MTG ASSN POOL BJ2677 03.500% DUE 04/01/2048 RATING: N/A (3140H36P6)	82,549.30 75,556.920	69,732.24 92.2910	0.16 %	75,037.46 99.31	- 5,305.22	3.80 %	2,644.49	227.72
FEDERAL NATL MTG ASSN POOL BO3250 03.500% DUE 11/01/2049 RATING: N/A (3140JXTG3)	30,440.71 28,236.560	26,051.90 92.2630	0.06 %	29,385.88 104.07	- 3,333.98	3.80 %	988.28	85.10

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL BO7237 03.500% DUE 01/01/2050 RATING: N/A (3140K3BF8)	55,825.77 50,468.280	46,603.42 92.3420	0.11 %	53,039.02 105.09	- 6,435.60	3.80 %	1,766.39	152.11
FEDERAL NATL MTG ASSN POOL BU8919 02.500% DUE 04/01/2052 RATING: N/A (3140MA4D3)	59,011.40 62,117.650	53,079.53 85.4500	0.12 %	58,914.72 94.84	- 5,835.19	2.93 %	1,552.94	133.73
FEDERAL NATL MTG ASSN POOL BU8922 02.500% DUE 04/01/2052 RATING: N/A (3140MA4G6)	73,935.16 75,989.270	64,808.21 85.2860	0.15 %	72,059.22 94.83	- 7,251.01	2.94 %	1,899.73	163.59
FEDERAL NATL MTG ASSN POOL BU1240 03.000% DUE 03/01/2052 RATING: N/A (3140M2LW0)	152,730.24 152,895.300	135,667.06 88.7320	0.30 %	155,099.15 101.44	- 19,432.09	3.39 %	4,586.86	394.98
FEDERAL NATL MTG ASSN POOL BU1349 03.000% DUE 02/01/2052 RATING: N/A (3140M2QB1)	117,824.37 119,056.440	105,648.30 88.7380	0.23 %	122,423.51 102.83	- 16,775.21	3.39 %	3,571.69	307.56
FEDERAL NATL MTG ASSN POOL CB1113 02.000% DUE 07/01/2051 RATING: N/A (3140QLGX8)	151,225.64 165,541.950	135,140.17 81.6350	0.30 %	146,595.16 88.56	- 11,454.99	2.45 %	3,310.84	285.10
FEDERAL NATL MTG ASSN POOL CB2538 02.500% DUE 01/01/2052 RATING: N/A (3140QMZC1)	30,795.86 31,787.900	27,164.67 85.4560	0.06 %	29,711.75 93.47	- 2,547.08	2.93 %	794.70	68.43

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL CB3564 02.500% DUE 05/01/2052 RATING: N/A (3140QN6A5)	80,476.98 84,290.050	72,035.12 85.4610	0.16 %	76,503.10 90.76	- 4,467.98	2.93 %	2,107.25	181.46
FEDERAL NATL MTG ASSN POOL CB3565 02.500% DUE 05/01/2052 RATING: N/A (3140QN6B3)	64,626.10 66,039.290	56,369.16 85.3570	0.13 %	59,917.78 90.73	- 3,548.62	2.93 %	1,650.98	142.17
FEDERAL NATL MTG ASSN POOL CA1354 03.500% DUE 03/01/2048 RATING: N/A (3140Q8QG3)	121,605.39 111,684.620	103,073.74 92.2900	0.23 %	111,004.04 99.39	- 7,930.30	3.80 %	3,908.96	336.61
FEDERAL NATL MTG ASSN POOL CA2369 04.500% DUE 09/01/2048 RATING: N/A (3140Q9T37)	13,240.60 10,738.960	10,515.16 97.9160	0.03 %	11,205.43 104.34	- 690.27	4.60 %	483.25	41.61
FEDERAL NATL MTG ASSN POOL CA2370 04.500% DUE 09/01/2048 RATING: N/A (3140Q9T45)	18,778.03 15,083.010	14,787.38 98.0400	0.04 %	15,738.18 104.34	- 950.80	4.59 %	678.74	58.45
FEDERAL NATL MTG ASSN POOL FS0967 02.500% DUE 03/01/2052 RATING: N/A (3140XGCD9)	108,348.64 111,619.640	95,401.31 85.4700	0.21 %	106,265.38 95.20	- 10,864.07	2.93 %	2,790.49	240.29
FEDERAL NATL MTG ASSN POOL #725424 05.500% DUE 04/01/2034 RATING: N/A (31402C4H2)	2,458.43 2,006.864	2,053.26 102.3120	0.01 %	2,023.52 100.83	29.74	5.38 %	110.38	9.50

Detail

Agency bonds

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL #725946 05.500% DUE 11/01/2034 RATING: N/A (31402DP79)	4,725.65 3,692.117	3,777.88 102.3230	0.01 %	3,617.46 97.98	160.42	5.38 %	203.07	17.49
FEDERAL NATL MTG ASSN POOL #735224 05.500% DUE 02/01/2035 RATING: N/A (31402QYV7)	14,246.65 11,127.682	11,385.62 102.3180	0.03 %	11,805.78 106.09	- 420.16	5.38 %	612.02	52.70
FEDERAL NATL MTG ASSN POOL # 880611 05.500% DUE 03/01/2036 RATING: N/A (31409WKY6)	870.20 769.210	787.29 102.3510	0.01 %	752.95 97.89	34.34	5.38 %	42.31	3.64
FEDERAL NATL MTG ASSN POOL #906237 VAR % DUE 01/01/2037 RATING: N/A (31411EZA8)	693.60 296.863	292.63 98.5730	0.01 %	299.33 100.83	- 6.70	4.09 %	11.96	1.03
FEDERAL NATL MTG ASSN POOL AB6801 03.500% DUE 11/01/2042 RATING: N/A (31417DRX3)	13,866.91 12,405.210	11,614.50 93.6260	0.03 %	13,088.46 105.51	- 1,473.96	3.74 %	434.18	37.39
FEDERAL NATL MTG ASSN POOL AB7462 03.500% DUE 01/01/2043 RATING: N/A (31417EJG7)	14,334.05 13,042.990	12,211.63 93.6260	0.03 %	13,761.39 105.51	- 1,549.76	3.74 %	456.50	39.31
FEDERAL NATL MTG ASSN POOL # AC8518 05.000% DUE 12/01/2039 RATING: N/A (31417VPC1)	5,181.92 4,326.450	4,345.66 100.4440	0.01 %	4,620.51 106.80	- 274.85	4.98 %	216.32	18.63

Detail

Agency bonds

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
FEDERAL NATL MTG ASSN POOL MA0200 04.500% DUE 10/01/2029 RATING: N/A (31417YGJ0)	204,926.26 158,255.200	153,613.57 97.0670	0.34 %	169,258.89 106.95	- 15,645.32	4.64 %	7,121.48	613.24
FEDERAL NATL MTG ASSN POOL AE9758 04.000% DUE 12/01/2040 RATING: N/A (31419LZY2)	13,002.17 11,326.890	10,890.69 96.1490	0.03 %	11,900.33 105.06	- 1,009.64	4.17 %	453.08	39.01
GOVT NATL MTG ASSN II POOL MA3662 03.000% DUE 05/20/2046 RATING: N/A (36179SB71)	27,238.44 24,762.580	22,518.35 90.9370	0.05 %	25,135.92 101.51	- 2,617.57	3.30 %	742.88	63.97
Total agency bonds		**$2,467,455.00**	**5.32 %**	**$2,717,247.52**	**- $249,792.52**	**3.40 %**	**$83,931.88**	**$7,487.57**

Mortgages

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
JPMBB COMMERCIAL MORTGAGE SECU SERIES 2014 C26 CLASS AS 03.799% DUE 01/15/2048 RATING: AA1 (46643TBE1)	$48,272.50 50,000	$47,052.50 $94.1050	0.11 %	$50,214.85 $100.43	- $3,162.35	4.04 %	$1,899.80	$158.32
LEHMAN XS TRUST SERIES 2007-4N CLASS M1 VAR % DUE 03/25/2047 RATING: C (52524HAN0) (MARKET VALUE AS OF 07/01/10)	1	0.0010	0.01 %	0.22 * 22.00	- 0.22		0.01	0.04
Total mortgages		**$47,052.50**	**0.10 %**	**$50,215.07**	**- $3,162.57**	**4.04 %**	**$1,899.81**	**$158.36**

Detail

Asset backed

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
AMERICREDIT AUTOMOBILE RECEIVA SERIES 2023 1 CLASS A2A 05.900% DUE 10/19/2026 RATING: AAA (03067BAB5)	40,000	$39,995.60 $99.9890	0.09 %	$39,999.76 $100.00	- $4.16	5.85 %	$2,336.00	$84.36
CNH EQUIPMENT TRUST SERIES 2022 C CLASS A2 05.420% DUE 07/15/2026 RATING: AAA (12664JAB6)	47,000	46,852.42 99.6860	0.11 %	46,999.85 100.00	- 147.43	5.44 %	2,547.40	113.22
CARMAX AUTO OWNER TRUST SERIES 2023 1 CLASS A2 05.230% DUE 01/15/2026 RATING: N/A (14318DAB5)	44,000	43,837.64 99.6310	0.10 %	43,995.73 99.99	- 158.09	5.25 %	2,301.20	102.28
CARVANA AUTO RECEIVABLES TRUST SERIES 2021 N2 CLASS B 00.750% DUE 03/10/2028 RATING: N/A (14686KAC1)	27,817.94 18,476.370	16,947.45 91.7250	0.04 %	18,476.07 100.00	- 1,528.62	0.82 %	138.57	8.08
CARVANA AUTO RECEIVABLES TRUST SERIES 2021 N1 CLASS C 01.300% DUE 01/10/2028 RATING: N/A (14687DAC6)	33,577.02 14,698.470	13,657.52 92.9180	0.03 %	14,698.00 100.00	- 1,040.48	1.40 %	191.08	11.15
CARVANA AUTO RECEIVABLES TRUST SERIES 2021 N3 CLASS C 01.020% DUE 06/10/2028 RATING: N/A (14687GAD7)	18,255.20 7,429.070	7,015.87 94.4380	0.02 %	7,427.86 99.98	- 411.99	1.09 %	75.78	4.63
CARVANA AUTO RECEIVABLES TRUST SERIES 2021 N4 CLASS A1 00.830% DUE 09/10/2028 RATING: N/A (14687HAA1)	16,013.02 6,204.600	6,053.39 97.5630	0.02 %	6,204.08 99.99	- 150.69	0.86 %	51.50	3.00

Detail

Asset backed

Description (Cusip)	Market value last period / Quantity	Current market value / Current price per unit	% of total portfolio	Total tax cost / Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
CARVANA AUTO RECEIVABLES TRUST SERIES 2021 P4 CLASS B 01.980% DUE 02/10/2028 RATING: N/A (14687KAE6)	61,032.30 70,000	60,426.80 86.3240	0.14 %	69,972.85 99.96	- 9,546.05	2.30 %	1,386.00	80.85
EXETER AUTOMOBILE RECEIVABLES SERIES 2022 6A CLASS A2 06.230% DUE 11/17/2025 RATING: AAA (30168AAB8)	30,197.040	30,171.37 99.9150	0.07 %	30,196.76 100.00	- 25.39	5.74 %	1,730.29	76.90
FORD CREDIT AUTO LEASE TRUST SERIES 2023 A CLASS A2 05.190% DUE 06/15/2025 RATING: N/A (345287AB2)	44,000	43,855.24 99.6710	0.10 %	43,995.97 99.99	- 140.73	5.21 %	2,283.60	101.49
HONDA AUTO RECEIVABLES OWNER SERIES 2023 2 CLASS A4 04.640% DUE 09/17/2029 RATING: AAA (437927AD8)	51,000	50,596.59 99.2090	0.11 %	50,988.74 99.98	- 392.15	4.95 %	2,504.10	111.29
NISSAN AUTO LEASE TRUST SERIES 2023 B CLASS A3 05.920% DUE 07/15/2026 RATING: AAA (65473FAD9)	41,000	40,996.68 99.9919	0.09 %	40,996.68 99.99		5.93 %	2,427.20	20.23
NISSAN AUTO LEASE TRUST SERIES 2023 A CLASS A2 05.520% DUE 03/17/2025 RATING: N/A (65480VAB9)	44,000	43,814.32 99.5780	0.10 %	43,997.01 99.99	- 182.69	5.13 %	2,244.00	99.73

Detail

Asset backed

Description (Cusip)	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
WORLD OMNI SELECT AUTO TRUST SERIES 2023 A CLASS A2A 05.920% DUE 03/15/2027 RATING: N/A (98163UAB6)	59,000	58,890.26 99.8140	0.13 %	58,997.68 100.00	- 107.42	5.94 %	3,492.80	155.24
Total asset backed		**$503,111.15**	**1.09 %**	**$516,947.04**	**- $13,835.89**	**4.71 %**	**$23,709.52**	**$972.45**
Total fixed income		**$15,226,117.76**	**32.85 %**	**$16,346,185.25**	**- $1,120,067.49**	**3.38 %**	**$514,291.67**	**$85,859.54**

Equities

Other equity

	Description	Market value last period Quantity	Current market value Current price per unit	% of total portfolio	Total tax cost Avg. tax cost per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
*	BERNSTEIN GLOBAL STYLE BLEND	$27,360,993.00 440,204.229	$29,901,929.00 $67.9270	64.66 %	$16,567,222.00 $37.64	$13,334,707.00			
	Total portfolio		$46,247,572.69		$34,014,455.91				

Retirement Plan for Employees of The Uniontown Hospital

EIN 25-0965588 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended June 30, 2023

Identity of Party Involved	Description	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
	Category (iii) – Series of Transactions in Excess of 5% of Plan Assets					
U.S. Treasury	USA Treasury Notes 02.750% Due 07/31/2027	$ 2,635,527	$ -	$ 2,635,527	$ 2,635,527	$ -
U.S. Treasury	USA Treasury Notes 02.750% Due 07/31/2027	-	1,950,046	2,042,685	1,950,046	(92,639)
U.S. Treasury	USA Treasury Notes 02.750% Due 08/15/2032	1,320,090	-	1,320,090	1,320,090	-
U.S. Treasury	USA Treasury Notes 02.750% Due 08/15/2032	-	1,313,196	1,320,090	1,313,196	(6,894)
U.S. Treasury	USA Treasury Notes 04.125% Due 11/15/2032	2,537,444	-	2,537,444	2,537,444	-
U.S. Treasury	USA Treasury Notes 04.125% Due 11/15/2032	-	1,043,986	1,036,048	1,043,986	7,938
U.S. Treasury	USA Treasury Notes Treasury Inflation Protect Secs 00.375% Due 07/15/2027	1,012,401	-	1,012,401	1,012,401	-
U.S. Treasury	USA Treasury Notes Treasury Inflation Protect Secs 00.375% Due 07/15/2027	-	2,062,098	2,017,416	2,062,098	44,682
Federated Hermes	Federated Hermes Government Obligations Fund #07	3,104,169	-	3,104,169	3,104,169	-
Federated Hermes	Federated Hermes Government Obligations Fund #07	-	3,586,023	3,586,023	3,586,023	-

There were no category (i), (ii) or (iv) reportable transactions during the year.

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

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

▶ **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
RETIREMENT PLAN FOR EMPLOYEES OF THE UNIONTOWN HOSPITAL

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THE UNIONTOWN HOSPITAL

D Employer Identification Number (EIN)
25-0965588

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

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

Part I Basic Information

1 Enter the valuation date: Month 07 Day 01 Year 2022

2 Assets:

a Market value	**2a**	47,247,712
b Actuarial value	**2b**	51,972,483

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	683	38,264,118	38,264,118
b For terminated vested participants	183	6,985,236	6,985,236
c For active participants	203	8,139,096	8,210,166
d Total	1,069	53,388,450	53,459,520

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**	5.34%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	612,000
c Total (line 6a + line 6b)	**6c**	612,000

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

4/3/2024
Date

David Weaver
Type or print name of actuary

2307592
Most recent enrollment number

Acrisure
Firm name

412-394-9992
Telephone number (including area code)

Four Gateway Center, Suite 605

Pittsburgh PA 15222
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of -12.28 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		445,091
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.50 %		24,480
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		469,571
	d Portion of (c) to be added to prefunding balance		469,571
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	469,571

Part III Funding Percentages

14	Funding target attainment percentage	14	96.34 %
15	Adjusted funding target attainment percentage	15	96.34 %
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	109.51 %
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
07/15/2022	152,667	0			
03/11/2024	186,728	0			
			Totals ► 18(b)	339,395	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	323,340

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [ ] Yes [X] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [ ] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

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

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

21 Discount rate:

	1st segment:	2nd segment:	3rd segment:	
a Segment rates:	4.75 %	5.18 %	5.92%	☐ 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 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? 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**	612,000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	1,956,608	180,813
b Waiver amortization installment		

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	792,813

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	469,571	469,571

36 Additional cash requirement (line 34 minus line 35)	**36**	323,242
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	323,340
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	98
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 the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☒ 2020 ☐ 2021