

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 <h1 style="margin: 0;">2024</h1> This Form is Open to Public Inspection
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II Basic Plan Information—enter all requested information

1a Name of plan <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER</u> <u>ONE GUSTAVE L. LEVY PLACE</u> <u>1190 FIFTH AVENUE</u> <u>NEW YORK, NY 10029</u>	1c Effective date of plan <u>11/01/1985</u> 2b Employer Identification Number (EIN) <u>13-2997301</u> 2c Plan Sponsor's telephone number <u>212-241-5069</u> 2d Business code (see instructions) <u>622000</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	FRANK DEFONTES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor ST. LUKES-ROOSEVELT HOSPITAL CENTER FRANK DEFONTES 150 EAST 42ND STREET 2ND FLOOR NEW YORK, NY 10017	3b Administrator's EIN 13-2997301 3c Administrator's telephone number 646-605-4704																				
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 2509																				
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;">6a(1)</td><td style="text-align: right;">294</td></tr> <tr><td>6a(2)</td><td style="text-align: right;">274</td></tr> <tr><td>6b</td><td style="text-align: right;">1146</td></tr> <tr><td>6c</td><td style="text-align: right;">901</td></tr> <tr><td>6d</td><td style="text-align: right;">2321</td></tr> <tr><td>6e</td><td style="text-align: right;">162</td></tr> <tr><td>6f</td><td style="text-align: right;">2483</td></tr> <tr><td>6g(1)</td><td></td></tr> <tr><td>6g(2)</td><td></td></tr> <tr><td>6h</td><td></td></tr> </table>	6a(1)	294	6a(2)	274	6b	1146	6c	901	6d	2321	6e	162	6f	2483	6g(1)		6g(2)		6h	
6a(1)	294																				
6a(2)	274																				
6b	1146																				
6c	901																				
6d	2321																				
6e	162																				
6f	2483																				
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 1A 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) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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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) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u> 0 </u> (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

A Name of plan <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER</u>	D Employer Identification Number (EIN) <u>13-2997301</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>138747378</u>
	b Actuarial value	2b	<u>149727962</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>1222</u>	<u>88814126</u>
	b For terminated vested participants	<u>996</u>	<u>47665729</u>
	c For active participants	<u>294</u>	<u>16786915</u>
	d Total	<u>2512</u>	<u>153266770</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.07 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>1844000</u>
	c Target normal cost	6c	<u>1844000</u>

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

SIGN HERE		
	Signature of actuary	<u>09/21/2025</u> Date
	<u>MARK GENGENBACH, FSA, EA</u> Type or print name of actuary	<u>23-07102</u> Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u> Firm name	<u>212-309-3740</u> Telephone number (including area code)
	<u>200 LIBERTY STREET FLOOR 6 NEW YORK, NY 10281</u> Address of the firm	

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

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	13176699
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	13176699
10	Interest on line 9 using prior year's actual return of <u>11.03</u> %	0	1453390
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2045316
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.20</u> %		106356
	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		2151672
	d Portion of (c) to be added to prefunding balance		2150000
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	16780089

Part III Funding Percentages			
14	Funding target attainment percentage	14	86.59 %
15	Adjusted funding target attainment percentage	15	86.59 %
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	83.56 %
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		
01/15/2025	1500000	0					
04/01/2025	1500000	0					
06/02/2025	1500000	0					
07/02/2025	500000	0					
08/01/2025	1000000	0					
			Totals ▶	18(b)	6000000	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	5622131

20 Quarterly contributions and liquidity shortfalls:

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

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

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> 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) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> 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.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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	1844000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	20586676	1982832	
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	3826832	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	3333490	3333490
36 Additional cash requirement (line 34 minus line 35)	36	493342	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	5622131	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	5128789	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	3333490	
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. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021	

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ST. LUKES-ROOSEVELT HOSPITAL CENTER	D Employer Identification Number (EIN) 13-2997301	

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)

WILLIS TOWERS WATSON US LLC

53-0181291

(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	389674	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BLACKROCK FINANCIAL MANAGEMENT INC.

13-3806691

(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 51	NONE	193217	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PRINCIPAL FINANCIAL GROUP

42-1520346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 50	NONE	128218	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

PRIME, BUCHHOLZ & ASSOCIATES

02-0426421

(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 51	NONE	107183	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WISS & COMPANY, LLP

22-1732349

(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?
10 50	NONE	26000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ST. LUKES-ROOSEVELT HOSPITAL CENTER	D Employer Identification Number (EIN) 13-2997301

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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	7050000	6000000
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	1259186	4102700
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3560886	14741815
(2) U.S. Government securities	1c(2)	24518131	27420876
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	80985078	64522294
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	2690422	4991456
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	22437214	16671043
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	1478644

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	142500917	139928828
Liabilities			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h	3649151	7328518
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	236309	233497
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	3885460	7562015
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	138615457	132366813

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)	6000000	
(B) Participants.....	2a(1)(B)	0	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		6000000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	251765	
(B) U.S. Government securities.....	2b(1)(B)	1032204	
(C) Corporate debt instruments.....	2b(1)(C)	3831349	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	0	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		5115318
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	460958	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		460958
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	317616147	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	320410882	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-2794735
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	-2177901	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		-2177901

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	0
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total.....	2d	6603640

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	10490583
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other.....	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	10490583
f Corrective distributions (see instructions)	2f	0
g Certain deemed distributions of participant loans (see instructions).....	2g	0
h Interest expense.....	2h	0
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	0
(2) Contract administrator fees	2i(2)	0
(3) Recordkeeping fees	2i(3)	0
(4) IQPA audit fees	2i(4)	26000
(5) Investment advisory and investment management fees	2i(5)	300400
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	389674
(8) Legal fees	2i(8)	0
(9) Valuation/appraisal fees	2i(9)	0
(10) Other trustee fees and expenses	2i(10)	128218
(11) Other expenses.....	2i(11)	1517409
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	2361701
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j	12852284

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k	-6248644
l Transfers of assets:		
(1) To this plan.....	2l(1)	0
(2) From this plan	2l(2)	0

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

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

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: **WISS & COMPANY, LLP**

(2) EIN: **22-1732349**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		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.)		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.)		X	
e Was this plan covered by a fidelity bond?	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		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?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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 547619.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>ST. LUKES-ROOSEVELT HOSPITAL CENTER</u>	D Employer Identification Number (EIN) <u>13-2997301</u>	

Part I	Distributions
---------------	----------------------

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 42-1520346

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		5
---	--	---

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: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> 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. <input type="checkbox"/> 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) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: 13.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 75.0 %
 High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 12.0 % Other: 0.0 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
 0-5 years 5-10 years 10-15 years 15 years or more

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: _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? Yes No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.



**ST. LUKE'S ROOSEVELT HOSPITAL CENTER
EMPLOYEES' PENSION PLAN**

**FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES
DECEMBER 31, 2024 AND 2023**

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

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Florham Park, NJ 07932
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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of
St. Luke's Roosevelt Hospital Center Employees' Pension Plan

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

We have performed audits of the accompanying financial statements of St. Luke's Roosevelt Hospital Center Employees' Pension Plan (the "Plan"), 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 December 31, 2024 and 2023, 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 the Plan'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 ("DOL") 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 December 31, 2024 and 2023, and for the years then ended, stating that the certified investment information, as described in Note 3 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 Auditors' 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).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our 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 the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

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 auditors' 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 the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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 Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule H, Part IV, Line 4i- Schedule of Assets (Held At End of Year) as of December 31, 2024, and Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions for the year ended December 31, 2024, 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 their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- the 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, is 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).

Wiss & Company

WISS & COMPANY, LLP

Florham Park, New Jersey
October 10, 2025

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2024	2023
ASSETS		
Investments, at fair value		
Cash and equivalents	\$ 14,741,815	\$ 3,560,886
Government bonds and agencies	27,420,876	24,518,131
Corporate bonds and notes	64,522,294	80,985,078
Asset-backed securities	1,478,644	-
Mutual funds	16,671,043	17,076,893
Alternative investments	4,991,456	8,050,743
Total investments, at fair value	129,826,128	134,191,731
Contribution receivable from St. Luke's-Roosevelt Hospital Center	6,000,000	7,050,000
Interest and dividends receivable	4,102,700	1,259,186
Total receivables	10,102,700	8,309,186
Total assets	139,928,828	142,500,917
LIABILITIES		
Net unsettled securities payable	7,328,518	3,649,151
Accrued expenses	233,497	236,309
Total liabilities	7,562,015	3,885,460
 NET ASSETS AVAILABLE FOR BENEFITS	 \$ 132,366,813	 \$ 138,615,457

See accompanying notes to financial statements.

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Year Ended December 31,	
	2024	2023
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment (loss) /income:		
Net (depreciation) /appreciation in fair value of investments	\$ (4,972,636)	\$ 8,683,544
Interest	5,115,318	4,841,801
Dividends	460,958	327,145
	603,640	13,852,490
Less investment expenses	265,280	342,962
	338,360	13,509,528
Contributions from St. Luke's Roosevelt Hospital Center	6,000,000	7,050,000
Other income	-	8,017
	6,338,360	20,567,545
 DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to Plan participants	10,490,583	10,100,245
Administrative expenses	2,096,421	2,393,494
Total Deductions	12,587,004	12,493,739
(Decrease) /increase in net assets available for benefits	(6,248,644)	8,073,806
 NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	138,615,457	130,541,651
End of year	\$ 132,366,813	\$ 138,615,457

See accompanying notes to financial statements.

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

1. Description of the Plan:

The following brief description of The St. Luke's Roosevelt Hospital Center Employees' Pension Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan, which provides retirement, disability, and death benefits, is a noncontributory defined benefit pension plan sponsored by St. Luke's Roosevelt Hospital Center (the "Hospital Center") which is affiliated with Mount Sinai Health System, Inc. The Plan was established November 1, 1985, concurrent with the termination of the Hospital Center's predecessor defined benefit pension plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

On May 1, 2007, the Hospital Center approved freezing the Plan effective May 12, 2007 and shifted participants to its defined contribution plan. As of May 12, 2007, employees are no longer eligible to participate in the Plan and no participants accrue additional benefits.

On April 25, 2012, the Board of Trustees of the Hospital Center and the Beth Israel Medical Center Kings Highway Division ("Kings Highway") approved a Plan merger with the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan. The effective date for the Plan merger was September 30, 2012.

Plan Administration

The Plan is administered by the Hospital Center. The Plan's assets are held by Principal Bank (the "Trustee") who is responsible for the custody, management, and recordkeeper of the Plan's assets.

Eligibility and Vesting Period

Prior to the Hospital Center's Plan being frozen, each covered employee with a work schedule of at least 17.5 hours per week is eligible to participate in the Plan as of their date of hire. Covered employees who work less than 17.5 hours are eligible to participate in the Plan as of their hire date if they work at least 1,000 hours during the first 12 months of employment. If a covered employee does not complete 1,000 hours during this initial 12-month period, the employee is eligible to participate in the Plan following the completion of 1,000 hours during any calendar year. Certain employees covered under a collective bargaining agreement, employees in the Hospital Center's 403(b) Tax-Sheltered Annuity Plan, leased employees, and employees included in any other pension plan to which the Hospital Center contributes are not eligible for the Plan.

Participating employees are vested in the accumulated normal retirement benefit upon the earlier of a) accrual of five years of vesting service, or b) attainment of normal retirement age at age 65.

For Kings Highway, in general, all full-time employees (excluding employees covered by collective bargaining agreements and certain other employees) are eligible to participate upon attaining the age of 21 and completing six months of service.

Vesting is based on total service after age 21 according to the following schedule:

Less than five years	0%
Five years or more	100%

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

Normal Retirement Benefit

For the Hospital Center, the Plan provides for full retirement benefits to each participant who continues in active service until age 65 and is entitled to retire and receive a normal retirement income, regardless of the participant's number of years of service. A participant's normal retirement income shall be non-forfeitable upon the attainment of age 65 or 5 years of service. Retirement income is based on compensation and years of credited service with the Hospital Center. If a participant works past normal retirement age, they will continue to accrue a retirement benefit; however, if they work fewer than 40 hours of service in any month, payment of benefits must begin.

A participant becomes eligible for early retirement upon the attainment of age 50 and completion of at least 10 years of service. Participants may elect to receive their early retirement benefits before age 65; however, their benefits will be reduced to provide for early payment.

For Kings Highway, under the terms of the Plan, participants are eligible for monthly pension benefits upon reaching (i) the normal retirement age of 65 or (ii) the first day of the fifth plan year after they are a participant in the Plan, equal to the greater of \$225 or 15% of average compensation (highest consecutive five years up to \$1,667 plus 30% of any excess, pro-rated for service less than 30 years). Participants are entitled to receive monthly retirement benefits commencing on the first day of the month following their normal retirement date.

Death Benefits

For the Hospital Center, if a participant dies before retirement benefits begin and is married and vested at the time of death, their spouse will be eligible to receive a lifetime survivor annuity based on the accrued benefit of the participant, regardless of whether they were eligible for early or normal retirement benefits. If the participant dies before age 50, the amount of the spouse's survivor benefit will be 50% of the benefit the participant would have received if they had terminated employment on the date of death, survived to age 50, and elected a 50% joint and survivor annuity. If the participant dies after age 50, the amount of the spouse's survivor benefit will be 50% of the benefit they would have received if they had retired on the day of the participant's death with a 50% joint and survivor annuity benefit in effect. Furthermore, after age 50, if the participant dies as an active employee with at least ten years of service, survivor benefits are not reduced for early payment.

If a participant dies after the pension benefits have begun, benefits may continue to the participant's designated beneficiary based on the form of benefit payment elected by the participant and their beneficiary.

For Kings Highway, if a participant dies after distribution of his or her benefits has commenced, the remaining portion of such interest will continue to be distributed at least as rapidly as under the method of distribution being used prior to the participant's death.

If the participant dies before distribution of his or her benefits commences, the participant's entire death benefit, if any, will be distributed no later than the December 31 of the calendar year containing the fifth anniversary of the Participant's death except to the extent that an election is made to receive distributions in accordance with (a) or (b) below:

- (a) If any portion of the Participant's interest is payable to a beneficiary, distributions may be made in substantially equal installments over the life or over a period certain not greater than the life expectancy of the Beneficiary commencing on or before December 31 of the calendar year immediately following the calendar year in which the participant died.

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- (b) If the beneficiary is the participant's surviving spouse, the date distributions are required to begin in accordance with (a) above shall be the later of December 31 of the calendar year immediately following the calendar year in which the participant died, and December 31 of the calendar year in which the participant would have attained age 72.

Disability Benefits

For the Hospital Center, all participants who are totally and permanently disabled and are in receipt of social security disability benefits and have completed ten years of vesting service are eligible to receive disability benefits based upon annual compensation up to the date of disability. If a disabled participant defers payment until age 65, the benefit is determined as if they remained employed until normal retirement at the rate of compensation on the date of disability.

For Kings Highway, any participant who incurs a disability is eligible to retire and is entitled to receive a 100% vested interest in the actuarial equivalent of his or her accrued benefit.

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 and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenues and expenses during the reporting period. Actual results, as determined at a later date, could differ from those estimates.

Cash and Equivalents

Cash and equivalents include highly liquid short-term investments purchased with maturities of three months or less.

Net Unsettled Securities Payable

The Plan will record a payable in circumstances where purchases of investments do not settle until after year end.

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 4 for a discussion of fair value measurements.

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

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated Plan participants or their beneficiaries; (b) beneficiaries of employees who have died; and (c) present employees or their beneficiaries. Effective April 15, 1994, the Plan was amended for a change in the benefit formula for retired or terminated Plan participants or their beneficiaries through April 14,

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

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1994 based on the participants' highest average of any five consecutive years' compensation paid prior to retirement. For years of service subsequent to April 14, 1994, benefits are calculated using 2% of each year's annual earnings accumulated through retirement or termination. The accumulated Plan benefits for active participants are based on their highest average of any five consecutive years' compensation paid through April 14, 1994 and 2% of each year's annual earnings through the May 12, 2007 plan freeze. Benefits payable under all circumstances – retirement, death, disability, and termination of employment- are included to the extent they are deemed attributable to employee services rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount which 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 actuarial present value of accumulated plan benefits as of January 1, 2024 is as follows:

Actuarial present value of accumulated plan benefits	
Vested	
Participants currently receiving payments	\$ 89,519,300
Other participants	<u>66,635,697</u>
	156,154,997
Nonvested benefits	<u>231,008</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 156,386,005</u>

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

Actuarial present value of accumulated plan benefits, January 1, 2023	\$ 157,721,727
Changes during the year due to:	
Actuarial losses	982,760
Decrease in the discount period	7,636,155
Actual benefits paid	(10,120,706)
Assumption changes	<u>166,069</u>
Present value of the accumulated benefits as of January 1, 2024	<u>\$ 156,386,005</u>

Significant assumptions underlying the actuarial computations follow:

Actuarial cost method	Present value of accumulated benefits
Discount rate	5.00%
Mortality basis	**
Average retirement age	Age 64

** The mortality basis for benefit obligations was updated as of January 1, 2021. A new mortality improvement scale has not been subsequently released, and as such, the mortality basis used for benefit obligations as of January 1, 2024, is unchanged from the mortality basis used for benefit

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obligations as of January 1, 2023. The mortality basis used is the Pri-2012 employee, healthy retiree, and contingent survivor mortality tables without collar adjustments, projected with MP-2021 generational improvement scale.

Actuarial assumptions for plan funding 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.

Payment of Benefits

Benefit payments to participants are recorded when distributed.

Administrative Expenses

Administrative expenses consisting of Trustee fees, investment advisory fees, auditing fees and actuarial services are paid out of the assets of the Plan and are recorded as deductions in the accompanying Statements of Changes in Net Assets Available for Benefits. Contributions to the Plan by the Hospital Center include amounts sufficient to fund payment of these expenses. Other administrative expenses are paid directly by the Hospital Center and are excluded from these financial statements. In addition, certain investment related expenses are included in net (depreciation)/appreciation of fair value of investments presented in the accompanying Statements of Changes in Net Assets Available for Benefits.

Subsequent Events

The Plan Administrator has reviewed and evaluated all events and transactions from December 31, 2024 through October 10, 2025, the date the financial statements were available to be issued. The effects of those events and transactions that provide additional pertinent information about conditions that existed at the Statements of Net Assets Available for Benefits date have been recognized in the accompanying financial statements.

3. Certified Investment Information:

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 Disclosures under ERISA. Accordingly, the Trustee, a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate:

- Investments, interest and dividends receivable, and net unsettled securities payable, as shown in the Statements of Net Assets Available for Benefits as of December 31, 2024 and 2023.
- Investment (loss)/income, as shown in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2024 and 2023.
- Investment information included in the Schedule H, Part IV, Line 4i- Schedule of Assets (Held at End of Year), as of December 31, 2024, as shown on the ERISA-required supplemental schedule of assets (held at end of year).
- Investment information included in the Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions, for the year ended December 31, 2024, as shown on the ERISA-required supplemental schedule of reportable transactions.

At the request of the Plan Administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified information, except for comparing such certified investment

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

information to the related investment information included in the financial statements and ERISA-required supplemental schedule of assets (held at end of year).

4. Fair Value Measurements:

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

- Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 - Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices that are observable for the asset or liability;
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

- *Mutual funds*: Valued at the closing price reported in the active market in which the individual security is traded.
- *Corporate bonds and notes*: Corporate bonds and notes are valued based on yields currently available on comparable securities of issuers with similar credit ratings.
- *Government bonds and agencies*: Valued at the closing price reported in the active market in which the individual security is traded. Other government bonds and agencies are valued based on yields currently available on comparable securities of issuers with similar credit ratings.
- *Cash and equivalents*: Valued at the closing price in the active market in which they are traded.
- *Asset-backed securities*: Valued based on observable market inputs such as benchmark yield curves, credit spreads, and ratings from independent agencies. Some of the asset-backed

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securities are valued using a combination of the discounted cash flow method and market approach, including guideline company and transaction analyses.

- *Alternative investments*: Valued at the per share net asset value (NAV) of the investment as of the investor's measurement date. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities.

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

The following tables set forth by Level, within the fair value hierarchy, the Plan's investments at fair value:

	<i>Investments at Fair Value as of December 31, 2024</i>			
	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Total</i>
Corporate bonds and notes	\$ -	\$ 64,522,294	\$ -	\$ 64,522,294
Asset-backed securities	-	1,418,644	60,000	1,478,644
Government bonds and agencies	21,660,666	5,760,210	-	27,420,876
Mutual funds	16,671,043	-	-	16,671,043
Cash and equivalents	14,741,815	-	-	14,741,815
Total assets in the fair value hierarchy	<u>\$ 53,073,524</u>	<u>\$ 71,701,148</u>	<u>\$ 60,000</u>	124,834,672
Investments measured at net asset value (a):				
Alternative investments				<u>4,991,456</u>
Total investments at fair value				<u>\$ 129,826,128</u>

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

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

<i>Investments at Fair Value as of December 31, 2023</i>				
	<i>Level 1</i>	<i>Level 2</i>	<i>Level 3</i>	<i>Total</i>
Corporate bonds and notes	\$ -	\$ 80,985,078	\$ -	\$ 80,985,078
Government bonds and agencies	21,117,043	3,401,088	-	24,518,131
Mutual funds	17,076,893	-	-	17,076,893
Cash and equivalents	3,560,886	-	-	3,560,886
Total assets in the fair value hierarchy	<u>\$ 41,754,822</u>	<u>\$ 84,386,166</u>	<u>\$ -</u>	126,140,988
Investments measured at net asset value (a):				
Alternative investments				<u>8,050,743</u>
Total investments at fair value				<u>\$ 134,191,731</u>

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

Level 3 Gains and Losses:

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 investments for the year ended December 31, 2024:

Balance, beginning of year	\$ -
Purchases	59,850
Unrealized gains	<u>150</u>
Balance, end of year	<u>\$ 60,000</u>
 The amount of total gains for the period attributable to the change in unrealized gains or losses relating to assets	 <u>\$ 150</u>

Quantitative Information about Unobservable Inputs Used in Level 3 Measurements:

The following table represents the Plan's level 3 financial instruments, the valuation techniques used to measure the fair value of those instruments as of December 31, 2024, and the significant unobservable inputs and the ranges of values for those inputs:

Investment	Fair Value 12/31/2024	Principal Valuation Techniques	Significant Unobservable Inputs	Range of Significant Input Values	Weighted Average
BFLD Trust	\$ 60,000	Discounted Cash Flows & Market Approach	Discount Rate Duration (years) Volatility Marketability discount	2%-4% 2-5 years 20%-60% 10%-30%	5%-10%

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

Fair Value of Investments in Entities that Use Net Asset Value:

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as follows:

December 31, 2024	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Alternative Investments:				
SSgA S&P Tobacco Free Index Common Trust Fund	\$ 4,991,456	Not applicable	Daily	None
Total alternative investments	\$ 4,991,456			

December 31, 2023	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Alternative Investments:				
SSgA S&P Tobacco Free Index Common Trust Fund	\$ 5,360,321	Not applicable	Daily	None
Echo Street Goodco Select II LP	2,690,422	Not applicable	Last day of calendar month	30 days notice
Total alternative investments	\$ 8,050,743			

Transfers Between Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period. For the years ended December 31, 2024 and 2023, there were no significant transfers in or out of Levels 1, 2, or 3.

5. Risks and Uncertainties and Concentration of Investment Risk:

The Plan invests in various investment securities. Investment securities, in general, are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect participant's account balances and the amounts reported in the financial statements.

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

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

The Plan may invest in securities with contractual cash flows, such as asset backed securities, collateralized mortgage obligations and commercial mortgage backed securities, including securities backed by sub-prime mortgage loans. The value, liquidity and related income of these securities are sensitive to changes in economic conditions, including real estate value, delinquencies or defaults, or both, and may be adversely affected by shifts in the market's perception of the issuers and changes in interest rates.

The Plan held no investments in funds greater than 10% of total investments at December 31, 2024 and 2023.

6. **Party-in-Interest:**

Certain Plan investments are managed by the Trustee of the Plan. The Plan also utilizes an actuary which provides actuarial services to the Plan. Such transactions qualify as party-in-interest. Fees paid by the Plan for such Trustee services for the years ending December 31, 2024 and 2023 were \$128,218 and \$81,592, respectively. Fees paid by the plan for actuarial services included in administrative expenses totaled \$389,674 and \$303,801 for the years ended December 31, 2024 and 2023, respectively.

7. **Funding Policy:**

The Hospital Center contributed the amount necessary on an actuarial basis to provide the Plan with assets sufficient to meet the current and future obligations to participants.

The contributions of the Hospital Center are designed to fund the Plan's current service costs on a current basis and to fund the estimated accrued benefit cost arising from qualifying service before the establishment of the Plan. The yield on investments of the Plan serves to reduce future contributions that would otherwise be required to provide for the defined level of benefits under the Plan.

Although it has not expressed any intention to do so, the Hospital Center 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.

8. **Plan Termination:**

Although it has not expressed any intention to do so, the Hospital Center has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts. Should the Plan terminate, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide benefits in the order indicated:

- Annuity benefits to participants or their beneficiaries for (a) those have received Plan benefits for at least three years before the termination date and (b) those who could have started receiving benefits at least three years before the termination date. The priority amount is limited to the

ST. LUKE'S ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

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 the Plan provisions in effect at any time during the five years preceding Plan termination.

- Other vested benefits that are insured by the Pension Benefit Guaranty Corporation ("PBGC").
- All other vested benefits that are not insured by the PBGC.
- Any other nonvested benefits earned in the Plan. This includes those benefits which became vested only because of Plan termination.

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

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.

9. Tax Status:

The Internal Revenue Service has determined and informed the Hospital Center by a letter dated February 15, 2018, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax period in progress.

SUPPLEMENTAL SCHEDULES

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Cash and Equivalents *			
* AllSpring Govt MMF		\$ 2,063,527	\$ 2,063,527
* AllSpring Govt MMF		5,316,711	5,316,711
* AllSpring Govt MMF		6,946,397	6,946,397
Cash Collateral		415,180	415,180
Total Cash and Equivalents		14,741,815	14,741,815
Government Bonds and Agencies			
US Treasury Bond	due 02/15/2052, 385,000 units	326,101	233,402
US Treasury Bond	due 08/15/2042, 515,000 units	479,678	433,361
US Treasury Bond	due 11/15/2052, 700,000 units	723,890	609,777
US Treasury Bond	due 02/15/2053, 1,100,000 units	923,315	893,739
US Treasury Bond	due 05/15/2043, 600,000 units	565,296	528,060
US Treasury Bond	due 08/15/2053, 615,000 units	603,254	547,744
US Treasury Bond	due 08/15/2043, 780,000 units	730,947	733,918
US Treasury Bond	due 05/15/2044, 980,000 units	993,630	950,071
US Treasury Bond	due 08/15/2044, 500,000 units	463,218	452,485
US Treasury Bond	due 08/15/2034, 525,000 units	527,660	496,409
US Treasury Bond	due 05/15/2040, 1,010,000 units	984,274	966,166
US Treasury Bond	due 08/15/2042, 2,325,000 units	1,773,090	1,746,726
US Treasury Bond	due 05/15/2043, 2,500,000 units	1,930,083	1,893,550
US Treasury Bond	due 08/15/2043, 500,000 units	463,302	423,540
US Treasury Bond	due 02/15/2044, 1,045,000 units	1,355,561	881,740
US Treasury Bond	due 08/15/2044, 6,747,900 units	7,733,056	5,240,554
US Treasury Bond	due 05/15/2047, 475,000 units	371,149	351,025
US Treasury Bond	due 08/15/2047, 325,000 units	234,736	228,560
US Treasury Bond	due 11/15/2048, 560,000 units	482,454	437,377
US Treasury Bond	due 05/15/2049, 1,000,000 units	785,275	708,870
US Treasury Bond	due 08/15/2049, 90,000 units	60,659	55,723
US Treasury Bond	due 08/15/2040, 1,915,000 units	1,193,887	1,141,857
US Treasury Bond	due 02/15/2041, 122,000 units	116,968	81,729
US Treasury Bond	due 11/15/2051, 2,945,000 units	2,041,203	1,624,285
Fed NatL MTG	due 01/01/2041, 3,950,000 units	3,585,364	3,493,459
Republic of Chile	due 01/05/2054, 283,000 units	287,387	261,498
Republic of Peru	due 08/08/2054, 224,000 units	228,183	213,436
Romania	due 01/17/2053, 444,000 units	491,167	448,746
State of Israel	due 03/12/2054, 571,000 units	527,904	522,145
United Mexican States	due 05/04/2053, 200,000 units	191,200	177,964
United Mexican States	due 05/07/2054, 718,000 units	707,639	642,962
Total Government Bonds and Agencies		31,881,528	27,420,876
Corporate Bonds and Notes			
AP Grange Holdings	200,000 units	200,000	205,619
Aviation Capital Group	due 09/20/2026, 192,000 units	191,518	182,258
Bayer US Finance II LLC	due 06/25/2048, 230,000 units	182,192	179,195
Broadcom Inc	due 02/15/2051, 488,000 units	365,180	363,184

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Broadcom Inc	due 02/15/2041, 95,000 units	\$ 76,857	\$ 74,188
Cameron LnG LLC	due 01/15/2039, 83,000 units	71,900	66,900
DCP Midstream LLC	due 09/15/2037, 257,000 units	275,782	276,105
First Energy Transmission	due 07/15/2044, 22,000 units	22,127	21,063
First Energy Transmission	due 04/01/2049, 180,000 units	161,054	150,691
Glencore Funding LLC	due 09/23/2051, 45,000 units	33,708	29,411
New York Life Insurance	due 05/15/2069, 44,000 units	35,872	34,002
Northwest Florida Timber	due 03/04/2029, 180,000 units	177,269	170,332
Allstate Corp	due 08/15/2053, 350,000 units	369,706	350,049
American Tower Corp	due 10/15/2049, 27,000 units	20,531	19,551
American Tower Corp	due 06/15/2050, 38,000 units	29,340	24,375
American Tower Corp	due 01/15/2051, 34,000 units	21,947	21,024
Bank of America Corp	due 10/24/2051, 247,000 units	160,035	151,989
Bank of America Corp	due 07/21/2052, 1,115,000 units	765,027	708,783
Citigroup Inc	due 05/18/2046, 190,000 units	172,404	166,957
Crown Castle Intl Corp	due 01/15/2051, 162,000 units	109,229	105,545
Deutsche Bank NY	due 01/07/2033, 400,000 units	326,099	338,864
Equinix Inc	due 09/15/2051, 140,000 units	93,312	85,876
Goldman Sachs Group Inc	due 07/08/2024, 207,000 units	201,672	182,961
Intercontinental Exchange	due 09/15/2060, 43,000 units	27,060	24,980
JPMorgan Chase & Co	due 02/01/2044, 21,000 units	20,672	19,327
JPMorgan Chase & Co	due 02/22/2048, 71,000 units	61,480	58,786
JPMorgan Chase & Co	due 11/15/2048, 181,000 units	149,026	141,528
JPMorgan Chase & Co	due 01/23/2049, 165,000 units	135,046	127,118
JPMorgan Chase & Co	due 04/22/2051, 165,000 units	321,575	306,446
JPMorgan Chase & Co	due 04/22/2042, 211,000 units	162,365	154,929
JPMorgan Chase & Co	due 04/22/2052, 127,000 units	95,407	86,841
Morgan Stanley	due 01/25/2052, 614,000 units	414,116	374,982
State Street Corp	due 06/15/2037, 95,000 units	78,375	87,655
Wells Fargo & Company	due 01/15/2044, 36,000 units	35,912	34,447
Wells Fargo & Company	due 11/04/2044, 34,000 units	29,695	28,619
Wells Fargo & Company	due 11/17/2045, 33,000 units	29,650	28,600
Wells Fargo & Company	due 06/14/2046, 26,000 units	20,608	20,877
Wells Fargo & Company	due 12/07/2046, 218,000 units	192,787	183,772
3M Company	due 09/19/2046, 28,000 units	20,206	19,127
3M Company	due 04/15/2050, 213,000 units	166,206	156,259
Abbvie Inc	due 11/06/2042, 183,000 units	170,182	158,390
Abbvie Inc	due 05/14/2045, 72,000 units	66,578	63,529
Abbvie Inc	due 05/14/2046, 31,000 units	30,213	26,351
Abbvie Inc	due 11/14/2048, 61,000 units	60,770	54,774
Abbvie Inc	due 11/21/2039, 9,000 units	8,297	7,689
Abbvie Inc	due 11/21/2049, 593,000 units	511,511	482,133
Abbvie Inc	due 10/01/2042, 33,000 units	30,487	29,198
Abbvie Inc	due 06/15/2044, 38,000 units	36,760	34,442
Abbvie Inc	due 03/15/2045, 27,000 units	25,071	24,080
AdventHealth OBL GRP	due 11/15/2051, 65,000 units	65,000	40,510
AEP Transmission Co LLC	due 09/15/2048, 60,000 units	50,141	47,924
AEP Transmission Co LLC	due 04/01/2050, 77,000 units	57,495	55,616
AEP Transmission Co LLC	due 08/15/2051, 82,000 units	52,014	49,248
Aetna Inc	due 11/15/2042, 25,000 units	19,954	19,522
Aetna Inc	due 03/15/2044, 149,000 units	143,643	123,306
Aetna Inc	due 08/15/2047, 217,000 units	161,434	151,807
Alabama Power Co	due 03/01/2045, 50,000 units	40,203	38,282

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Alabama Power Co	due 07/15/2048, 84,000 units	\$ 69,188	\$ 68,912
Alabama Power Co	due 10/01/2049, 26,000 units	18,533	18,351
Alabama Power Co	due 07/15/2051, 49,000 units	33,454	32,200
Alabama Power Co	due 03/15/2052, 35,000 units	25,206	22,466
Alexandria Real Estate	due 02/01/2050, 46,000 units	44,391	34,143
Amazon.com Inc	due 08/22/2047, 49,000 units	41,756	40,489
Amazon.com Inc	due 08/22/2057, 23,000 units	19,858	18,834
Amazon.com Inc	due 06/03/2060, 297,000 units	184,628	170,374
Amazon.com Inc	due 05/12/2051, 50,000 units	34,748	33,702
Amazon.com Inc	due 05/12/2061, 175,000 units	126,009	113,857
Amgen Inc	due 06/15/2048, 72,000 units	62,945	59,945
Amgen Inc	due 06/15/2051, 74,000 units	64,728	61,958
Amgen Inc	due 02/21/2050, 176,000 units	128,737	120,270
Amgen Inc	due 09/01/2053, 35,000 units	21,270	20,333
Amgen Inc	due 01/15/2052, 803,000 units	603,701	506,637
Amgen Inc	due 02/22/2052, 101,000 units	81,143	77,991
Amgen Inc	due 02/22/2062, 222,000 units	192,759	172,323
Analog Devices Inc	due 12/15/2045, 30,000 units	29,550	28,735
Anheuser-Busch Cos LLC	due 02/01/2046, 63,000 units	62,254	57,290
Anheuser-Busch Inbev Fin	due 02/01/2046, 65,000 units	61,035	58,776
Anheuser-Busch Inbev Fin	due 02/01/2044, 395,000 units	370,727	351,684
Anheuser-Busch Inbev Wor	due 10/06/2048, 365,000 units	392,531	308,159
Anheuser-Busch Inbev Wor	due 01/23/2048, 91,000 units	105,154	89,511
Anheuser-Busch Inbev Wor	due 01/23/2059, 256,000 units	273,173	260,677
Anheuser-Busch Inbev Wor	due 01/15/2042, 28,000 units	26,910	26,021
Anthem Inc	due 12/01/2047, 25,000 units	21,248	20,151
Anthem Inc	due 03/15/2051, 117,000 units	84,801	81,402
Aon Corp/Aon Global Hold	due 08/23/2051, 196,000 units	124,106	118,997
Apple Inc	due 08/20/2050, 65,000 units	40,490	38,384
Apple Inc	due 08/20/2060, 33,000 units	20,355	19,283
Applied Materials	due 04/01/2047, 30,000 units	30,094	25,410
Applied Materials	due 06/01/2050, 40,000 units	26,101	24,944
Arthur J Gallagher	due 03/09/2052, 32,000 units	28,122	19,952
AT&T Inc	due 09/15/2053, 66,000 units	58,319	44,440
AT&T Inc	due 09/15/2055, 1,084,000 units	861,402	729,088
AT&T Inc	due 9/15/2059, 197,000 units	137,592	130,487
Atmos Energy Corp	due 10/01/2048, 113,000 units	94,858	92,698
Atmos Energy Corp	due 02/15/2052, 230,000 units	166,334	140,574
Baltimore Gas & Electric	due 09/15/2048, 10,000 units	8,096	7,993
Baltimore Gas & Electric	due 09/15/2049, 192,000 units	173,749	126,837
Baltimore Gas & Electric	due 06/15/2050, 50,000 units	40,997	31,220
Banner Health	due 01/01/2050, 24,000 units	16,625	16,079
Banner Health	due 01/01/2042, 50,000 units	50,000	35,509
Barrick NA Finance LLC	due 05/30/2041, 18,000 units	18,501	17,660
Bat Capital Corp	due 08/15/2047, 43,000 units	32,765	33,911
Bat Capital Corp	due 09/06/2049, 43,000 units	33,278	34,808
Bat Capital Corp	due 04/02/2050, 17,000 units	15,824	14,890
Becton Dickinson and Co	due 06/06/2047, 31,000 units	29,840	26,533
Becton Dickinson and Co	due 05/20/2050, 41,000 units	30,822	30,263
Berkshire Hathaway Energy	due 01/15/2049, 62,000 units	53,249	51,142
Berkshire Hathaway Energy	due 10/15/2050, 67,000 units	52,511	52,891
Berkshire Hathaway Energy	due 05/15/2051, 53,000 units	34,199	32,370
Boeing Co	due 11/01/2048, 115,000 units	108,698	78,841

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Boeing Co	due 03/01/2059, 117,000 units	\$ 78,416	\$ 75,322
Boeing Co	due 05/01/2049, 223,000 units	167,498	155,212
Boeing Co	due 02/01/2050, 261,000 units	181,522	178,012
Boeing Co	due 08/01/2059, 214,000 units	153,007	141,289
Boeing Co	due 05/01/2050, 526,000 units	564,038	489,259
Boeing Co	due 05/01/2060, 659,000 units	641,456	609,779
Boston University	due 10/01/2048, 45,000 units	45,000	37,105
Burlington North Santa	due 03/15/2043, 291,000 units	267,531	252,987
Burlington North Santa	due 06/15/2048, 31,000 units	24,770	24,679
Burlington North Santa	due 12/15/2048, 23,000 units	19,256	18,436
Burlington North Santa	due 02/15/2050, 70,000 units	54,059	50,581
Burlington North Santa	due 02/15/2051, 60,000 units	40,070	39,391
Burlington North Santa	due 09/15/2051, 30,000 units	20,622	20,567
Burlington North Santa	due 06/15/2052, 102,000 units	66,166	63,459
California Institute of	due 11/01/2111, 23,000 units	21,364	18,733
California Institute of	due 09/01/2119, 52,000 units	37,616	33,054
Carolina Power & Light	due 03/15/2043, 105,000 units	95,848	85,763
CBS Corp	due 08/15/2044, 36,000 units	28,318	27,252
CBS Corp	due 01/15/2045, 108,000 units	82,551	79,210
Charter Comm Opt	due 05/01/2047, 136,000 units	113,450	111,625
Charter Comm Opt	due 04/01/2048, 662,000 units	591,521	565,904
Charter Comm Opt	due 07/01/2049, 72,000 units	61,618	56,359
Charter Comm Opt	due 03/01/2050, 789,000 units	647,754	592,665
Charter Comm Opt	due 04/01/2051, 52,000 units	32,948	32,482
Charter Comm Opt	due 04/01/2061, 670,000 units	416,046	403,735
Charter Comm Opt	due 06/01/2052, 261,000 units	176,186	167,904
Charter Comm Opt	due 12/01/2061, 436,000 units	299,008	290,215
Charter Comm Opt	due 06/30/2062, 318,000 units	197,032	193,707
Chevron USA Inc	due 08/12/2050, 67,000 units	40,227	37,659
Children's Hospital	due 07/01/2050, 31,000 units	20,609	19,162
CMS Energy Corp	due 03/31/2043, 43,000 units	38,573	36,575
CMS Energy Corp	due 03/01/2044, 50,000 units	46,054	44,491
Comcast Corp	due 08/15/2047, 39,000 units	31,440	29,755
Comcast Corp	due 11/01/2047, 35,000 units	27,842	26,522
Comcast Corp	due 11/01/2049, 183,000 units	181,341	138,388
Comcast Corp	due 03/01/2048, 47,000 units	37,756	35,693
Comcast Corp	due 10/15/2048, 51,000 units	46,413	43,740
Comcast Corp	due 10/15/2058, 35,000 units	32,245	30,250
Comcast Corp	due 01/15/2051, 67,000 units	46,954	39,821
Comcast Corp	due 08/15/2052, 53,000 units	29,656	28,786
Commonspirit Health	due 10/01/2049, 26,000 units	20,320	19,284
Commonspirit Health	due 10/01/2050, 237,000 units	254,294	174,423
Consumers Energy Co	due 07/15/2047, 34,000 units	27,439	26,595
Consumers Energy Co	due 05/15/2048, 12,000 units	9,630	9,553
Consumers Energy Co	due 04/15/2049, 12,000 units	10,008	9,969
Consumers Energy Co	due 02/15/2050, 71,000 units	68,301	53,731
Consumers Energy Co	due 08/01/2051, 30,000 units	22,982	21,835
Consumers Energy Co	due 08/15/2052, 36,000 units	22,701	21,701
CSX Corp	due 05/30/2042, 22,000 units	20,545	19,899
CSX Corp	due 03/15/2044, 50,000 units	42,745	40,950
CSX Corp	due 03/01/2048, 59,000 units	58,127	48,569
CSX Corp	due 11/15/2048, 39,000 units	35,507	34,330
CSX Corp	due 03/15/2049, 69,000 units	61,233	58,534

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
CSX Corp	due 09/15/2049, 52,000 units	\$ 37,583	\$ 36,067
CSX Corp	due 04/15/2050, 63,000 units	49,910	47,374
CSX Corp	due 05/15/2051, 44,000 units	28,115	25,440
Cummins Inc	due 09/01/2030, 32,000 units	20,038	19,058
CVS Health Corp	due 07/20/2045, 27,000 units	24,315	22,684
Danaher Corp	due 10/01/2050, 32,000 units	20,104	19,049
DCP Midstream Operating	due 04/01/2044, 60,000 units	55,452	56,080
Diamondback Energy Inc	due 03/24/2051, 79,000 units	68,213	61,208
Dominion Energy Inc	due 04/15/2041, 25,000 units	24,978	18,412
Dominion Resources Inc	due 09/15/2042, 25,000 units	19,471	19,750
Dominion Resources Inc	due 12/01/2044, 51,000 units	44,676	43,284
DowDupont Inc	due 11/15/2038, 157,000 units	161,838	157,465
DowDupont Inc	due 11/15/2048, 114,000 units	112,689	113,389
DTE Electric Co	due 08/15/2047, 114,000 units	88,852	85,806
DTE Electric Co	due 03/01/2049, 128,000 units	103,750	99,779
Duke Energy Carolinas	due 09/30/2042, 24,000 units	20,061	19,492
Duke Energy Carolinas	due 03/15/2048, 145,000 units	115,188	111,085
Duke Energy Carolinas	due 08/15/2049, 128,000 units	104,405	85,292
Duke Energy Carolinas	due 04/15/2051, 18,000 units	12,326	12,419
Duke Energy Corp	due 09/01/2046, 70,000 units	53,138	51,538
Duke Energy Corp	due 08/15/2047, 64,000 units	48,604	47,621
Duke Energy Corp	due 06/15/2041, 43,000 units	32,440	31,557
Duke Energy Corp	due 06/15/2051, 28,000 units	19,452	18,891
Duke Energy Progress LLC	due 10/15/2046, 14,000 units	10,395	10,377
Duke Energy Progress LLC	due 08/15/2050, 135,000 units	86,021	78,100
Duke Energy Progress LLC	due 08/15/2051, 106,000 units	103,446	65,512
Duke University Health	due 10/01/2055, 36,000 units	23,809	22,360
Eastman Chemical Co	due 09/01/2042, 38,000 units	43,599	33,082
Eli Lilly & Co	due 03/15/2059, 94,000 units	87,869	73,762
Eli Lilly & Co	due 05/15/2050, 33,000 units	19,685	18,547
Energy Transfer Operating	due 05/15/2050, 113,000 units	98,855	95,865
Energy Transfer Operating	due 04/15/2049, 18,000 units	18,774	18,015
Energy Transfer Partners	due 02/01/2042, 206,000 units	216,555	213,332
Energy Transfer Partners	due 02/01/2043, 114,000 units	101,732	100,456
Energy Transfer Partners	due 10/01/2043, 57,000 units	57,789	55,316
Energy Transfer Partners	due 03/15/2045, 194,000 units	176,005	169,775
Energy Transfer Partners	due 04/15/2047, 20,000 units	18,573	17,687
Energy Transfer Partners	due 06/15/2048, 179,000 units	176,990	172,898
Enterprise Prods Oper	due 02/15/2048, 137,000 units	114,333	109,911
Enterprise Prods Oper	due 01/31/2050, 46,000 units	37,652	36,182
Enterprise Prods Oper	due 01/31/2051, 120,000 units	89,455	85,979
Enterprise Prods Oper	due 02/15/2052, 55,000 units	36,842	35,723
Enterprise Prods Oper	due 02/15/2053, 70,000 units	49,522	46,016
Exxon Mobile Corporation	due 04/15/2051, 344,000 units	267,293	241,141
Fedex Corp	due 04/15/2043, 135,000 units	112,343	107,183
Fedex Corp	due 10/17/2048, 123,000 units	124,814	107,346
Fidelity Natl Info Serv	due 03/01/2041, 78,000 units	56,230	56,662
Firstenergy Corp	due 07/15/2047, 41,000 units	36,481	34,970
Firstenergy Corp	due 03/01/2050, 419,000 units	283,215	284,518
Fiserv Inc	due 07/01/2049, 166,000 units	142,367	135,527
Florida Power & Light	due 10/01/2044, 54,000 units	46,603	43,984
Florida Power & Light	due 03/01/2048, 48,000 units	40,621	37,683
Florida Power & Light	due 06/01/2048, 25,000 units	20,780	19,995

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Florida Power & Light	due 03/01/2049, 123,000 units	\$ 112,434	\$ 96,136
Florida Power Corp	due 04/01/2040, 166,000 units	196,345	167,047
Florida Power Light	due 12/04/2051, 122,000 units	81,416	76,254
Ford Motor Company	due 01/15/2043, 379,000 units	309,940	298,781
Freeport-McMoran C& G	due 03/15/2043, 199,000 units	191,630	185,934
General Dynamics Corp	due 04/01/2040, 22,000 units	21,743	19,201
General Dynamics Corp	due 06/01/2041, 65,000 units	46,791	46,344
General Motors Co	due 04/01/2045, 288,000 units	259,747	249,719
General Motors Co	due 04/01/2048, 117,000 units	107,890	102,790
General Motors Co	due 04/01/2049, 61,000 units	60,033	57,624
George Washington Univer	due 09/15/2046, 171,000 units	171,000	126,795
Georgetown University	due 04/01/2049, 13,000 units	11,227	10,799
Georgetown University	due 04/01/2050, 38,000 units	38,000	24,432
Georgia Power Co	due 01/30/2050, 64,000 units	48,323	46,983
Georgia Power Co	due 03/15/2051, 31,000 units	20,443	20,896
Gilead Sciences Inc	due 04/01/2044, 51,000 units	47,420	45,643
Gilead Sciences Inc	due 02/01/2045, 89,000 units	80,216	76,285
Gilead Sciences Inc	due 03/01/2046, 99,000 units	92,297	87,227
Gilead Sciences Inc	due 10/01/2040, 102,000 units	70,258	70,528
Gilead Sciences Inc	due 10/01/2050, 648,000 units	435,536	398,280
HCA Inc	due 06/15/2047, 51,000 units	53,233	46,307
HCA Inc	due 06/15/2049, 52,000 units	46,008	44,990
HCA Inc	due 07/15/2051, 73,000 units	52,298	47,213
Hess Corp	due 02/15/2041, 227,000 units	263,581	224,181
Hess Corp	due 04/01/2047, 142,000 units	142,937	142,089
Home Depot Inc	due 03/15/2045, 22,000 units	19,455	18,790
Home Depot Inc	due 04/01/2046, 28,000 units	24,454	23,291
Home Depot Inc	due 09/15/2056, 38,000 units	27,855	26,343
Home Depot Inc	due 06/15/2047, 34,000 units	30,880	26,599
Home Depot Inc	due 12/06/2048, 80,000 units	71,308	68,336
Home Depot Inc	due 04/15/2050, 97,000 units	70,609	67,624
Home Depot Inc	due 03/15/2051, 58,000 units	36,584	32,817
Home Depot Inc	due 09/15/2051, 100,000 units	63,904	61,006
Humana Inc	due 08/15/2049, 130,000 units	99,957	93,496
Intel Corp	due 11/15/2049, 105,000 units	71,813	62,682
Intel Corp	due 02/15/2060, 34,000 units	20,076	18,148
International Paper Co	due 05/15/2046, 82,000 units	78,080	74,124
Interpublic Group Co	due 10/01/2048, 205,000 units	221,950	193,315
Kaiser Foundation Hospital	due 05/01/2047, 200,000 units	184,353	163,140
Kinder Morgan Ener Part	due 03/01/2041, 255,000 units	284,585	260,516
Kinder Morgan Inc	due 08/01/2050, 16,000 units	10,535	10,133
KLA Corp	due 03/01/2050, 142,000 units	102,736	98,077
KLA-Tencor Corp	due 03/15/2049, 162,000 units	183,298	149,019
Kraft Heinz Food Co	due 10/01/2049, 30,000 units	27,168	25,644
Kraft Heinz Food Co	due 06/01/2050, 33,000 units	32,411	30,959
Lam Research Corp	due 06/15/2050, 365,000 units	251,397	230,549
Lockheed Martin Corp	due 09/15/2052, 42,000 units	35,314	33,222
Lockheed Martin Corp	due 06/15/2050, 30,000 units	19,870	18,778
Lowe's Cos Inc	due 09/15/2044, 48,000 units	39,970	37,181
Lowe's Cos Inc	due 04/15/2046, 105,000 units	82,633	77,688
Lowe's Cos Inc	due 05/03/2047, 37,000 units	28,658	28,728
Lowe's Cos Inc	due 04/05/2049, 30,000 units	27,908	24,678
Lowe's Cos Inc	due 04/15/2040, 21,000 units	20,140	19,627

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Lowe's Cos Inc	due 04/15/2050, 21,000 units	\$ 19,828	\$ 18,794
Lowe's Cos Inc	due 04/01/2051, 85,000 units	59,614	57,967
LYB Int Finance III	due 05/01/2050, 26,000 units	20,423	19,387
Marsh & McLennan Cos Inc	due 03/01/2048, 73,000 units	70,610	59,137
Martin Marietta	due 07/15/2051, 40,000 units	27,592	25,897
Mass Institute of Tech	due 07/01/2114, 21,000 units	19,312	17,693
Memorial Health Services	due 11/01/2049, 15,000 units	10,689	10,659
Micro Technology Inc	due 11/01/2051, 95,000 units	68,233	64,131
MidAmerican Energy Co	due 08/01/2047, 133,000 units	106,369	103,449
MidAmerican Energy Co	due 08/01/2048, 91,000 units	71,005	67,434
MidAmerican Energy Co	due 07/15/2049, 144,000 units	128,962	116,718
MidAmerican Energy Co	due 04/15/2050, 56,000 units	39,358	37,574
Motorola Solutions Inc	due 09/01/2044, 82,000 units	83,213	78,945
Nisource Finance Corp	due 06/15/2041, 7,000 units	6,933	7,077
Nisource Finance Corp	due 02/01/2042, 69,000 units	77,595	66,793
Nisource Finance Corp	due 02/15/2043, 20,000 units	18,272	18,624
Nisource Finance Corp	due 02/15/2044, 59,000 units	53,078	52,105
Nisource Finance Corp	due 02/01/2045, 20,000 units	19,413	19,529
Norfolk Southern Corp	due 06/15/2045, 154,000 units	150,755	130,273
Norfolk Southern Corp	due 08/15/2052, 167,000 units	173,613	128,146
Norfolk Southern Corp	due 11/01/2047, 32,000 units	25,720	24,601
Norfolk Southern Corp	due 02/28/2048, 135,000 units	110,952	107,353
Norfolk Southern Corp	due 05/15/2055, 76,000 units	50,770	48,002
Norfolk Southern Corp	due 08/25/2051, 44,000 units	28,516	27,103
Norfolk Southern Corp	due 03/15/2053, 31,000 units	30,818	22,279
Northern State PWR	due 03/01/2050, 60,000 units	58,843	38,385
Northern State PWR	due 06/01/2051, 119,000 units	85,909	71,056
Northern State PWR	due 04/01/2052, 54,000 units	37,661	36,197
Northrop Grumman Corp	due 10/15/2047, 52,000 units	45,793	40,822
Northrop Grumman Corp	due 05/01/2050, 118,000 units	123,913	110,498
Northwell Healthcare Inc	due 11/01/2047, 24,000 units	19,875	19,187
Northwell Healthcare Inc	due 11/01/2049, 135,000 units	129,105	99,588
Northwestern University	due 12/01/2044, 48,000 units	45,656	43,901
Nucor Corp	due 12/15/2055, 32,000 units	29,139	19,008
Nvidia Corp	due 04/01/2050, 86,000 units	76,559	63,906
Ohio Power Company	due 04/01/2048, 45,000 units	46,147	34,513
Ohio Power Company	due 06/01/2049, 34,000 units	26,855	25,484
Ohio Power Company	due 10/01/2051, 356,000 units	233,580	213,956
Oneok Inc	due 07/13/2047, 23,000 units	20,046	19,461
Oneok Inc	due 07/15/2048, 22,000 units	20,004	19,375
Oneok Inc	due 01/15/2051, 18,000 units	20,239	19,540
Oracle Corp	due 05/15/2055, 511,000 units	422,582	399,730
Oracle Corp	due 11/15/2047, 33,000 units	37,173	25,151
Oracle Corp	due 04/01/2050, 280,000 units	228,064	196,171
Oracle Corp	due 03/25/2051, 477,000 units	393,119	353,319
Pacific Gas & Electric	due 12/01/2046, 310,000 units	246,328	233,591
Pacific Gas & Electric	due 08/01/2050, 51,000 units	35,664	34,937
Pacific Gas & Electric	due 03/01/2052, 530,000 units	480,361	474,679
Pacific Gas & Electric Company	due 07/01/2050, 96,000 units	94,367	83,308
Pacificorp	due 03/15/2051, 71,000 units	47,577	46,090
Pacificorp	due 06/15/2052, 51,000 units	32,528	30,346
Peco Energy	due 09/15/2047, 41,000 units	31,768	30,702
Peco Energy	due 03/01/2048, 28,000 units	22,397	21,712

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Peco Energy	due 09/15/2049, 61,000 units	\$ 49,808	\$ 39,777
Pfizer Inc	due 12/15/2046, 27,000 units	22,695	21,763
Pfizer Inc	due 09/15/2048, 35,000 units	29,656	28,349
Pfizer Inc	due 03/15/2049, 163,000 units	134,568	127,927
Pfizer Inc	due 05/28/2050, 429,000 units	278,150	263,938
Prologis LP	due 10/15/2050, 112,000 units	61,077	58,703
Public Service Electric	due 05/01/2048, 24,000 units	20,049	19,079
Public Service Electric	due 05/01/2049, 25,000 units	20,062	19,150
Public Service Electric	due 08/01/2050, 116,000 units	66,382	61,050
Public Service Electric	due 03/01/2051, 76,000 units	52,566	49,110
Raytheon Tech Corp	due 12/15/2044, 26,000 units	20,857	20,753
Realty Income Corp	due 03/15/2035, 13,000 units	13,116	13,316
Reynolds American Inc	due 08/15/2045, 28,000 units	28,113	26,660
Reynolds American Inc	due 08/04/2041, 183,000 units	221,295	192,130
RTX Corporation	due 07/01/2050, 43,000 units	29,344	28,144
RTX Corporation	due 04/15/2047, 160,000 units	177,974	131,416
RTX Corporation	due 09/01/2051, 294,000 units	189,512	178,085
San Diego G & E	due 06/01/2047, 49,000 units	36,089	36,714
San Diego G & E	due 06/15/2049, 53,000 units	40,991	41,510
San Diego G & E	due 04/15/2050, 48,000 units	31,880	32,419
San Diego G & E	due 08/15/2051, 137,000 units	100,133	88,075
Sempra Energy	due 10/15/2039, 97,000 units	99,771	98,894
Sempra Energy	due 02/01/2038, 41,000 units	35,063	33,886
Sempra Energy	due 02/01/2048, 158,000 units	151,362	119,461
Sherwin-Williams Co	due 06/01/2047, 62,000 units	53,812	52,126
Sherwin-Williams Co	due 05/15/2050, 57,000 units	44,095	37,706
Sherwin-Williams Co	due 03/15/2052, 141,000 units	91,847	85,776
Southern Cal Edison	due 04/01/2047, 25,000 units	20,141	19,245
Southern Cal Edison	due 03/01/2048, 25,000 units	20,085	19,452
Southern Cal Edison	due 03/01/2049, 70,000 units	70,266	61,129
Southern Cal Edison	due 02/01/2050, 63,000 units	47,155	45,000
Southern Cal Edison	due 02/01/2051, 55,000 units	35,894	34,526
Southern Cal Edison	due 06/01/2051, 282,000 units	236,698	199,495
Southern Cal Edison	due 02/01/2052, 28,000 units	22,605	18,938
Southern Peru Copper Corp	due 04/16/2040, 124,000 units	136,600	132,735
Spectra Energy Partners	due 03/15/2045, 42,000 units	35,145	34,539
Steel Dynamics Inc	due 10/15/2050, 267,000 units	212,161	175,326
Sunoco Logistics Partner	due 01/15/2043, 19,000 units	16,223	16,354
Sunoco Logistics Partner	due 05/15/2045, 141,000 units	133,203	126,782
Sunoco Logistics Partner	due 10/01/2047, 397,000 units	388,082	356,677
Sutter Health	due 08/15/2040, 62,000 units	46,335	46,418
Sutter Health	due 08/15/2050, 132,000 units	122,542	92,771
T-Mobile USA Inc	due 04/15/2050, 184,000 units	174,786	150,867
T-Mobile USA Inc	due 02/15/2051, 285,000 units	213,913	187,969
T-Mobile USA Inc	due 11/15/2060, 65,000 units	45,123	42,895
Union Electric Co	due 04/01/2048, 76,000 units	58,099	58,990
Union Electric Co	due 10/01/2049, 60,000 units	42,232	41,347
Union Electric Co	due 03/15/2051, 70,000 units	43,609	41,309
Union Pac Corp	due 09/16/2062, 229,000 units	148,163	131,760
Union Pacific Corp	due 03/01/2046, 124,000 units	104,764	98,972
Union Pacific Corp	due 10/01/2051, 34,000 units	26,578	25,339
Union Pacific Corp	due 04/15/2047, 25,000 units	20,591	19,764
Union Pacific Corp	due 09/10/2048, 88,000 units	106,388	74,400

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Union Pacific Corp	due 08/15/2059, 34,000 units	\$ 26,202	\$ 24,720
Union Pacific Corp	due 05/20/2061, 15,000 units	10,039	10,003
Union Pacific Corp	due 03/10/2052, 112,000 units	73,798	70,706
United Technologies Corp	due 05/15/2045, 126,000 units	116,698	101,613
Unitedhealth Group	due 06/15/2037, 92,000 units	107,828	99,795
Unitedhealth Group	due 10/15/2040, 35,000 units	36,651	34,995
Unitedhealth Group	due 11/15/2041, 42,000 units	38,799	36,979
Unitedhealth Group	due 03/15/2042, 102,000 units	101,033	86,877
Unitedhealth Group	due 10/15/2042, 48,000 units	40,259	38,531
Unitedhealth Group	due 07/15/2045, 21,000 units	19,386	18,502
Unitedhealth Group	due 01/15/2047, 40,000 units	33,931	32,304
Unitedhealth Group	due 04/15/2047, 42,000 units	35,449	34,047
Unitedhealth Group	due 10/15/2047, 68,000 units	53,041	50,561
Unitedhealth Group	due 06/15/2048, 62,000 units	52,228	49,744
Unitedhealth Group	due 12/15/2048, 58,000 units	50,303	47,772
Unitedhealth Group	due 08/15/2039, 139,000 units	136,776	109,932
Unitedhealth Group	due 08/15/2049, 211,000 units	164,321	153,351
Unitedhealth Group	due 08/15/2059, 409,000 units	340,965	289,543
Unitedhealth Group	due 05/15/2050, 259,000 units	174,173	160,567
Unitedhealth Group	due 05/15/2041, 26,000 units	19,574	18,769
Unitedhealth Group	due 05/15/2051, 56,000 units	42,916	36,968
Univ of Southern Califor	due 10/01/2047, 37,000 units	32,669	29,754
Univ of Southern Califor	due 10/01/2051, 29,000 units	20,068	18,946
Verizon Communication	due 10/30/2056, 86,000 units	54,622	51,001
Viacom Inc	due 09/01/2043, 77,000 units	67,937	66,911
Virginia Electric & Power	due 05/15/2045, 27,000 units	22,093	21,849
Virginia Electric & Power	due 11/15/2046, 44,000 units	37,245	34,162
Virginia Electric & Power	due 09/15/2047, 26,000 units	20,281	19,482
Virginia Electric & Power	due 12/01/2049, 28,000 units	19,390	18,954
Virginia Electric & Power	due 12/15/2050, 164,000 units	98,396	92,291
Walt Disney Company	due 07/30/2046, 33,000 units	23,336	22,135
Wellpoint Inc	due 01/15/2043, 22,000 units	19,722	19,072
Wellpoint Inc	due 01/15/2044, 73,000 units	74,630	66,341
Wellpoint Inc	due 08/15/2054, 39,000 units	33,747	32,335
Wisconsin Electric Power	due 10/15/2048, 31,000 units	26,800	25,472
Wisconsin Public Service	due 09/01/2049, 92,000 units	63,014	63,150
6297782 LLC	due 10/01/2029, 75,000 units	74,995	73,695
AEP Transmission Co LLC	due 03/15/2053, 31,000 units	31,070	29,540
Amazon.com Inc	due 04/13/2052, 24,000 units	19,752	18,925
Amgen Inc	due 03/01/2053, 120,000 units	108,686	102,990
Amphenol Corp	due 11/15/2054, 35,000 units	34,450	33,271
Anthem Inc	due 05/15/2052, 164,000 units	139,465	132,182
Arthur J Gallagher & Co	due 02/15/2055, 29,000 units	28,819	27,844
Associated Banc	due 08/29/2030, 360,000 units	360,000	367,168
Atmos Energy Corp	due 12/15/2054, 35,000 units	34,751	31,526
Baltimore Gas & Electric	due 06/01/2052, 51,000 units	42,119	42,332
Baltimore Gas & Electric	due 06/01/2053, 24,000 units	23,393	22,842
Bank of America Corp	due 10/25/2035, 332,000 units	332,338	324,603
Bat Capital Corp	due 08/02/2043, 117,000 units	128,446	126,407
Bat Capital Corp	due 08/02/2053, 80,000 units	83,698	87,767
Bat Capital Corp	due 03/16/2052, 751,000 units	707,153	687,473
Berkshire Hathaway Energy	due 05/01/2053, 58,000 units	50,312	48,122
Blackstone Private Credit Fund	due 11/22/2034, 315,000 units	307,749	307,342

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Boeing Co	due 05/01/2064, 165,000 units	\$ 166,184	\$ 175,086
Boeing Co	due 05/01/2054, 133,000 units	133,000	141,359
Burlington North Santa	due 01/15/2053, 23,000 units	20,153	19,266
Burlington North Santa	due 03/15/2055, 19,000 units	20,812	18,664
Capital One Financial Co	due 05/10/2033, 67,000 units	66,183	65,243
Capital One Financial Co	due 07/26/2035, 226,000 units	230,534	227,315
Centerpoint Energy	due 05/15/2055, 180,000 units	180,000	179,005
Cheniere Corp Christi	due 12/31/2039, 58,000 units	46,616	46,212
Citigroup Inc	due 02/13/2035, 224,000 units	228,147	222,905
Comcast Corp	due 11/01/2063, 503,000 units	305,433	283,883
Comcast Corp	due 05/15/2053, 703,000 units	687,989	650,718
Conocophillips Company	due 03/15/2052, 175,000 units	136,836	127,752
Conocophillips Company	due 03/15/2062, 319,000 units	253,183	230,500
Conocophillips Company	due 03/15/2054, 20,000 units	19,921	19,227
Conocophillips Company	due 01/15/2065, 46,000 units	46,319	43,478
Constellation En Gen LLC	due 03/15/2054, 41,000 units	43,644	39,863
Consumers Energy Co	due 09/01/2052, 197,000 units	176,319	158,877
Coterra Energy Inc	due 02/15/2055, 192,000 units	191,930	181,106
CSX Corp	due 11/15/2052, 69,000 units	60,980	58,185
CSX Corp	due 03/15/2055, 67,000 units	67,184	59,840
Cummins Inc	due 02/20/2054, 34,000 units	33,945	33,085
CVS Health Corp	due 06/01/2054, 154,000 units	153,333	144,458
Devon Energy Corp	due 09/15/2054, 538,000 units	512,782	488,074
Diamondback Energy Inc	due 03/15/2052, 246,000 units	192,199	185,509
Diamondback Energy Inc	due 03/15/2053, 45,000 units	46,404	44,891
Diamondback Energy Inc	due 04/18/2054, 356,000 units	347,108	334,081
Diamondback Energy Inc	due 04/18/2064, 252,000 units	248,481	236,560
Dominion Energy Inc	due 06/01/2054, 39,000 units	39,000	41,183
Dominion Energy Inc	due 05/15/2055, 299,000 units	301,613	303,981
DTE Electric Co	due 04/01/2053, 101,000 units	104,028	97,939
Duke Energy Carolinas LLC	due 01/15/2053, 93,000 units	91,736	88,471
Duke Energy Carolinas LLC	due 01/15/2054, 96,000 units	95,364	91,950
Duke Energy Corp	due 09/15/2053, 19,000 units	20,058	19,300
Duke Energy Corp	due 06/15/2054, 93,000 units	93,861	90,591
Duke Energy Progress LLC	due 04/01/2052, 20,000 units	15,385	15,285
Duke University	due 10/01/2048, 29,000 units	24,926	23,461
Eastern Energy Gas	due 10/15/2054, 87,000 units	86,571	82,055
Elevance Health Inc	due 10/15/2052, 22,000 units	23,087	22,227
Elevance Health Inc	due 02/15/2055, 23,000 units	23,293	22,174
Elevance Health Inc	due 02/15/2053, 25,000 units	23,108	22,242
Elevance Health Inc	due 06/15/2037, 18,000 units	19,617	19,065
Eli Lilly & Co	due 02/09/2054, 73,000 units	70,661	67,088
Eli Lilly & Co	due 02/09/2064, 48,000 units	46,216	43,861
Eli Lilly & Co	due 08/14/2054, 20,000 units	20,689	18,526
Eli Lilly & Co	due 08/14/2064, 31,000 units	32,284	28,862
Energy Transfer LP	due 05/15/2054, 199,000 units	197,424	192,383
Energy Transfer LP	due 09/01/2054, 328,000 units	331,210	321,014
Enterprise Products Oper	due 02/16/2055, 95,000 units	94,937	91,387
Equinix Inc	due 09/15/2029, 157,000 units	156,950	155,008
Firstenergy Corp	due 04/01/2049, 27,000 units	23,844	22,604
Florida PWR & LT Co	due 04/01/2053, 24,000 units	23,778	22,862
Florida PWR & LT Co	due 06/15/2054, 59,000 units	61,991	58,869
FNB Corp	due 12/11/2030, 248,000 units	248,087	244,833

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Ford Motor Company	due 11/01/2046, 260,000 units	\$ 279,695	\$ 274,937
Ford Motor Credit Co LLC	due 03/08/2034, 767,000 units	762,122	750,425
Foundry JV Holdco LLC	due 01/25/2038, 322,000 units	331,563	325,352
Georgia Power Co	due 05/15/2052, 28,000 units	27,796	25,975
Gilead Sciences Inc	due 11/15/2054, 64,000 units	63,814	62,250
Glencore Funding LLC	due 04/04/2054, 177,000 units	179,867	171,717
GLP Capital LP	due 09/15/2054, 99,000 units	98,191	98,806
Goldman Sachs Group Inc	due 10/23/2035, 371,000 units	371,000	355,054
Goldman Sachs Group Inc	due 11/19/2045, 239,000 units	243,405	230,817
HCA Inc	due 03/15/2052, 298,000 units	243,808	232,553
HCA Inc	due 06/01/2053, 46,000 units	45,792	43,411
HCA Inc	due 04/01/2054, 42,000 units	42,191	40,010
HCA Inc	due 09/15/2054, 42,000 units	42,128	39,945
Hoag Memorial Hospital	due 07/15/2052, 41,000 units	41,000	31,077
Home Depot Inc	due 04/15/2052, 26,000 units	19,705	18,867
Home Depot Inc	due 09/15/2052, 75,000 units	71,023	68,282
Home Depot Inc	due 06/25/2054, 39,000 units	41,831	37,360
Home Depot Inc	due 06/25/2064, 61,000 units	62,601	58,471
Intel Corp	due 03/25/2060, 24,000 units	20,042	18,757
Intel Corp	due 08/05/2062, 24,000 units	20,264	18,727
Invitation Homes	due 08/15/2033, 72,000 units	72,575	71,579
Invitation Homes	due 02/01/2035, 34,000 units	33,611	32,165
Jersey Cent PWR	due 01/15/2035, 80,000 units	79,718	78,034
JPMorgan Chase & Co	due 11/29/2045, 186,000 units	186,000	181,564
Keycorp	due 03/06/2035, 698,000 units	722,195	726,485
Kinder Morgan Inc	due 08/01/2054, 182,000 units	181,806	177,809
KLA Corp	due 07/15/2062, 24,000 units	24,134	22,470
L3harris Tech Inc	due 07/31/2053, 184,000 units	181,039	178,110
Lockheed Martin Corp	due 06/15/2062, 43,000 units	34,719	34,088
Lockheed Martin Corp	due 11/15/2063, 50,000 units	53,471	52,181
Lockheed Martin Corp	due 02/15/2055, 20,000 units	19,684	18,840
Lockheed Martin Corp	due 02/15/2064, 42,000 units	41,231	38,955
Lowe's Cos Inc	due 04/15/2053, 20,000 units	19,861	19,220
Lowe's Cos Inc	due 09/15/2062, 63,000 units	64,573	60,973
Lowe's Cos Inc	due 07/01/2053, 72,000 units	73,051	70,495
Lowe's Cos Inc	due 04/01/2052, 25,000 units	20,310	19,511
M&T Bank Corporation	due 01/16/2036, 475,000 units	475,000	460,171
Martin Marietta	due 12/01/2054, 50,000 units	49,003	47,164
Meta Platforms Inc	due 08/15/2052, 286,000 units	258,590	241,038
Meta Platforms Inc	due 08/15/2062, 466,000 units	417,396	395,480
Meta Platforms Inc	due 05/15/2053, 127,000 units	133,073	126,968
Meta Platforms Inc	due 08/15/2064, 240,000 units	248,464	233,959
MidAmerican Energy Co	due 09/15/2054, 48,000 units	51,575	48,783
MidAmerican Energy Co	due 02/01/2055, 23,000 units	22,498	21,727
Morgan Stanley	due 02/07/2039, 21,000 units	21,371	21,069
Morgan Stanley	due 11/19/2055, 123,000 units	123,061	118,538
NASDAQ INC	due 06/28/2063, 69,000 units	70,443	70,201
Nationwide Children Hosp	due 11/01/2052, 31,000 units	28,894	27,088
Nisource Inc	due 06/15/2052, 128,000 units	120,972	113,245
Norfolk Southern Corp	due 08/01/2054, 24,000 units	25,112	22,850
Norfolk Southern Corp	due 03/15/2054, 26,000 units	27,881	25,062
Norfolk Sts Pwr Co	due 05/15/2053, 30,000 units	28,524	27,753
Northrop Grumman Corp	due 03/15/2053, 77,000 units	72,052	68,812

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Northrop Grumman Corp	due 06/01/2054, 67,000 units	\$ 69,467	\$ 62,325
Oncor Electric Delivery Co LLC	due 11/15/2051, 40,000 units	24,548	23,579
Oracle Corp	due 09/27/2054, 105,000 units	102,273	96,781
Oracle Corp	due 09/27/2064, 533,000 units	513,329	487,647
Ovintiv Inc	due 07/15/2053, 193,000 units	211,190	205,416
Pacific Gas & Electric	due 01/15/2053, 35,000 units	38,334	38,134
Pacific Gas & Electric	due 04/01/2053, 51,000 units	54,945	55,197
Pacific Gas & Electric	due 10/01/2054, 150,000 units	153,269	147,942
Peco Energy	due 08/15/2052, 53,000 units	46,451	43,783
Peco Energy	due 09/15/2054, 45,000 units	44,892	42,553
PNC Financial Services	due 07/23/2035, 292,000 units	293,633	289,731
Prologis LP	due 06/15/2053, 88,000 units	85,417	82,159
Prologis LP	due 03/15/2054, 69,000 units	71,512	64,367
Public Service Electric	due 08/01/2053, 19,000 units	19,472	18,546
Public Service Enterpris	due 08/01/2054, 31,000 units	33,199	29,523
Public Svc Elec & Gas Co	due 03/15/2053, 21,000 units	20,552	19,559
Republic of Peru	due 12/01/2060, 139,000 units	84,234	73,031
RTX Corporation	due 02/27/2053, 35,000 units	34,476	33,234
San Diego G & E	due 04/01/2053, 117,000 units	114,062	110,091
Sempra	due 10/01/2054, 157,000 units	155,499	158,754
Solventum Corp	due 04/30/2054, 543,000 units	532,205	528,187
Solventum Corp	due 05/15/2064, 348,000 units	347,355	339,363
Southern Cal Edison	due 06/01/2052, 101,000 units	99,412	94,913
Southern Cal Edison	due 03/01/2053, 89,000 units	89,410	86,561
Southern Cal Edison	due 12/01/2053, 19,000 units	19,675	18,897
Southern Cal Edison	due 04/15/2054, 49,000 units	50,208	48,048
System Energy Resources	due 12/15/2034, 65,000 units	64,849	63,676
T-Mobile Inc	due 06/15/2054, 65,000 units	67,721	65,882
T-Mobile Inc	due 01/15/2055, 65,000 units	64,005	61,171
T-Mobile USA Inc	due 06/15/2055, 99,000 units	95,034	89,907
T-Mobile USA Inc	due 10/15/2052, 305,000 units	221,335	203,456
T-Mobile USA Inc	due 01/15/2053, 108,000 units	109,417	104,503
T-Mobile USA Inc	due 01/15/2054, 76,000 units	76,879	74,150
Targa Resources Corp	due 04/15/2052, 62,000 units	55,546	52,216
Targa Resources Corp	due 02/15/2053, 326,000 units	352,133	339,751
Targa Resources Corp	due 07/01/2052, 28,000 units	28,967	27,940
Uber Technologies Inc	due 09/15/2054, 323,000 units	325,125	300,361
Union Electric Co	due 04/01/2052, 29,000 units	23,365	22,208
United Air	due 08/15/2038, 310,000 units	310,000	315,434
United Rentals Inc	due 12/15/2029, 205,000 units	207,050	206,820
Unitedhealth Group	due 05/15/2052, 53,000 units	48,176	45,410
Unitedhealth Group	due 04/15/2053, 51,000 units	48,363	45,926
Unitedhealth Group	due 04/15/2054, 188,000 units	186,573	176,316
Unitedhealth Group	due 07/15/2044, 63,000 units	62,963	61,108
Unitedhealth Group	due 07/15/2054, 668,000 units	672,751	648,434
Unitedhealth Group	due 07/15/2064, 61,000 units	62,025	59,271
University of Miami	due 04/01/2052, 80,000 units	66,454	63,855
US Bancorp	due 02/01/2034, 244,000 units	237,051	233,564
US Bancorp	due 06/12/2034, 82,000 units	85,198	83,591
US Bancorp	due 01/23/2035, 54,000 units	55,656	54,456
Vici Properties LP	due 05/15/2052, 328,000 units	308,878	305,171
Vici Properties LP	due 04/01/2054, 18,000 units	17,626	17,884
Virginia Electric & Power	due 04/01/2053, 30,000 units	29,819	28,544

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Virginia Electric & Power	due 01/15/2054, 29,000 units	\$ 28,405	\$ 27,272
Virginia Electric & Power	due 08/15/2054, 36,000 units	37,395	34,797
Virginia Electric & Power	due 05/15/2052, 96,000 units	83,222	80,796
Washington University	due 04/15/2054, 27,000 units	21,764	19,457
Wells Fargo & Company	due 04/25/2053, 555,000 units	491,239	463,419
Wells Fargo & Company	due 07/25/2034, 22,000 units	22,604	21,971
Wisconsin Elec PWR	due 10/01/2054, 24,000 units	23,993	21,803
Alibaba Group Holding	due 02/09/2051, 300,000 units	299,943	193,149
America Movil Sa De CV	due 11/15/2037, 68,000 units	72,610	69,837
America Movil Sa De CV	due 04/22/2049, 205,000 units	230,149	168,287
Anglo American Capital	due 04/05/2054, 211,000 units	218,799	208,291
Barrick Gold Corp	due 04/01/2042, 57,000 units	57,522	53,848
BHP Billiton Fin USA Ltd	due 09/08/2053, 91,000 units	92,624	88,843
Brookfield Fin	due 01/15/2055, 238,000 units	237,656	232,719
Canadian Natl Railway	due 11/07/2043, 26,000 units	23,561	22,332
Canadian Natl Railway	due 02/03/2048, 43,000 units	33,394	32,321
Canadian Natl Railway	due 01/20/2049, 23,000 units	19,887	19,603
Canadian Natl Railway	due 05/01/2050, 66,000 units	40,471	38,343
Credit Suisse AG	due 01/09/2025, 250,000 units	252,500	250,118
Deutsche Telekom AG	due 01/21/2050, 300,000 units	240,137	214,557
Enbridge Inc	due 06/10/2044, 30,000 units	27,207	24,740
Enbridge Inc	due 12/01/2046, 24,000 units	23,375	22,855
Enbridge Inc	due 07/15/2080, 47,000 units	43,945	45,436
Enbridge Inc	due 08/01/2051, 46,000 units	34,281	30,760
Enbridge Inc	due 11/15/2053, 37,000 units	41,436	40,148
Enbridge Inc	due 04/05/2054, 218,000 units	224,912	215,467
Grupo Televisa SA	due 01/15/2040, 30,000 units	30,164	27,143
Indofood CBP Sukses Makm	due 06/09/2031, 200,000 units	180,160	177,436
Lyondellbasell Ind NV	due 02/26/2055, 24,000 units	19,916	18,911
NXP BV / NXP FDG LLC	due 11/30/2051, 248,000 units	168,987	159,067
NXP BV / NXP FDG LLC	due 05/11/2041, 282,000 units	261,020	206,069
Pfizer Invt Enterprises	due 05/19/2053, 24,000 units	23,652	22,472
Pfizer Invt Enterprises	due 05/19/2063, 289,000 units	278,095	265,285
Rio Tinto Fin USA LTD	due 11/02/2051, 167,000 units	104,177	101,848
Rio Tinto Fin USA LTD	due 03/09/2053, 21,000 units	20,271	19,422
Rogers Communications	due 03/15/2044, 38,000 units	35,367	33,653
Rogers Communications	due 02/15/2048, 209,000 units	172,733	163,379
Rogers Communications	due 05/01/2049, 77,000 units	69,399	60,179
Rogers Communications	due 11/15/2049, 49,000 units	36,516	34,244
Rogers Communications	due 03/15/2042, 54,000 units	53,148	45,604
Rogers Communications	due 03/15/2052, 153,000 units	132,447	122,313
Saudi Arabian Oil CO	due 07/17/2054, 200,000 units	194,926	187,038
Saudi Arabian Oil CO	due 07/17/2064, 200,000 units	195,278	186,508
Shell International FIN	due 11/07/2049, 184,000 units	128,056	121,192
UBS Group AG	due 05/15/2045, 278,000 units	261,940	249,024
Vale Overseas Limited	due 11/10/2039, 51,000 units	55,179	54,117
Vale Overseas Limited	due 06/28/2054, 174,000 units	172,669	171,073
Total Corporate Bonds and Notes		69,040,800	64,522,294

See independent auditors' report.

**St. Luke's Roosevelt Hospital Center
Employees' Pension Plan**

Schedule 1

Supplemental Information

**Schedule H, Part IV, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024**

**PLAN NO: 001
EIN-13-2997301**

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Par or Maturity Date	Cost	Current Value
Asset-Backed Securities			
AT&T Reign II LB PTT	due 12/15/2044, 930,000 units	\$ 935,580	\$ 935,580
BFLD Trust	due 11/15/2029, 60,000 units	59,850	60,000
BX Trust	due 12/15/2039, 113,000 units	112,717	112,930
KSL Commercial Mortgage Trust	due 12/15/2039, 70,000 units	69,825	69,891
ORL Trust	due 12/15/2039, 105,000 units	104,738	105,000
Self Commercial Mortgage Trust	due 11/15/2034, 60,000 units	59,850	60,074
WCORE Commercial Mortgage Trust	due 11/15/2041, 135,000 units	134,663	135,169
Total Asset-Backed Securities		<u>1,477,223</u>	<u>1,478,644</u>
Mutual Funds			
Artisan International Fund Institutional Class	48,113.7280 shares	1,153,477	1,305,325
Artisan International Value Fund	59,659.2320 shares	2,455,896	2,805,774
BlackRock Strategic Income	373,651.4220 shares	3,823,521	3,538,479
BlackRock Event Driven Equity Fund	337,572.6270 shares	3,290,094	3,375,726
Vanguard Extended Market Index Fund	10,767.3780 shares	1,312,526	1,551,364
FPA Crescent Fund	101,723.6080 shares	3,512,735	4,094,375
Total Mutual Funds		<u>15,548,248</u>	<u>16,671,043</u>
Investments, at estimated value			
Alternative Investments:			
SSgA S&P 500 Tobacco Free Index Common Trust Fund	50,807.7560 shares	1,647,040	4,991,456
Total Alternative Investments		<u>1,647,040</u>	<u>4,991,456</u>
Total Investments		<u>\$ 134,336,654</u>	<u>\$ 129,826,128</u>

* Represents a party in interest as defined by ERISA
The information in this schedule has been certified as to its completeness and accuracy by
Principal Bank, current trustee of the Plan.

See independent auditors' report.

St. Luke's Roosevelt Hospital Center Employees' Pension Plan

Schedule 2

Supplemental Information

Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions

For the Year Ended December 31, 2024

PLAN NO: 001
EIN-13-2997301

(a) Identity of Party Involved	(b) Description of Assets (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value Value of Asset on Transaction Date	(i) Net gain or (Loss)
Category (iii)-A series of transactions with respect to securities of the same issue which amounts in the aggregate to more than 5% of the fair value of plan assets								
* Principal Bank	Allspring Gov MMF	\$ -	\$ 7,359,372	\$ -	\$ -	\$ 7,359,372	\$ 7,359,372	\$ -

* Represents a party in interest as defined by ERISA.

See independent auditors' report

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Vesting Service ²										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	3	0	0	0	0	0	3
40-44	0	0	0	1	10	4	0	0	0	0	15
45-49	0	0	0	0	16	15	2	0	0	0	33
50-54	0	0	0	0	12	17	4	4	1	0	38
55-59	0	0	0	1	10	15	15	17	3	0	61
60-64	0	0	0	1	9	14	16	17	7	1	65
65-69	0	0	0	1	8	14	9	7	9	6	54
70 & over	0	0	0	0	1	3	3	5	7	6	25
Total	0	0	0	4	69	82	49	50	27	13	294

² Age and service for purposes of determining category are based on exact (not rounded) values.
 Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Assumptions and methods for contribution purposes

Actuarial Assumptions and Methods — Contributions

Economic Assumptions

Interest rate basis

- Applicable month August 2023 (published in September 2023)
- Interest rate basis 3-Segment rates

Interest rates	Reflecting Stabilization	Not Reflecting Stabilization
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Annual rates of increase

- Compensation: N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation N/A

Return on assets 5.00%¹

Administrative expenses \$1,844,000 for the 2024 plan year (equals 0.25% of the Fair Value of Assets, plus actual PBGC premiums for the current plan year)

¹ Limited to the third segment rate

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

As permitted by law, rates reflecting stabilization are used to determine the funding target, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

Rates not reflecting stabilization are used to determine PBGC variable rate premiums if the alternative method is used, and are used to determine the PBGC FTAP and the PBGC 4010 FS.

Continuing Participants of St. Luke's Roosevelt Hospital Center Employees' Pension Plan:

Demographic Assumptions

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

Participant data Participant data as of the valuation date was supplied by the employer.

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

Mortality Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination Rates varying by age

Percentage leaving during the year (sample rates)

Age	Rate
25	35.9%
40	14.0%
55	5.1%

Disability Rates varying by age

Percentage becoming disabled during the year (sample rates)

Age	Rate
25	0.1%
40	0.2%
55	1.0%

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age

Percentage Retiring during the year	
Age	Rate
50-55	1.5% per year
56-61	3.0% per year
62	15.0% per year
63-64	10.0% per year
65-66	25.0% per year
67	20.0% per year
68-69	15.0% per year
70	100% per year

Benefit commencement date:

- Preretirement death benefit Age 50 if eligible for early retirement; otherwise, age 65
- Deferred vested benefit Age 65
- Disability benefit Upon disablement if eligible for disability benefit; otherwise, age 65
- Retirement benefit Upon termination of employment

Form of payment

25% of married participants are assumed to elect a 50% joint and survivor annuity, otherwise single life annuity is assumed

Percent married

85%

Spouse age

Females four years younger than males

Loads

N/A

At-risk assumptions

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Former Participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan:

Demographic Assumptions

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

Participant data Participant data as of the valuation date was supplied by the employer.

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

Mortality Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination Sarason T-5 Table
Rates varying by age

Percentage leaving during the year (sample rates)	
Age	Rate
25	7.8%
35	6.4%
45	4.3%
55	2.0%

Disability None assumed

Retirement 100% at age 65 or present age, if older.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

- Preretirement death benefit Age 65
- Deferred vested benefit Upon termination of employment for lump sum benefits; otherwise, age 65.
- Retirement benefit Upon termination of employment

Form of payment

75% elect a lump sum at termination or retirement. Lump sums were valued using the substitution of annuity form under IRS Regulation 1.430(d)-1(f)(4) without application of generational mortality.

25% elect an annuity at termination or retirement (life annuity if single and 50% J&S annuity if married)

Percent married

100%

Spouse age

No age difference

Loads

N/A

At-risk assumptions

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

All Participants:

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met, or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements, the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets	<p>Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of fair market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).</p> <p>The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years.</p>
Benefits not valued	<p>All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Mount Sinai Health System and, based on that review, is not aware of any significant benefits required to be valued that were not.</p> <p>The plan pays small benefits (with a present value up to \$7,000) in a single lump sum payment. Such lump sums are not explicitly valued as such; rather such participants' benefits are valued using the benefit choice assumptions described above.</p>

Plan Name:	St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN:	13-2997301/001
Plan Sponsor:	St. Luke's-Roosevelt Hospital Center
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

Mount Sinai Health System and its trustee furnished participant data as of January 1, 2024. Information on assets, contributions and plan provisions were supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. No adjustments were made to the data provided by the sources identified above.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Lump sum conversion rate	As required by IRC §430, lump sum benefits are valued using “annuity substitution”, so that the interest rates assumed are effectively the same as described above for the discount rate.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).
Assumed return for asset smoothing	The assumed return of 5.00% used for asset smoothing is the expected return on assets assumption chosen by the plan sponsor for the 2024 fiscal year under U.S. GAAP. Based on WTW's Expected Return Estimator model and current market conditions, we believe that this assumption does not significantly conflict with what could be considered to be reasonable.

Assumptions Rationale - Significant Demographic Assumptions

Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Rates of termination / disability / retirement	The assumptions are based on plan sponsor expectations for the future with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Benefit commencement date for deferred benefits:

- Preretirement death benefit
Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.
- Deferred vested benefit
Deferred vested participants' assumed commencement age is a single age intended to capture the average age at commencement. Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant.

Form of payment

For former participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan, the percentage of participants assumed to take lump sums was based on observed experience, with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

The percentage of retiring participants assumed to take various annuity forms of payment was based on observed experience, with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

Percent married

For continuing participants of the St. Luke's Roosevelt Hospital Center Employees' Pension Plan, the assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.

For former participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan, the assumed percentage married was set to 100% to reflect that the plan provides for the full value of the participant's pension benefit to be paid upon the death of a participant prior to retirement.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Changes in assumptions since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target was updated to reflect the latest mortality improvement scale as required by guidance issued by the IRS under IRC §430 and was changed from using a static projection of mortality improvement to a generational projection as required by guidance issued by the IRS under IRC §430.

Changes in methods since prior valuation

There have been no method changes since the prior valuation.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

**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

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **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 ST. LUKES-ROOSEVELT HOSPITAL CENTER EMPLOYEES' PENSION PLAN		B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF St. Lukes-Roosevelt Hospital Center		D Employer Identification Number (EIN) 13-2997301	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
2 Assets:			
a Market value	2a	138,747,378	
b Actuarial value	2b	149,727,962	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1,222	88,814,126	88,814,126
b For terminated vested participants	996	47,665,729	47,665,729
c For active participants	294	16,786,915	17,054,694
d Total	2,512	153,266,770	153,534,549
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)	<input type="checkbox"/>		
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	5.07%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	1,844,000	
c Target normal cost	6c	1,844,000	

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	Mark Gengenbach MBG	9/21/2025
	Signature of actuary	Date
	Mark Gengenbach, FSA, EA	2307102
	Type or print name of actuary	Most recent enrollment number
	Willis Towers Watson US LLC	212-309-3740
	Firm name	Telephone number (including area code)
	200 Liberty Street Floor 6 New York NY 10281	
	Address of the firm	

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

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

**Schedule SB (Form 5500) 2024
v. 240311**

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %
	<input type="checkbox"/> 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)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> 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.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 1,844,000
b Excess assets, if applicable, but not greater than line 31a			31b 0
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	20,586,676		1,982,832
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 3,826,832
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	3,333,490	3,333,490
36 Additional cash requirement (line 34 minus line 35).....			36 493,342
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....			37 5,622,131
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)			38a 5,128,789
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances			38b 3,333,490
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. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021			

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	St. Luke's-Roosevelt Hospital Center
EIN/PN	13-2997301/001
Plan Name	St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Mark Gengenbach
Enrollment Number	23-07102

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

The weighted average retirement age for Line 22 was developed as follows:
St. Luke's-Roosevelt Hospital Center Employees

<u>Age</u>	<u>Rate of Retirement</u>	<u>Population Survivorship</u>	<u>Number Retiring</u>	<u>Weighted Retirement by Age</u>	<u>Average Retirement Age</u>
50	0.015	100,000.00	1,500.00	75,000.00	
51	0.015	98,500.00	1,477.50	75,352.50	
52	0.015	97,022.50	1,455.34	75,677.55	
53	0.015	95,567.16	1,433.51	75,975.89	
54	0.015	94,133.66	1,412.00	76,248.26	
55	0.015	92,721.65	1,390.82	76,495.36	
56	0.030	91,330.83	2,739.92	153,435.79	
57	0.030	88,590.90	2,657.73	151,490.44	
58	0.030	85,933.17	2,578.00	149,523.72	
59	0.030	83,355.18	2,500.66	147,538.67	
60	0.030	80,854.52	2,425.64	145,538.14	
61	0.030	78,428.89	2,352.87	143,524.86	
62	0.150	76,076.02	11,411.40	707,506.99	
63	0.100	64,664.62	6,466.46	407,387.09	
64	0.100	58,198.16	5,819.82	372,468.20	
65	0.250	52,378.34	13,094.59	851,148.03	
66	0.250	39,283.76	9,820.94	648,181.96	
67	0.200	29,462.82	5,892.56	394,801.74	
68	0.150	23,570.25	3,535.54	240,416.58	
69	0.150	20,034.72	3,005.21	207,359.30	
70	1.000	17,029.51	17,029.51	1,192,065.55	
Total		1,467,136.64	100,000.00	6,367,136.64	63.7
Count = 281					

Beth Israel Kings Highway Division Employees

100% at age 65 for all active participants.

Count = 13

Weighted Average Retirement Age = $[(63.7 \times 281) + (65 \times 13)] / 294 = 63.8$

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Assumptions and methods for contribution purposes

Actuarial Assumptions and Methods — Contributions

Economic Assumptions

Interest rate basis

- Applicable month August 2023 (published in September 2023)
- Interest rate basis 3-Segment rates

Interest rates	Reflecting Stabilization	Not Reflecting Stabilization
• First segment rate	4.75%	3.62%
• Second segment rate	4.87%	4.46%
• Third segment rate	5.59%	4.52%
• Effective interest rate	5.07%	4.41%

Annual rates of increase

- Compensation: N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation N/A

Return on assets 5.00%¹

Administrative expenses \$1,844,000 for the 2024 plan year (equals 0.25% of the Fair Value of Assets, plus actual PBGC premiums for the current plan year)

¹ Limited to the third segment rate
 Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

As permitted by law, rates reflecting stabilization are used to determine the funding target, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

Rates not reflecting stabilization are used to determine PBGC variable rate premiums if the alternative method is used, and are used to determine the PBGC FTAP and the PBGC 4010 FS.

Continuing Participants of St. Luke's Roosevelt Hospital Center Employees' Pension Plan:

Demographic Assumptions

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

Participant data Participant data as of the valuation date was supplied by the employer.

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

Mortality Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination Rates varying by age

Percentage leaving during the year (sample rates)

Age	Rate
25	35.9%
40	14.0%
55	5.1%

Disability Rates varying by age

Percentage becoming disabled during the year (sample rates)

Age	Rate
25	0.1%
40	0.2%
55	1.0%

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age

Percentage Retiring during the year	
Age	Rate
50-55	1.5% per year
56-61	3.0% per year
62	15.0% per year
63-64	10.0% per year
65-66	25.0% per year
67	20.0% per year
68-69	15.0% per year
70	100% per year

Benefit commencement date:

- Preretirement death benefit Age 50 if eligible for early retirement; otherwise, age 65
- Deferred vested benefit Age 65
- Disability benefit Upon disablement if eligible for disability benefit; otherwise, age 65
- Retirement benefit Upon termination of employment

Form of payment 25% of married participants are assumed to elect a 50% joint and survivor annuity, otherwise single life annuity is assumed

Percent married 85%

Spouse age Females four years younger than males

Loads N/A

At-risk assumptions For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

Timing of benefit payments Annuity payments are payable monthly at the beginning of the month.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Former Participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan:

Demographic Assumptions

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

Participant data Participant data as of the valuation date was supplied by the employer.

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

Mortality Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination Sarason T-5 Table
Rates varying by age

Percentage leaving during the year (sample rates)	
Age	Rate
25	7.8%
35	6.4%
45	4.3%
55	2.0%

Disability None assumed

Retirement 100% at age 65 or present age, if older.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

- Preretirement death benefit Age 65
- Deferred vested benefit Upon termination of employment for lump sum benefits; otherwise, age 65.
- Retirement benefit Upon termination of employment

Form of payment 75% elect a lump sum at termination or retirement. Lump sums were valued using the substitution of annuity form under IRS Regulation 1.430(d)-1(f)(4) without application of generational mortality.

25% elect an annuity at termination or retirement (life annuity if single and 50% J&S annuity if married)

Percent married 100%

Spouse age No age difference

Loads N/A

At-risk assumptions For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

Timing of benefit payments Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

All Participants:

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met, or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements, the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets	<p>Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of fair market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year).</p> <p>The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years.</p>
Benefits not valued	<p>All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Mount Sinai Health System and, based on that review, is not aware of any significant benefits required to be valued that were not.</p> <p>The plan pays small benefits (with a present value up to \$7,000) in a single lump sum payment. Such lump sums are not explicitly valued as such; rather such participants' benefits are valued using the benefit choice assumptions described above.</p>

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

Mount Sinai Health System and its trustee furnished participant data as of January 1, 2024. Information on assets, contributions and plan provisions were supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. No adjustments were made to the data provided by the sources identified above.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Lump sum conversion rate	As required by IRC §430, lump sum benefits are valued using “annuity substitution”, so that the interest rates assumed are effectively the same as described above for the discount rate.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).
Assumed return for asset smoothing	The assumed return of 5.00% used for asset smoothing is the expected return on assets assumption chosen by the plan sponsor for the 2024 fiscal year under U.S. GAAP. Based on WTW's Expected Return Estimator model and current market conditions, we believe that this assumption does not significantly conflict with what could be considered to be reasonable.

Assumptions Rationale - Significant Demographic Assumptions

Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Rates of termination / disability / retirement	The assumptions are based on plan sponsor expectations for the future with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
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Plan Sponsor: St. Luke's-Roosevelt Hospital Center
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Benefit commencement date for deferred benefits:

- Preretirement death benefit
Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.
- Deferred vested benefit
Deferred vested participants' assumed commencement age is a single age intended to capture the average age at commencement. Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant.

Form of payment

For former participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan, the percentage of participants assumed to take lump sums was based on observed experience, with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

The percentage of retiring participants assumed to take various annuity forms of payment was based on observed experience, with periodic consideration of whether any conditions have changed that would be expected to produce different results in the future.

Percent married

For continuing participants of the St. Luke's Roosevelt Hospital Center Employees' Pension Plan, the assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.

For former participants of the Beth Israel Medical Center Kings Highway Division Employees' Pension Plan, the assumed percentage married was set to 100% to reflect that the plan provides for the full value of the participant's pension benefit to be paid upon the death of a participant prior to retirement.

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EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
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Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Changes in assumptions since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target was updated to reflect the latest mortality improvement scale as required by guidance issued by the IRS under IRC §430 and was changed from using a static projection of mortality improvement to a generational projection as required by guidance issued by the IRS under IRC §430.

Changes in methods since prior valuation

There have been no method changes since the prior valuation.

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Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

Effective date November 1, 1985. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

Employees of St. Luke's - Roosevelt Hospital Center

Original plan name and effective date St. Luke's - Roosevelt Hospital Center Employees' Pension Plan.
November 1, 1985. Last restated as of October 1, 2012. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

Covered employees All employees with a work schedule of at least 17½ hours per week, except employees who are covered by a collective bargaining agreement and employees in the Hospital Section 403(b) Tax Sheltered Annuity Plan.

Effective May 12, 2007, no further employees shall be eligible to participate in the plan.

Participation date Date of becoming a covered employee

Definitions

Vesting service One year for each 1,000-hour calendar year of employment by St. Luke's – Roosevelt Hospital Center.

Pension service Years and months of service as a covered employee

Pensionable pay Generally W-2 earnings, increased by contributions to TSA Plan, reduced by certain amounts specified in plan document.

Pay after May 12, 2007 is not included in the calculation of the monthly pension benefit.

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65 with five years of participation.

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Monthly pension benefit As of any date, one-twelfth of the sum of (i) and (ii):

- (i) The benefit accrued under the prior formula as of April 14, 1994.
- (ii) For service after April 14, 1994: 2.0% of pensionable pay for each year of pension service.

Effective May 12, 2007, benefit accruals were ceased for all participants in the plan.

Monthly preretirement death benefit 50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday. The reduction for early commencement is waived if the participant has attained age 50 and completed ten years of service at death.

Eligibility for Benefits

Normal retirement Retirement on NRD

Early retirement Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service

Postponed retirement Retirement after NRD

Vested termination Termination for reasons other than death or retirement after completing five years of vesting service

Disability All participants who are totally and permanently disabled and are in receipt of Social Security disability benefits and have completed ten years of vesting service.

Preretirement death benefit Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement The monthly pension benefit determined as of NRD

Early retirement Monthly pension benefit determined as of early retirement date, actuarially reduced for each year of payment before the participant's NRD.

Postponed retirement The monthly pension benefit determined as of the actual retirement date. Benefits are actuarially increased for active participants following the year in which the participant attains age 70.5. Benefits are actuarially

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increased for deferred inactive participants following the year in which the participant attains age 65.

Termination with deferred vested benefit

The monthly pension benefit determined as of the termination date, actuarially reduced for each year of payment before the participant's NRD.

Disability

Monthly pension benefit determined as of disability date, or if the participant elects a monthly pension benefit determined as of NRD using continued accruals of pension service during periods of disability at the rate of earnings in effect at the date of disability.

Death with preretirement spouse benefits

Monthly preretirement spouse benefit is payable. In-service death benefit is Hospital-paid.

Other Plan Provisions

Forms of payment

Preretirement spouse benefits are payable only as described above. Monthly pension benefits are paid as described above, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, they will be paid in the form of the 50% or more (not in excess of 100%) joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan.

Optional forms are various percentage joint and survivor annuity options, a ten-year certain and life annuity, or (for married participants) a life annuity.

The normal form of payment is converted to an optional annuity form of payment using the applicable average segment rates for the month of August of the Plan Year immediately preceding the Plan Year in which the payment is made and the applicable Unisex Mortality Table, both as defined in IRS 417(e), but no less than the prior basis specified in the plan.

Pension increases

None

Plan participants' contributions

None

Maximum limits on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

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Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

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Future Plan Changes

No future plan changes were recognized in determining minimum contributions.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

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Employees of Beth Israel Medical Center – Kings Highway Division

Plan Provisions

Original plan name and effective date	Beth Israel Medical Center Kings Highway Division Employees' Pension Plan. Effective October 1, 1960. Restated effective October 1, 2012. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.
Covered employees	Employees not excluded by the terms of a union contract become members on October 1 after 6 months of service if they have attained age 20½. Effective September 30, 1997, no further employees shall be eligible to participate in the plan.
Participation date	Date of becoming a covered employee

Definitions

Vesting service	One year for each 1,000-hour calendar year of employment.
Pension service	One year for each 1,000-hour calendar year of employment.
Pensionable pay	W-2 earnings, limited to IRC Section 401 (a)(17) pay limitation.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of participation.
Monthly pension benefit	<p>The greater of \$225 or 15% of average monthly compensation up to \$1,666.67; plus 30% of average monthly compensation in excess of \$1,666.67. The entire benefit shall be reduced proportionately for less than 30 years of service.</p> <p>Effective September 30, 1997, benefit accruals shall be frozen and shall not increase above the amount accrued as of September 30, 1997.</p> <p>Accrued benefit equals the projected monthly pension benefit based on average pay to date multiplied by ratio of completed service over projected service at normal retirement.</p>

Plan Name:	St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN:	13-2997301/001
Plan Sponsor:	St. Luke's-Roosevelt Hospital Center
Valuation Date:	January 1, 2024

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Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	No early retirement benefits are payable from the plan.
Postponed retirement	Retirement after NRD
Deferred vested	Termination for reasons other than death or retirement after completing five years of vesting service.

Benefits Paid Upon the Following Events

Normal retirement	The monthly pension benefit determined as of NRD
Early retirement	No early retirement benefits are payable from the plan.
Postponed retirement	Monthly pension benefit determined as of actual retirement date. Benefits are actuarially increased for active and deferred inactive participants following the year in which the participant attains age 65.
Deferred vested benefit	Monthly pension benefit determined as of termination date, actuarially reduced for each year of payment before the participant's NRD.

Other Plan Provisions

Forms of payment	<p>Normal Form: Actuarially equivalent 50% Joint and Survivor annuity if married on date benefits commence; life annuity if single.</p> <p>Optional Forms: Actuarially equivalent (to life annuity): 100%, 75%, or 50% Joint and Survivor annuity, 10 year certain and continuous annuity, installments over 60 months or 120 months, life annuity (for married participants), and lump sum.</p> <p>The normal form of payment is converted to an optional annuity form of payment using an interest rate of 8% and GAR-94 Mortality (unisex).</p> <p>Installment options and lump sum benefits are determined by using the applicable average segment rates for the month of August of the Plan Year immediately preceding the Plan Year in which the payment is made and the applicable Unisex Mortality Table, both as defined in IRS 417(e).</p>
Pension increases	None
Plan participants' contributions	None
Maximum limits on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

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Future Plan Changes

No future plan changes were recognized in determining minimum contributions.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
EIN / PN: 13-2997301/001
Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

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Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Vesting Service ²										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	3	0	0	0	0	0	0	3
40-44	0	0	0	1	10	4	0	0	0	0	0	15
45-49	0	0	0	0	16	15	2	0	0	0	0	33
50-54	0	0	0	0	12	17	4	4	1	0	0	38
55-59	0	0	0	1	10	15	15	17	3	0	0	61
60-64	0	0	0	1	9	14	16	17	7	1	0	65
65-69	0	0	0	1	8	14	9	7	9	6	0	54
70 & over	0	0	0	0	1	3	3	5	7	6	0	25
Total	0	0	0	4	69	82	49	50	27	13	0	294

² Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

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Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	265,709	1,301,253	10,008,666	11,575,628
2025	628,385	2,320,972	9,614,191	12,563,548
2026	801,790	2,544,481	9,202,941	12,549,212
2027	947,248	2,713,445	8,773,705	12,434,398
2028	1,076,932	2,838,354	8,334,655	12,249,941
2029	1,167,004	2,974,999	7,894,041	12,036,044
2030	1,227,518	3,096,705	7,441,049	11,765,272
2031	1,277,270	3,162,506	6,982,092	11,421,868
2032	1,311,721	3,259,290	6,530,925	11,101,936
2033	1,338,610	3,322,529	6,075,611	10,736,750
2034	1,357,628	3,357,977	5,625,325	10,340,930
2035	1,362,438	3,447,562	5,188,718	9,998,718
2036	1,354,534	3,509,623	4,760,956	9,625,113
2037	1,340,114	3,528,409	4,344,354	9,212,877
2038	1,321,897	3,512,380	3,941,172	8,775,449
2039	1,296,889	3,498,331	3,553,594	8,348,814
2040	1,267,041	3,494,165	3,183,696	7,944,902
2041	1,233,367	3,460,096	2,833,360	7,526,823
2042	1,197,042	3,399,956	2,504,199	7,101,197
2043	1,157,830	3,326,112	2,197,501	6,681,443
2044	1,112,798	3,230,133	1,914,171	6,257,102
2045	1,065,209	3,109,227	1,654,761	5,829,197
2046	1,012,534	2,972,144	1,419,476	5,404,154
2047	954,619	2,823,492	1,208,131	4,986,242
2048	895,606	2,671,995	1,020,220	4,587,821
2049	835,602	2,519,356	854,896	4,209,854
2050	775,032	2,366,553	711,022	3,852,607
2051	714,803	2,213,320	587,198	3,515,321
2052	655,418	2,061,409	481,793	3,198,620
2053	597,884	1,911,623	393,038	2,902,545
2054	542,602	1,764,761	319,089	2,626,452
2055	489,875	1,621,597	258,101	2,369,573
2056	440,054	1,482,871	208,287	2,131,212
2057	393,366	1,349,259	167,967	1,910,592
2058	349,974	1,221,339	135,591	1,706,904
2059	309,956	1,099,595	109,767	1,519,318
2060	273,317	984,406	89,271	1,346,994
2061	239,983	876,060	73,044	1,189,087
2062	209,821	774,779	60,200	1,044,800
2063	182,662	680,689	49,999	913,350

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2064	158,306	593,823	41,839	793,968
2065	136,547	514,141	35,245	685,933
2066	117,171	441,554	29,851	588,576
2067	99,975	375,930	25,375	501,280
2068	84,764	317,084	21,609	423,457
2069	71,362	264,787	18,397	354,546
2070	59,609	218,768	15,632	294,009
2071	49,362	178,706	13,237	241,305
2072	40,489	144,239	11,162	195,890
2073	32,867	114,955	9,365	157,187

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
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 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
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Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	01/01/2024	(4,029,524)	15.00000	(4,029,524)	(366,607)
Shortfall	01/01/2023	25,654,303	14.00000	24,616,200	2,349,439
Total				20,586,676	1,982,832

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Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	St. Luke's-Roosevelt Hospital Center
EIN/PN	13-2997301/001
Plan Name	St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Mark Gengenbach
Enrollment Number	23-07102

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

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

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Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

The weighted average retirement age for Line 22 was developed as follows:
St. Luke's-Roosevelt Hospital Center Employees

Age	Rate of Retirement	Population Survivorship	Number Retiring	Weighted Retirement by Age	Average Retirement Age
50	0.015	100,000.00	1,500.00	75,000.00	
51	0.015	98,500.00	1,477.50	75,352.50	
52	0.015	97,022.50	1,455.34	75,677.55	
53	0.015	95,567.16	1,433.51	75,975.89	
54	0.015	94,133.66	1,412.00	76,248.26	
55	0.015	92,721.65	1,390.82	76,495.36	
56	0.030	91,330.83	2,739.92	153,435.79	
57	0.030	88,590.90	2,657.73	151,490.44	
58	0.030	85,933.17	2,578.00	149,523.72	
59	0.030	83,355.18	2,500.66	147,538.67	
60	0.030	80,854.52	2,425.64	145,538.14	
61	0.030	78,428.89	2,352.87	143,524.86	
62	0.150	76,076.02	11,411.40	707,506.99	
63	0.100	64,664.62	6,466.46	407,387.09	
64	0.100	58,198.16	5,819.82	372,468.20	
65	0.250	52,378.34	13,094.59	851,148.03	
66	0.250	39,283.76	9,820.94	648,181.96	
67	0.200	29,462.82	5,892.56	394,801.74	
68	0.150	23,570.25	3,535.54	240,416.58	
69	0.150	20,034.72	3,005.21	207,359.30	
70	1.000	17,029.51	17,029.51	1,192,065.55	
Total		1,467,136.64	100,000.00	6,367,136.64	63.7

Count = 281

Beth Israel Kings Highway Division Employees

100% at age 65 for all active participants.
Count = 13

Weighted Average Retirement Age = $[(63.7 \times 281) + (65 \times 13)] / 294 = 63.8$

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
 EIN / PN: 13-2997301/001
 Plan Sponsor: St. Luke's-Roosevelt Hospital Center
 Valuation Date: January 1, 2024

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Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

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2047	954,619	2,823,492	1,208,131	4,986,242
2048	895,606	2,671,995	1,020,220	4,587,821
2049	835,602	2,519,356	854,896	4,209,854
2050	775,032	2,366,553	711,022	3,852,607
2051	714,803	2,213,320	587,198	3,515,321
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2055	489,875	1,621,597	258,101	2,369,573
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2057	393,366	1,349,259	167,967	1,910,592
2058	349,974	1,221,339	135,591	1,706,904
2059	309,956	1,099,595	109,767	1,519,318
2060	273,317	984,406	89,271	1,346,994
2061	239,983	876,060	73,044	1,189,087
2062	209,821	774,779	60,200	1,044,800
2063	182,662	680,689	49,999	913,350

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Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2064	158,306	593,823	41,839	793,968
2065	136,547	514,141	35,245	685,933
2066	117,171	441,554	29,851	588,576
2067	99,975	375,930	25,375	501,280
2068	84,764	317,084	21,609	423,457
2069	71,362	264,787	18,397	354,546
2070	59,609	218,768	15,632	294,009
2071	49,362	178,706	13,237	241,305
2072	40,489	144,239	11,162	195,890
2073	32,867	114,955	9,365	157,187

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Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

Effective date November 1, 1985. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

Employees of St. Luke's - Roosevelt Hospital Center

Original plan name and effective date St. Luke's - Roosevelt Hospital Center Employees' Pension Plan.
November 1, 1985. Last restated as of October 1, 2012. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.

Covered employees All employees with a work schedule of at least 17½ hours per week, except employees who are covered by a collective bargaining agreement and employees in the Hospital Section 403(b) Tax Sheltered Annuity Plan.
Effective May 12, 2007, no further employees shall be eligible to participate in the plan.

Participation date Date of becoming a covered employee

Definitions

Vesting service One year for each 1,000-hour calendar year of employment by St. Luke's – Roosevelt Hospital Center.

Pension service Years and months of service as a covered employee

Pensionable pay Generally W-2 earnings, increased by contributions to TSA Plan, reduced by certain amounts specified in plan document.
Pay after May 12, 2007 is not included in the calculation of the monthly pension benefit.

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65 with five years of participation.

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Monthly pension benefit As of any date, one-twelfth of the sum of (i) and (ii):

- (i) The benefit accrued under the prior formula as of April 14, 1994.
- (ii) For service after April 14, 1994: 2.0% of pensionable pay for each year of pension service.

Effective May 12, 2007, benefit accruals were ceased for all participants in the plan.

Monthly preretirement death benefit 50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55th birthday. The reduction for early commencement is waived if the participant has attained age 50 and completed ten years of service at death.

Eligibility for Benefits

Normal retirement Retirement on NRD

Early retirement Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service

Postponed retirement Retirement after NRD

Vested termination Termination for reasons other than death or retirement after completing five years of vesting service

Disability All participants who are totally and permanently disabled and are in receipt of Social Security disability benefits and have completed ten years of vesting service.

Preretirement death benefit Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement The monthly pension benefit determined as of NRD

Early retirement Monthly pension benefit determined as of early retirement date, actuarially reduced for each year of payment before the participant's NRD.

Postponed retirement The monthly pension benefit determined as of the actual retirement date. Benefits are actuarially increased for active participants following the year in which the participant attains age 70.5. Benefits are actuarially

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increased for deferred inactive participants following the year in which the participant attains age 65.

Termination with deferred vested benefit

The monthly pension benefit determined as of the termination date, actuarially reduced for each year of payment before the participant's NRD.

Disability

Monthly pension benefit determined as of disability date, or if the participant elects a monthly pension benefit determined as of NRD using continued accruals of pension service during periods of disability at the rate of earnings in effect at the date of disability.

Death with preretirement spouse benefits

Monthly preretirement spouse benefit is payable. In-service death benefit is Hospital-paid.

Other Plan Provisions

Forms of payment

Preretirement spouse benefits are payable only as described above. Monthly pension benefits are paid as described above, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, they will be paid in the form of the 50% or more (not in excess of 100%) joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan.

Optional forms are various percentage joint and survivor annuity options, a ten-year certain and life annuity, or (for married participants) a life annuity.

The normal form of payment is converted to an optional annuity form of payment using the applicable average segment rates for the month of August of the Plan Year immediately preceding the Plan Year in which the payment is made and the applicable Unisex Mortality Table, both as defined in IRS 417(e), but no less than the prior basis specified in the plan.

Pension increases

None

Plan participants' contributions

None

Maximum limits on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

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Future Plan Changes

No future plan changes were recognized in determining minimum contributions.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

Plan Name: St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
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Plan Sponsor: St. Luke's-Roosevelt Hospital Center
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Employees of Beth Israel Medical Center – Kings Highway Division

Plan Provisions

Original plan name and effective date	Beth Israel Medical Center Kings Highway Division Employees' Pension Plan. Effective October 1, 1960. Restated effective October 1, 2012. The most recent amendment reflected in the following plan provisions was effective January 1, 2021.
Covered employees	Employees not excluded by the terms of a union contract become members on October 1 after 6 months of service if they have attained age 20½. Effective September 30, 1997, no further employees shall be eligible to participate in the plan.
Participation date	Date of becoming a covered employee

Definitions

Vesting service	One year for each 1,000-hour calendar year of employment.
Pension service	One year for each 1,000-hour calendar year of employment.
Pensionable pay	W-2 earnings, limited to IRC Section 401 (a)(17) pay limitation.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of participation.
Monthly pension benefit	<p>The greater of \$225 or 15% of average monthly compensation up to \$1,666.67; plus 30% of average monthly compensation in excess of \$1,666.67. The entire benefit shall be reduced proportionately for less than 30 years of service.</p> <p>Effective September 30, 1997, benefit accruals shall be frozen and shall not increase above the amount accrued as of September 30, 1997.</p> <p>Accrued benefit equals the projected monthly pension benefit based on average pay to date multiplied by ratio of completed service over projected service at normal retirement.</p>

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EIN / PN:	13-2997301/001
Plan Sponsor:	St. Luke's-Roosevelt Hospital Center
Valuation Date:	January 1, 2024

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Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	No early retirement benefits are payable from the plan.
Postponed retirement	Retirement after NRD
Deferred vested	Termination for reasons other than death or retirement after completing five years of vesting service.

Benefits Paid Upon the Following Events

Normal retirement	The monthly pension benefit determined as of NRD
Early retirement	No early retirement benefits are payable from the plan.
Postponed retirement	Monthly pension benefit determined as of actual retirement date. Benefits are actuarially increased for active and deferred inactive participants following the year in which the participant attains age 65.
Deferred vested benefit	Monthly pension benefit determined as of termination date, actuarially reduced for each year of payment before the participant's NRD.

Other Plan Provisions

Forms of payment	<p>Normal Form: Actuarially equivalent 50% Joint and Survivor annuity if married on date benefits commence; life annuity if single.</p> <p>Optional Forms: Actuarially equivalent (to life annuity): 100%, 75%, or 50% Joint and Survivor annuity, 10 year certain and continuous annuity, installments over 60 months or 120 months, life annuity (for married participants), and lump sum.</p> <p>The normal form of payment is converted to an optional annuity form of payment using an interest rate of 8% and GAR-94 Mortality (unisex).</p> <p>Installment options and lump sum benefits are determined by using the applicable average segment rates for the month of August of the Plan Year immediately preceding the Plan Year in which the payment is made and the applicable Unisex Mortality Table, both as defined in IRS 417(e).</p>
Pension increases	None
Plan participants' contributions	None
Maximum limits on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code.

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Plan Sponsor: St. Luke's-Roosevelt Hospital Center
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Future Plan Changes

No future plan changes were recognized in determining minimum contributions.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

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Plan Sponsor: St. Luke's-Roosevelt Hospital Center
Valuation Date: January 1, 2024

Plan Name	St. Luke's-Roosevelt Hospital Center Employees' Pension Plan
Plan Sponsor EIN	13-2997301
ERISA Plan #	001
Plan Year Ending	12/31/2024

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Sch. H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant (IQPA).

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Shortfall	01/01/2024	(4,029,524)	15.00000	(4,029,524)	(366,607)
Shortfall	01/01/2023	25,654,303	14.00000	24,616,200	2,349,439
Total				20,586,676	1,982,832

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