

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 2024 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 RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 08/01/1969
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) CLAXTON-HEPBURN MEDICAL CENTER 214 KING ST OGDENSBURG, NY 13669-1142
2b	Employer Identification Number (EIN) 15-0559686
2c	Plan Sponsor's telephone number 315-393-3600
2d	Business code (see instructions) 622000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	ELIZA DUSHARM
	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 ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 723
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.....	 6a(1) 115 6a(2) 105 6b 432 6c 135 6d 672 6e 29 6f 701 6g(1) 6g(2) 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

1A 1I

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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) 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
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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 RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF CLAXTON-HEPBURN MEDICAL CENTER	D Employer Identification Number (EIN) 15-0559686
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	34652969	
b	Actuarial value	2b	35295492	
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	443	29796249	29796249
b	For terminated vested participants	165	7003045	7003045
c	For active participants	115	5925748	6047847
d	Total	723	42725042	42847141
4	If the plan is in at-risk status, check the box and complete lines (a) and (b). ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.10 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	699000	
c	Target normal cost	6c	699000	

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 MICHAEL J. COSTANZA, FSA, EA, MAAA Type or print name of actuary BPAS ACTUARIAL AND PENSION SERVICES Firm name 706 N. CLINTON ST SYRACUSE, NY 13204 Address of the firm	10/09/2025 Date 23-07837 Most recent enrollment number 315-703-8982 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>12.93</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		630
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>5.23</u> %		33
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		663
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	82.37 %
15 Adjusted funding target attainment percentage	15	82.37 %
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	81.60 %
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
04/12/2024	395584	0			
07/15/2024	395584	0			
10/07/2024	395584	0			
01/16/2025	361555	0			
08/28/2025	116930	0			
Totals ►			18(b)	1665237	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	1606913

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
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21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 61
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI	Miscellaneous Items
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24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....		☐ Yes ☒ No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...		☐ Yes ☒ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....		27

Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years
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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
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31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)		31a	699000
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		7551649	907913
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	1606913
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)		36	1606913
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37	1606913
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39	0
40 Unpaid minimum required contributions for all years		40	0

Part IX	Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)
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41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CLAXTON-HEPBURN MEDICAL CENTER	D Employer Identification Number (EIN) 15-0559686	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

RBC WEALTH MANAGEMENT

41-1228350

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51	NONE	175226	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

BPAS ACTUARIAL AND PENSION SERVICES

30-0192194

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50 70	NONE	66669	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NOTTINGHAM TRUST

16-1213679

(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?
19 21 50	NONE	48736	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		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		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 CLAXTON-HEPBURN MEDICAL CENTER		D Employer Identification Number (EIN) 15-0559686

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	8578	7016
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	655749	478485
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	82014	81192
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	3843215	2960097
(2) U.S. Government securities	1c(2)	1517225	285000
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	4816072	6261139
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	52840	51040
(B) Common	1c(4)(B)	10540733	12247668
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	13148061	14597447
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	0	47359

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	34664487	37016443
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	34664487	37016443

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)	1665237	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		1665237
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	98600	
(B) U.S. Government securities	2b(1)(B)	5469	
(C) Corporate debt instruments	2b(1)(C)	335392	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		439461
(2) Dividends: (A) Preferred stock	2b(2)(A)	305385	
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	314853	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		620238
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	1174899	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		2279270
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		6179105

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2971190	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2971190
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	66669	
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	175226	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	614064	
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		855959
j Total expenses. Add all expense amounts in column (b) and enter total	2j		3827149

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2351956
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **BONADIO & CO., LLP**

(2) EIN: **16-1131146**

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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
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 541070.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 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					
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER				B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CLAXTON-HEPBURN MEDICAL CENTER				D Employer Identification Number (EIN) 15-0559686	
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): 16-1213679					
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	11
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					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2024 v. 240311	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

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

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

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

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

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

- 19** If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

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_____.

**RETIREMENT PLAN FOR EMPLOYEES OF
CLAXTON-HEPBURN MEDICAL CENTER**

**Financial Statements as of
December 31, 2024 and 2023
Together with
Independent Auditor's Report**

INDEPENDENT AUDITOR'S REPORT

October 14, 2025

To the Plan Administrator of
Retirement Plan for Employees of Claxton-Hepburn Medical Center:

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

We have performed audits of the financial statements of Retirement Plan for Employees of Claxton-Hepburn Medical Center (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 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 qualified institutions as of and for the years ended December 31, 2024 and 2023, 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 Auditor's Responsibilities for the Audit of the Financial Statements section:

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

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(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of 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 that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards 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.

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

Auditor's Responsibilities for the Audit of the Financial Statements (Continued)

In performing an audit in accordance with generally accepted auditing standards, 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.

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

Other Matter - Supplemental Schedules Required by ERISA

The supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024 and Schedule H, 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 is 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 generally accepted auditing standards. 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, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information of ERISA Section 103(a)(3)(C).

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
CASH	\$ <u>7,016</u>	\$ <u>8,578</u>
INVESTMENTS, at fair value	<u>36,449,750</u>	<u>33,918,146</u>
RECEIVABLES:		
Employer contribution receivable	478,485	655,749
Accrued interest and dividends receivable	<u>81,192</u>	<u>82,014</u>
	<u>559,677</u>	<u>737,763</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 37,016,443</u>	<u>\$ 34,664,487</u>

The accompanying notes are an integral part of these statements.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS:		
Net appreciation in the fair value of investments	\$ 3,454,169	\$ 3,193,160
Interest and dividends	1,059,699	999,548
Employer contributions	<u>1,665,237</u>	<u>1,652,229</u>
Total additions	<u>6,179,105</u>	<u>5,844,937</u>
DEDUCTIONS:		
Benefits paid to participants	2,971,190	2,807,453
Administrative expenses	<u>855,959</u>	<u>858,211</u>
Total deductions	<u>3,827,149</u>	<u>3,665,664</u>
CHANGE IN NET ASSETS AVAILABLE FOR BENEFITS	2,351,956	2,179,273
NET ASSETS AVAILABLE FOR BENEFITS - beginning of year	<u>34,664,487</u>	<u>32,485,214</u>
NET ASSETS AVAILABLE FOR BENEFITS - end of year	<u>\$ 37,016,443</u>	<u>\$ 34,664,487</u>

The accompanying notes are an integral part of these statements.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

NOTES TO THE FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

1. DESCRIPTION OF PLAN

The following brief description of the Retirement Plan for Employees of Claxton-Hepburn Medical Center (the Plan) is provided for general information purposes only. Participants should refer to the Plan document for more information and a complete description of the Plan's provisions.

General

The Plan is a defined benefit pension plan covering substantially all employees of Claxton-Hepburn Medical Center (Hospital or Employer) who have one year of service and are age twenty-one or older. Nottingham Trust, a division of Community Bank, N.A. (Nottingham) is the custodian of the Plan's assets during 2024. Community Bank, N.A. Trust Services (Community) was considered the custodian of the Plan's assets during 2023. Community underwent a name change rebranding in 2023, changing their name from Community Bank, N.A. Trust Services to Nottingham Trust, a division of Community Bank, N.A. Benefit Plan Administrative Services, Inc. (BPAS) provides recordkeeping and actuarial services for the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

On December 31, 2006, benefits under the pension plan were partially frozen. In connection with the Plan being partially frozen, no new employees other than registered nurses who are members of the New York State Nurses Association were eligible to participate in the Plan. On December 31, 2008, benefits under the pension plan were frozen for all registered nurses who are members of the New York State Nurses Association and on September 1, 2020, benefits under the pension plan were fully frozen for all participants and no further benefit accrues under the Plan.

Participants become fully vested in their individual account balances after five years of employment.

Funding Policy

The Plan's funding policy is for the Hospital to contribute an amount that will meet or exceed the annual ERISA minimum funding requirement. For the years ended December 31, 2024 and 2023, the Hospital made contributions of \$1,665,237 and \$1,652,229, respectively. The Hospital's contributions for 2024 and 2023 have met the minimum funding requirements of ERISA.

Pension Benefits

Eligible employees with five or more years of service are entitled to annual pension benefits beginning at normal retirement age (65) equal to an amount based upon a formula described in the Plan document which factors the participant's years of credited service. The Plan permits early retirement at ages 55-64. Employees may elect to receive their pension benefits in the form of a single life annuity, joint and survivor annuity with an option of 50% or 75% benefit continued to the participant's spouse, lifetime installments, or installments over a certain number of years. The Plan provides for automatic lump-sum payments to participants whose vested accrued benefits are less than or equal to \$7,000. If employees terminate before rendering five years of service, they forfeit the right to receive the portion of their accumulated accrued benefits.

1. DESCRIPTION OF PLAN (Continued)

Death and Disability Benefits

If an active employee dies at age 55 or older, a death benefit equal to 50% of the value of the employee's accumulated pension benefit is paid to the employee's beneficiary. Active employees who become totally disabled receive annual disability benefits that are equal to the normal retirement benefit they have accumulated as of the time they become disabled provided they have attained age 40 and completed 15 years of service.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan's financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Cash

Non-interest-bearing cash balances consist of amounts held in a suspense account or clearing account until disposition of the funds is determined or completed.

Investment Valuation and Income Recognition

Investments are stated 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. 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 appreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

Fair Value Measurement

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 market value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under ASC Section 820 are described below:

- Level 1 - Valuations are based on quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access. Valuation adjustments are not applied to Level 1 instruments. Since valuations are based on quoted prices that are readily and regularly available in an active market, valuation of these products does not entail a significant degree of judgment.
- Level 2 - Valuations are based on quoted prices in markets that are not active or for which all significant inputs are observable, either directly or indirectly.
- Level 3 - Valuations are based on inputs that are unobservable and significant to the overall fair value measurement.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Fair Value Measurement (Continued)

The asset's 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.

The following is a description of the valuation methodology used for assets measured at fair value:

Cash equivalents and certificates of deposit: Valued at cost or amortized cost which approximates fair value. Level 2 investments are valued based on yields currently available on similar investments.

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

U.S. government obligations: Valued using pricing models maximizing the use of observable inputs for similar securities.

Mutual and exchange-traded funds: Valued at the daily closing price as reported by the open-end mutual fund or on the active market on which the closed-end money market fund, mutual fund, or exchange-traded fund is traded. Mutual and exchange-traded funds held by the Plan are registered with the U.S. Securities and Exchange Commission.

Common and preferred stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

There have been no changes to the valuation techniques used during 2024 and 2023.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

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

Risks and Uncertainties

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

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates

The preparation of financial statements in accordance with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein; disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

3. INFORMATION PREPARED AND CERTIFIED BY THE CUSTODIAN

The Plan administrator has obtained certifications from the plan custodian, Nottingham Trust Services, a division of Community Bank, N.A. (Nottingham) as of and for the year ended December 31, 2024 and Community Bank, N.A. Trust Services (Community) as of and for the year ended December 31, 2023, that the following information is complete and accurate as of and for the years ended December 31:

	<u>2024</u>	<u>2023</u>
Cash	<u>\$ 7,016</u>	<u>\$ 8,578</u>
Investments, at fair value	<u>\$ 36,449,750</u>	<u>\$ 33,918,146</u>
Accrued interest and dividends receivable	<u>\$ 81,192</u>	<u>\$ 82,014</u>
Net appreciation in the fair value of investments	<u>\$ 3,454,169</u>	<u>\$ 3,193,160</u>
Interest and dividends	<u>\$ 1,059,699</u>	<u>\$ 999,548</u>
Schedule of Assets Held at End of Year	Schedule I	

4. FAIR VALUE MEASUREMENTS

The following sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash equivalents	\$ 1,597,817	\$ -	\$ -	\$ 1,597,817
Foreign bonds and notes	-	47,359	-	47,359
Certificates of deposit	-	1,362,280	-	1,362,280
US government obligations	-	285,000	-	285,000
Corporate debt securities	-	6,261,138	-	6,261,138
Mutual and exchange-traded funds	14,597,447	-	-	14,597,447
Common and preferred stock	<u>12,298,709</u>	<u>-</u>	<u>-</u>	<u>12,298,709</u>
	<u>\$28,493,973</u>	<u>\$ 7,955,777</u>	<u>\$ -</u>	<u>\$36,449,750</u>

4. FAIR VALUE MEASUREMENTS (Continued)

The following sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2023:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash equivalents	\$ 1,715,530	\$ -	\$ -	\$ 1,715,530
Certificates of deposit	-	2,127,685	-	2,127,685
US government obligations	-	1,517,225	-	1,517,225
Corporate debt securities	-	4,816,071	-	4,816,071
Mutual and exchange-traded funds	13,148,060	-	-	13,148,060
Common and preferred stock	<u>10,593,575</u>	<u>-</u>	<u>-</u>	<u>10,593,575</u>
	<u>\$25,457,165</u>	<u>\$ 8,460,981</u>	<u>\$ -</u>	<u>\$33,918,146</u>

5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died and (c) present employees or their beneficiaries. Benefits under the Plan are accumulated based on employees' compensation and years of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances (retirement death, disability and termination of employment) are included to the extent they are deemed attributable to employee service rendered to the valuation date.

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

The significant actuarial assumptions used in the valuations as of January 1, 2024 are as follows:

- Traditional unit credit cost method.
- 7% interest rate.
- Discount rate of 5.10%.
- The sex-distinct Amount-Weighted Blue Collar Pri-2012 Mortality Tables for employees, healthy annuitants, and contingent survivors with mortality improvements projected using Scale MP-2021 on a fully generational basis. This assumption was based on a review of published mortality tables and after a review of the demographic and industry of the Plan and the percentage of hourly or union participants.
- Retirement age of 55-65.

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

5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS (Continued)

The actuarial present value of accumulated plan benefits as of the beginning of the plan year (January 1, 2024), was as follows:

Vested benefits:

Participants currently receiving payments	\$ 25,706,831
Other participants	<u>9,947,976</u>
	35,654,807

Non-vested benefits	<u>154,062</u>
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Total actuarial present value of accumulated plan benefits	<u>\$ 35,808,869</u>
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Changes in the actuarial present value of accumulated plan benefits were as follows:

Actuarial present value of accumulated plan benefits - beginning of year	\$ 36,343,495
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Increase (decrease) during the year attributable to:

Increase in interest due to decrease in discount period	2,445,784
Benefits accumulated and actuarial gains and losses	(172,957)
Benefits paid	<u>(2,807,453)</u>

Actuarial present value of accumulated plan benefits - end of year	<u>\$ 35,808,869</u>
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6. PARTY-IN-INTEREST TRANSACTIONS

Nottingham and Community are the custodians of the Plan's assets and investment advisors, and BPAS Actuarial and Pension Services (BPAS) is the Plan's recordkeeper, third-party administrator, and actuary. As such, transactions between the Plan, Nottingham, Community, and BPAS qualify as party-in-interest transactions.

7. TAX STATUS

The Internal Revenue Service has determined and informed the Hospital by letter dated November 20, 2017 that the Plan and related trust are designed in accordance with applicable sections of the Code. The Plan Administrator and legal counsel believe that the Plan is designed and currently being operated in compliance with the applicable provisions of the Code, and that the Plan was qualified and exempt from income taxes as of December 31, 2024. Therefore, no provision for income taxes has been included in the Plan's financial statements.

8. PLAN TERMINATION

As discussed in Note 1, the Plan was frozen in September 2020. Although it has no intention of doing so, the Plan has the right to discontinue its contributions at any time, and to terminate the Plan subject to the provisions of ERISA.

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

- a. Benefits attributable to employee contributions, taking into account those paid out before termination.
- b. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five year preceding plan termination.
- c. Other vested benefits insured by PBGC (a U.S. government agency) up to the applicable limitations discussed below.
- d. All other vested benefits (that is, vested benefits not insured by the PBGC).
- e. All nonvested benefits.

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

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

9. SUBSEQUENT EVENTS

Subsequent events have been evaluated through October 14, 2025, which is the date the financial statements were available to be issued.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par. or Maturity Value	Cost	Current Value
Cash		Savings Account	\$ 7,016	\$ 7,016
Cash equivalents				
	Federated Investors Fed Treas Obgl	Money Market Fund - 500,110 Shares	500,110	500,110
*	CBNA Daily Trust Sweep PR	Sweep Account - 551,241 Shares	551,241	551,241
	United States Treasury Bills	Treasury Bills - 550,000 Shares	536,924	546,466
Total cash equivalents			1,588,275	1,597,817
Foreign bonds and notes				
	Bank of Montreal	Bonds - 5.150%, due 11/8/2034, \$50,000 par value	49,500	47,359
Certificates of deposit				
	Capital One National	CD - 4.550%, due 6/14/2027, \$100,000	99,529	101,232
	Capital One National	CD - 4.450%, due 6/14/2028, \$100,000	99,418	101,414
	First Foundation Bank	CD - 4.650%, due 12/29/2026, \$100,000	99,650	101,186
	First South Financial	CD - 5.350%, due 11/6/2026, \$150,000	149,550	150,291
	Flagstar Bank	CD - 5.250%, due 4/24/2025, \$200,000	199,600	200,590
	HSBC Bank USA NA	CD - 4.250%, due 10/23/2028, \$200,000	198,939	201,742
	Morgan Stanley Bank	CD - 4.900%, due 3/23/2028, \$100,000	99,500	102,680
	Morgan Stanley Bank	CD - 4.900%, due 4/7/2025, \$150,000	149,700	150,232
	Morgan Stanley Private Bank	CD - 4.900%, due 3/23/2028, \$100,000	99,500	102,680
	Morgan Stanley Private Bank	CD - 4.900%, due 4/7/2025, \$150,000	149,700	150,233
Total certificates of deposit			1,345,086	1,362,280
U.S. government obligations				
	Government National Mortgage Association	Bonds - 4.00%, due 5/20/2050	44,326	38,470
	United States Treasury Note	Note - 2.00% due 8/15/2025	246,592	246,530
Total U.S. government obligations			290,918	285,000
Corporate debt securities				
	Abbvie Inc.	Bonds - 3.200%, due 5/14/2026, \$50,000 par value	48,052	49,110
	Ally Financial Inc.	Bonds - 4.750%, due 6/9/2027, \$50,000 par value	47,548	49,652
	Altria Group Inc.	Bonds - 4.500%, due 5/2/2043, \$50,000 par value	39,116	40,839
	Apache Corp	Bonds - 4.375%, due 10/15/2028, \$50,000 par value	50,207	48,248
	Ares Capital Corp	Notes - 2.150% due 7/15/2026, \$50,000 par value	43,765	47,805
Subtotal corporate debt securities			228,688	235,654

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		228,688	235,654
	Associated Banc-Corp	Notes - 4.250%, due 1/15/2025, \$50,000 par value	49,464	49,979
	Axa Equitable Holdings Inc.	Bonds - 4.350%, due 4/20/2028, \$50,000 par value	50,505	48,990
	Bank America Corp	Bonds - 5.300%, due 12/12/2036, \$100,000 par value	98,800	98,845
	Bank New York Mellon Corp	Bonds - 3.750%, due 12/31/2049, \$50,000 par value	39,473	47,254
	Bank New York Mellon Corp PRFD	Bonds - 4.700%, due 12/31/2049, \$100,000 par value	108,454	99,051
	Bank of America Corp	Bonds - 5.700%, due 3/6/2034, \$100,000 par value	99,400	100,065
	Bank of Montreal	Bonds - 5.750%, due 3/28/2029, \$50,000 par value	49,925	50,121
	Bank of Montreal	Bonds - 5.600%, due 4/9/2029, \$50,000 par value	49,825	49,186
	Barclays Bank PLC	Bonds - 5.350%, due 8/6/2029, \$100,000 par value	99,900	100,501
	Baxter International Inc.	Bonds - 6.250%, due 12/1/2037, \$75,000 par value	76,450	76,717
	Blackstone Private Credit	Bonds - 2.625%, due 12/15/2026, \$100,000 par value	85,687	95,281
	Boeing Co.	Bonds - 3.300%, due 3/1/2035, \$125,000 par value	99,086	98,178
	Brighthouse Finl Inc.	Notes - 3.700%, due 6/22/2027, \$100,000 par value	92,936	97,027
	Broadstone Net Lease Inc.	Bonds - 2.600%, due 9/15/2031, \$50,000 par value	37,479	41,304
	Buckeye Partners LP	Bonds - 3.950%, due 12/1/2026, \$50,000 par value	49,162	48,127
	Bunge LTD Fin Corp	Notes - 3.250%, due 8/15/2026, \$100,000 par value	96,570	97,687
	Cambell Soup Co.	Bonds - 4.150%, due 3/15/2028, \$50,000 par value	50,023	48,804
	Canadian Imperial Bank	Bonds - 5.550%, due 5/7/2027, \$100,000	99,700	98,739
	Cardinal Health Inc.	Notes - 3.410%, due 6/15/2027, \$50,000 par value	47,540	48,455
	Celanese US Holdings LLC	Bonds - 6.165%, due 7/15/2027, \$50,000 par value	50,171	50,758
	Citigroup Global MKTS	Bonds - 3.500%, due 6/21/2037, \$50,000 par value	49,250	43,517
	Citigroup Inc.	Bonds - 4.750%, due 9/27/2034, \$250,000	247,500	233,083
	Comerica Inc. PRFD	Bonds - 5.625%, due 12/31/2049, \$100,000 par value	104,250	99,406
	Credit Agricole CIB	Bonds - 6.000%, due 6/18/2039, \$100,000 par value	99,500	98,940
	CVS Health Corp	Bonds - 4.300%, due 3/25/2028, \$50,000 par value	50,347	48,438
	CVS Health Corp	Bonds - 5.300%, due 6/1/2033, \$50,000 par value	48,465	47,944
	Deutsche Bank	Bonds - 6.000%, due 4/24/2034, \$100,000 par value	99,000	99,654
	Energy Transfer LP PFD	Bonds - 7.125%, due 5/15/2030, \$50,000 par value	48,375	50,176
	Expedia Group Inc.	Bonds - 3.250% due 2/15/2030, \$100,000 par value	82,876	92,181
	Fedex Corp	Bonds - 3.100%, due 8/5/2029, \$50,000 par value	49,903	46,345
	Fifth Third Bankcorp PRFD	Bonds - 4.500%, due 12/31/2099, \$100,000 par value	103,733	98,613
	Fluor Corp	Bonds - 4.250%, due 9/15/2028, \$50,000 par value	49,629	47,560
	Ford Credit Note	Bonds - 6.050%, due 6/20/2031, \$100,000 par value	98,925	98,059
	Fortune Brands Home and Sec.	Bonds - 3.250% due 9/15/2029, \$100,000 par value	88,701	92,481
	General Electric Cap Corp	Bonds - 4.250%, due 9/15/2027, \$100,000 par value	87,125	97,674
	General Motors Financial	Bonds - 4.000%, due 1/15/2025, \$50,000 par value	50,015	49,979
	General Motors Financial Co. Inc.	Bonds - 2.750% due 6/20/2025, \$50,000 par value	48,770	49,510
	Goldman Sachs Group	Bonds - 5.550%, due 4/21/2031, \$100,000 par value	99,100	97,928
	Goldman Sachs Group PFD	Bonds - 4.950%, due 12/15/2049, \$75,000 par value	75,926	74,675
	Huntington Bancshares	Bonds - 5.625%, due 12/31/2049, \$100,000 par value	103,250	97,652
	Jefferies Financial Group In MTNV	Bonds - 4.500%, due 7/31/2037, \$50,000 par value	48,438	47,092
	Jefferies Group LLC	Bonds - 2.000%, due 9/14/2030 \$50,000 par value	39,352	44,151
	JP Morgan Chase & Co.	Bonds - 3.500%, due 12/21/2037, \$50,000 par value	49,865	46,638
	JP Morgan Chase & Co.	Bonds - 4.000%, due 6/12/2033, \$70,000 par value	69,510	64,548
	JP Morgan Chase & Co.	Bonds - 4.600%, due 12/31/2049, \$25,000 par value	22,125	24,888
	JP Morgan Chase & Co.	Bonds - 5.150%, due 11/14/2034, \$100,000 par value	99,400	98,087
	Kraft Heinz Food Co.	Notes - 3.000%, due 6/1/2026, \$93,000 par value	92,959	90,787
	Kyndryl Holdings, Inc.	Bonds - 3.150%, due 10/15/2031, \$50,000 par value	37,661	43,331
	Lloyds BKG Group PLC	Bonds - 3.750%, due 1/11/2027, \$100,000 par value	95,130	97,750
	M&T Bank Corp Preferred	Bonds - 5.000%, due 12/31/2049, \$100,000 par value	102,780	99,367
	Micron technology, Inc.	Bonds - 5.875%, due 2/9/2033, \$50,000 par value	48,907	51,226
	Morgan Stanley Finance LLC	Bonds - 5.000%, due 11/7/2034, \$100,000 par value	98,900	95,362
	MyLan NV	Notes - 3.950%, due 6/15/2026, \$50,000 par value	47,970	49,212
	Subtotal corporate debt securities		4,196,875	4,196,977

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		4,196,875	4,196,977
	National Bank of Canada	Bonds - 5.650%, due 3/12/2029, \$100,000 par value	99,750	97,502
	Newell Brands Inc.	Notes - 5.700%, due 4/1/2026, \$30,000 par value	28,598	29,987
	Oracle Corp	Bonds - 2.950%, due 4/1/2030, \$100,00 par value	91,548	90,325
	Phillips 66 Partners LP	Bonds - 3.750%, due 3/1/2028, \$50,000 par value	48,874	46,589
	Prospect Capital Corp	Bonds - 3.706%, due 1/22/2026, \$100,000 par value	94,570	97,074
	Prudential Financial Inc. PFD	Bonds - 3.700%, due 10/1/2050, \$100,000 par value	104,977	88,963
	Regions Financial Corp	Bonds - 5.750%, due 12/31/2049, \$150,000 par value	160,195	148,746
	Santander Holdings USA Inc.	Notes - 4.400%, due 7/13/2027, \$50,000 par value	50,361	49,420
	Schwab Charles Corp PRFD	Bonds - 4.000%, due 12/1/2040, \$150,000 par value	157,875	129,495
	Simon Property Group Inc.	Bonds - 3.500%, due 9/1/2025, \$50,000 par value	50,085	49,650
	Southern Co.	Notes - 4.000%, due 1/15/2051, \$100,000 par value	104,147	97,994
	Southwest Airlines Co.	Bonds - 7.375%, due 3/1/2027, \$100,000 par value	104,644	104,383
	Tanger PPTYS LTD Partnership	Notes - 3.875%, due 7/15/2027, \$100,000 par value	99,120	97,087
	Teva Pharmaceutical	Bonds - 3.150%, due 10/1/2026, \$100,000 par value	93,152	96,090
	Texas Cap Bancshares Inc.	Bonds - 4.000%, due 5/6/2031, \$50,000 par value	50,686	48,025
	Toronto-Dominion Bank	Bonds - 5.600%, due 3/15/2029, \$100,000 par value	99,700	100,242
	Truist Finl Corp Preferred	Bonds - 4.800%, due 12/31/2099, \$150,000 par value	142,615	149,187
	United Airlines Holdings Inc.	Bonds - 4.875%, due 1/15/2025, \$50,000 par value	50,113	49,879
	US Bancorp	Bonds - 5.250%, due 11/7/2034, \$100,000 par value	99,000	97,280
	US Bancorp	Bonds - 5.350%, due 12/19/2034, \$100,000 par value	99,400	99,354
	Viacom Inc.	Bonds - 6.875%, due 4/30/2036, \$50,000 par value	50,477	50,637
	VMWARE Inc.	Bonds - 3.900%, due 8/21/2027, \$50,000 par value	48,850	48,874
	Wells Fargo & Company	Bonds - 5.550%, due 3/6/2034, \$100,000 par value	98,900	100,317
	Wells Fargo & Co.	Bonds - 5.150%, due 12/16/2034, \$100,000 par value	99,000	97,062
	Total corporate debt securities		6,323,512	6,261,138
	Mutual and exchange-traded funds			
	ABRDN Asia Pacific Inc Fund	Mutual Fund - 22,500 Shares	353,108	331,200
	Alliance Bernstein Global High Income FD	Mutual Fund - 30,000 Shares	317,665	321,900
	American Funds Europacific Growth F2	Mutual Fund - 1,688 Shares	89,118	90,402
	American Funds New World F2	Mutual Fund - 2,678 Shares	168,793	205,596
	Blackrock Global Division Trust	Mutual Fund - 8,000 Shares	65,394	86,160
	Blackrock Mult-Sector Inc.	Bond - 4,000 Shares	52,334	58,400
	Blackrock RES & Commodities	Equity - 30,000 Shares	165,489	256,200
	Blackrock Science & Tech ETF	Exchange-Traded Fund - 2,500 Shares	41,893	91,400
	Clearbridge Energy MLP	Exchange-Traded Fund - 4,000 Shares	24,828	186,160
	Columbia Seligm Prem Tech GR	Mutual Fund - 1,501 Shares	26,990	47,949
	Invesco Aerospace & Defense ETF	Exchange-Traded Fund - 1,500 Shares	78,174	172,095
	Invesco NASDAQ 100 ETF	Exchange-Traded Fund - 1,000 Shares	112,825	210,450
	Invesco Oppenheimer Developing Mkt Y	Mutual Fund - 1,958 Shares	76,224	74,577
	Invesco QQQ Trust	Exchange-Traded Fund - 300 Shares	87,072	153,369
	Ishares Core S&P Midcap ETF	Exchange-Traded Fund - 24,000 Shares	818,417	1,495,440
	Ishares Core S&P Smallcap ETF	Exchange-Traded Fund - 9,500 Shares	653,687	1,094,590
	Ishares NASDAQ Biotechnology ETF	Exchange-Traded Fund - 4,100 Shares	426,659	542,061
	Ishares Ultra Short-Term BD	Exchange-Traded Fund - 13,500 Shares	680,758	680,805
	Ishares US Real Estate	Exchange-Traded Fund - 1,200 Shares	98,950	111,672
	Subtotal mutual and exchange-traded funds		4,338,378	6,210,426

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par. or Maturity Value	Cost	Current Value
	Balances carried forward		4,338,378	6,210,426
	Ishares US Preferred Stock	Exchange-Traded Fund - 30,000 Shares	941,573	943,200
	Ishares US Regional Banks ETF	Exchange-Traded Fund - 5,500 Shares	167,150	276,980
	Kraneshares China Internet	Equity - 3,500 Shares	93,870	102,340
	Neuberger Berman Genesis I	Mutual Fund - 1,534 Shares	83,841	100,332
	Neuberger Berman Next Generation	Mutual Fund - 8,000 Shares	67,760	101,920
	Select Sector SPDR TR Communication	Equity - 4,000 Shares	187,917	387,240
	SPDR BBB Convert SECS ETF	Exchange-Traded Fund - 5,000 Shares	236,803	389,450
	SPDR Financial Select Sector	Equity - 4,000 Shares	92,596	193,320
	Tekla Healthcare Opportunity	Mutual Fund - 4,000 Shares	69,319	75,480
	Vanguard Communication Services	Equity - 1,000 Shares	83,523	154,960
	Vanguard Consumer Staples	Equity - 600 Shares	79,164	126,828
	Vanguard Energy ETF	Exchange-Traded Fund - 1,900 Shares	114,706	230,489
	Vanguard Growth ETF	Exchange-Traded Fund - 3,000 Shares	425,917	1,231,320
	Vanguard Healthcare ETF	Exchange-Traded Fund - 500 Shares	128,002	126,845
	Vanguard High Dividend Yield	Equity - 500 Shares	41,964	63,795
	Vanguard Industrials ETF	Exchange-Traded Fund - 300 Shares	47,812	76,317
	Vanguard S&P 500 ETF	Exchange-Traded Fund - 6,500 Shares	1,396,078	3,502,265
	Vanguard Smallcap ETF	Exchange-Traded Fund - 500 Shares	77,027	120,140
	Wells Fargo Multi Sector Inc.	Mutual Fund - 15,000 Shares	186,750	183,800
	Total mutual and exchange-traded funds		8,860,150	14,597,447
	Common and preferred stock			
	3M Company	Common Stock - 1,200 Shares	113,112	154,908
	Abbott Laboratories	Common Stock - 358 Shares	37,193	40,493
	Abbvie Inc.	Common Stock - 400 Shares	29,798	71,080
	Albemarle Corp	Common Stock - 547 Shares	48,915	47,086
	Alphabet Inc. Class A	Common Stock - 1,258 Shares	127,217	238,139
	Alphabet Inc. Class C	Common Stock - 600 Shares	37,335	114,264
	Amazon.com Inc.	Common Stock - 800 Shares	30,975	175,512
	Ameren Corporation	Common Stock - 490 Shares	36,954	43,679
	American States Water	Common Stock - 504 Shares	40,494	39,171
	Ameriprise Financial Inc	Common Stock - 250 Shares	105,485	133,108
	Amgen Inc.	Common Stock - 800 Shares	167,473	208,512
	Apple Inc.	Common Stock - 1,890 Shares	102,113	473,294
	Arrow Electronics Inc	Common Stock - 662 Shares	80,916	74,885
	Astrazeneca PLC ADR	Common Stock - 1,215 Shares	76,753	79,607
	Ball Corp	Common Stock - 645 Shares	40,629	35,559
	Bank of America Corporation	Common Stock - 3,000 Shares	69,218	131,850
	Berkshire Hathaway Inc. B	Common Stock - 582 Shares	144,814	263,809
	Booking Holdings Inc.	Common Stock - 25 Shares	41,093	124,211
	Bristol Myers Squibb Company	Common Stock - 1,600 Shares	74,193	90,496
	Broadcom Inc.	Common Stock - 650 Shares	34,395	150,696
	Builders Firstsource Inc	Common Stock - 246 Shares	40,120	35,161
	Capital One Financial	Common Stock - 311 Shares	45,140	55,458
	Chubb LTD	Common Stock - 144 Shares	37,745	39,787
	Subtotal common and preferred stock		1,562,080	2,820,765

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par. or Maturity Value	Cost	Current Value
	Balances carried forward		1,562,080	2,820,765
	Carnival Corp	Common Stock - 3,000 Shares	28,947	74,760
	Cigna Corp	Common Stock - 317 Shares	74,576	87,536
	CSX Corp	Common Stock - 1,247 Shares	42,245	40,241
	Cisco Systems Inc.	Common Stock - 2,000 Shares	63,488	118,400
	Coca Cola Company	Common Stock - 2,000 Shares	93,074	124,520
	Constellation Brands Inc	Common Stock - 167 Shares	40,908	36,907
	Cooper Cos Inc	Common Stock - 387 Shares	35,286	35,577
	Crown Castle International	Common Stock - 800 Shares	69,573	72,608
	Danaher Corp	Common Stock - 153 Shares	40,724	35,121
	Dell Technologies Inc.	Common Stock - 700 Shares	14,681	80,668
	Diamondback Energy, Inc.	Common Stock - 244 Shares	47,676	39,975
	Dollar General Corp	Common Stock - 2,032 Shares	157,742	154,066
	Edwards Lifesciences Corp	Common Stock - 1,400 Shares	79,856	103,642
	Eli Lilly and Company	Common Stock - 150 Shares	36,204	115,800
	Emerson Electric Co.	Common Stock - 800 Shares	47,298	99,144
	EOG Resources Inc	Common Stock - 349 Shares	43,552	42,780
	Exelon Corp	Common Stock - 2,500 Shares	82,670	94,100
	Expedia Inc.	Common Stock - 500 Shares	48,755	93,165
	Exxon Mobil Corp	Common Stock - 1,373 Shares	101,170	147,694
	Fedex Corp	Common Stock - 350 Shares	53,124	98,466
	Five Below Inc	Common Stock - 1,000 Shares	75,759	104,960
	Fox Corp CL B	Common Stock - 2,500 Shares	68,389	114,350
	Freeport McMoran Inc	Common Stock - 1,045 Shares	46,624	39,794
	Gaming & Leisure Properties	Common Stock - 801 Shares	38,958	38,576
	GE Aerospace	Common Stock - 700 Shares	32,480	116,753
	GE Healthcare Tech	Common Stock - 1,200 Shares	72,917	93,816
	GE Vernova Inc	Common Stock - 250 Shares	18,546	82,233
	General Dynamics Corp	Common Stock - 500 Shares	84,761	131,745
	Gilead Sciences Inc.	Common Stock - 600 Shares	39,057	55,422
	Goldman Sachs Group Inc.	Common Stock - 100 Shares	31,585	57,262
	Hershey Co	Common Stock - 205 Shares	38,819	34,717
	Home Depot Inc.	Common Stock - 626 Shares	170,185	243,508
	Honeywell Intl Inc.	Common Stock - 1,200 Shares	217,827	271,068
	Huntington Ingalls Inds Inc	Common Stock - 313 Shares	83,796	59,148
	Intl Business Machines Corp	Common Stock - 500 Shares	56,179	109,915
	JPMorgan Chase & Co.	Common Stock - 2,114 Shares	256,059	506,747
	Keycorp	Common Stock - 2,644 Shares	42,039	45,318
	Kraft Heinz Company	Common Stock - 2,400 Shares	74,916	73,704
	Kroger Company	Common Stock - 1,000 Shares	25,857	61,150
	L3Harris Technologies, Inc.	Common Stock - 500 Shares	90,168	105,140
	Labcorp Holdings Inc	Common Stock - 150 Shares	16,432	34,398
	Lowe's Companies Inc.	Common Stock - 500 Shares	37,458	123,400
	Lululemon Athletica Inc	Common Stock - 200 Shares	51,905	76,482
	Mastercard Inc. Class A	Common Stock - 250 Shares	83,705	131,643
	McDonalds Corp	Common Stock - 600 Shares	145,403	173,934
	Meta Platforms Inc.	Common Stock - 250 Shares	33,063	146,378
	Metlife Inc.	Common Stock - 1,500 Shares	99,461	122,820
	Micron Technology	Common Stock - 1,787 Shares	109,227	150,394
	Microsoft Corp	Common Stock - 375 Shares	40,353	158,063
	Mondelez Intl Inc. CL A	Common Stock - 800 Shares	33,977	47,784
	Morgan Stanley	Common Stock - 1,000 Shares	43,327	125,720
	Subtotal common and preferred stock		5,022,861	8,152,277

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par. or Maturity Value	Cost	Current Value
	Balances carried forward		5,022,861	8,152,277
	Nextera Energy Inc.	Common Stock - 3,911 Shares	206,066	280,380
	Northrop Grumman Corp	Common Stock - 80 Shares	35,271	37,543
	NVIDIA Corporation	Common Stock - 1,900 Shares	7,497	255,151
	JD.Com Inc.	Common Stock - 1,000 Shares	26,586	34,670
	Medtronic PLC	Common Stock - 1,200 Shares	94,863	95,856
	National Grid PLC ADR	Common Stock - 1,500 Shares	87,764	89,130
	Nestle SA ADR	Common Stock - 500 Shares	38,668	41,313
	Novo Nordisk A/S ADR	Common Stock - 500 Shares	49,325	43,010
	Occidental Petroleum Corp	Common Stock - 1,000 Shares	57,547	49,410
	Oracle Corp	Common Stock - 800 Shares	31,251	133,312
	Palo Alto Networks Inc.	Common Stock - 700 Shares	16,959	127,372
	Pepsico Inc.	Common Stock - 700 Shares	96,842	106,442
	Procter & Gamble Co.	Common Stock - 400 Shares	40,356	67,060
	Prologis Inc	Common Stock - 317 Shares	39,714	33,507
	Qualcomm Inc.	Common Stock - 600 Shares	37,622	92,172
	Regeneron Pharmaceuticals	Common Stock - 37 Shares	39,443	26,356
	Rockwell Automation Inc	Common Stock - 160 Shares	43,695	45,726
	RTX Corp	Common Stock - 1,000 Shares	63,901	115,720
	Salesforce.com Inc.	Common Stock - 500 Shares	54,164	167,165
	Softbank Group Corp ADR	Common Stock - 2,500 Shares	50,206	73,055
	Southern Company	Common Stock - 600 Shares	27,368	49,392
	Starbucks Corp	Common Stock - 2,900 Shares	222,988	264,621
	State Street Corp	Common Stock - 1,200 Shares	69,339	117,780
	Sysco Corp	Common Stock - 1,200 Shares	73,036	91,752
	Target Corp	Common Stock - 700 Shares	60,075	94,626
	Texas Instruments Inc.	Common Stock - 700 Shares	63,080	131,257
	Thermo Fisher Scientific Inc	Common Stock - 67 Shares	37,171	34,855
	TJX Companies	Common Stock - 1,155 Shares	73,022	139,536
	Trimble Navigation	Common Stock - 758 Shares	43,367	53,560
	Ulta Beauty Inc.	Common Stock - 250 Shares	65,603	108,733
	Union Pacific Corp	Common Stock - 400 Shares	60,881	91,216
	United Parcel Service CL B	Common Stock - 1,000 Shares	121,129	126,100
	UnitedHealth Group Inc.	Common Stock - 200 Shares	39,545	101,172
	Universal Ins Holdings Inc.	Common Stock - 2,500 Shares	30,890	52,650
	Visa Inc. Class A	Common Stock - 900 Shares	135,864	284,436
	Wal Mart Stores Inc.	Common Stock - 1,500 Shares	48,024	135,525
	Walt Disney Co.	Common Stock - 1,200 Shares	103,828	133,620
	Wesco Intl Inc. PDF	Preferred Stock - 2,000 Shares	56,200	51,040
	Xcel Energy Inc.	Common Stock - 1,500 Shares	93,723	101,280
	Xylem Inc	Common Stock - 321 Shares	44,806	37,242
	Zimmer Holdings Inc.	Common Stock - 300 Shares	33,667	31,689
	Total common and preferred stock		7,644,207	12,298,709
			\$ 26,108,664	\$ 36,456,766

* Denotes a party in interest.

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER
EMPLOYER IDENTIFICATION NUMBER 15-0559686
PLAN NUMBER 001
SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
FOR THE YEAR ENDED DECEMBER 31, 2024

(a) <u>Identity of Party Involved</u>	(b) <u>Description of Asset</u>	(c) <u>Purchase Price</u>	(d) <u>Selling Price</u>	(e) <u>Lease Rental</u>	(f) <u>Expense Incurred With Transaction</u>	(g) <u>Cost of Assets</u>	(h) <u>Current Value of Asset on Transaction Date</u>	(i) <u>Net Gain or (Loss)</u>
I. <u>Individual 5% Transactions</u>								
None								
II. <u>Series of Transactions, Not Involving Securities, With the Same Person</u>								
None.								
III. <u>Series of Transactions Involving Securities of the Same Issue</u>								
Federated Investors Fed Treas Obgl	Money Market Fund	\$ 8,610,712	\$ -	\$ -	\$ -	\$ 8,610,712	\$ 8,610,712	\$ -
Federated Investors Fed Treas Obgl	Money Market Fund	\$ -	\$ 9,286,956	\$ -	\$ -	\$ 9,286,956	\$ 9,286,956	\$ -
* CBNA Daily Trust Sweep PR	Money Market Fund	\$ 3,252,413	\$ -	\$ -	\$ -	\$ 3,252,413	\$ 3,252,413	\$ -
* CBNA Daily Trust Sweep PR	Money Market Fund	\$ -	\$ 3,049,035	\$ -	\$ -	\$ 3,049,035	\$ 3,049,035	\$ -
IV. <u>Series of Transactions Involving Securities, With a Single Person</u>								
None								

* Denotes a party in interest.

The accompanying notes are an integral part of these schedules.

Retirement Plan for Employees of Claxton-Hepburn Medical Center

Schedule SB, Line 26 - Schedule of Active Participant Data

EIN/PN: 15-0559686/001

Active Participant Data

Completed Years of Service on January 1, 2024											
Attained Age	Under 1	1 - 4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40+	Total
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	0	0	0	0	0	0	0
40-44	0	11	3	0	0	0	0	0	0	0	14
45-49	0	7	4	3	0	0	0	0	0	0	14
50-54	0	3	13	6	7	0	0	0	0	0	29
55-59	0	3	7	5	9	5	0	0	0	0	29
60-64	1	2	11	2	5	2	2	0	0	0	25
65-70	1	0	0	0	1	0	2	0	0	0	4
70 & up	0	0	0	0	0	0	0	0	0	0	0
Total	2	26	38	16	22	7	4	0	0	0	115

The valuation of a defined benefit pension plan involves estimates and assumptions about the probability of events occurring far into the future. Examples include assumptions about future employment, mortality, and retirement. Below is a description of the actuarial assumptions and methods used in the valuation.

Funding Target Liability

Valuation Date: January 1, 2024

Demographic Information: The demographic information was provided as of January 1, 2024 by Claxton-Hepburn Medical Center. Although we did not audit the data, we did review the data for reasonableness.

Actuarial Cost Method: As required by PPA, the Traditional Unit Credit Cost Method was used.

Asset Valuation Method: The actuarial value of assets is determined by averaging the fair market value of assets as of the valuation date and the adjusted fair market values as of the preceding two valuation dates. This methodology is consistent with that provided in IRS Notice 2009-22.

Anticipated Rate of Return on Plan Assets: 7.00%, based on a review of the Plan's asset allocation, investment policy (as shown in the annual funding notice), and expected returns using recent capital market assumptions published by leading financial organizations.

Actuarial Valuation Software: For purposes of developing the projected future benefit payments as well as determining attributed liabilities and normal costs as of the valuation date, we utilized the ProVal software platform developed by Winklevoss Technologies. We believe this externally developed valuation system is appropriate, was used for its intended purpose, and did not produce unreasonable results.

Interest Rates for Minimum Required Contribution: The September 2023 funding segment rates were utilized as prescribed by IRC Section 430(h) and elected by Claxton-Hepburn Medical Center. Below, please find the segment rates after reflection of the segment rate stabilization provisions of IRC Section 430(h)(2)(C)(iv).

Segment	Interest Rate
Segment 1	4.75%
Segment 2	4.87%
Segment 3	5.59%

Effective Interest Rate
5.10%

Segment 1 is applied to benefit payments expected to be made in the first 5 years, segment 2 is applied to benefit payments expected to be made in the next 15 years and segment 3 is applied thereafter.

SECTION V**DATA, ASSUMPTIONS AND PROVISIONS**

Interest Rates used to determine Maximum Recommended Contribution: Below, please find the segment rates without reflection of the segment rate stabilization provisions of IRC Section 430(h)(2)(C)(iv). These rates were utilized to determine the low-default risk obligation measurement (“LDROM”) of the accrued benefits as of the Valuation Date.

Segment	Interest Rate
Segment 1	3.62%
Segment 2	4.46%
Segment 3	4.52%

Effective Interest Rate
4.43%

Segment 1 is applied to benefit payments expected to be made in the first 5 years, segment 2 is applied to benefit payments expected to be made in the next 15 years and segment 3 is applied thereafter.

Mortality for Healthy Lives:

The sex-distinct Amount-Weighted Pri-2012 Mortality Tables for employees and healthy annuitants with mortality improvements projected using IRS 2024 Adjusted Scale MP-2021 on a generational basis.

Mortality for Disabled Lives: The sex-distinct mortality tables prescribed under IRS Notice 2008-29 and IRS Revenue Ruling 96-7. These mortality tables have no projection for future mortality improvements.

Rate of Compensation Increase: Not applicable since the Plan is frozen.

Retirement Incidence: Rates of retirement were based on a review of plan experience by the prior actuary and the Medical Center’s future expectations. The scope of our engagement did not allow for us to determine the reasonability of this assumption. The rates used in this valuation are illustrated below:

Age	Percentage
55-59	8%
60-61	15%
62	25%
63-64	20%
65	100%

Current and future vested terminated participants are assumed to retire at age 65, based on the terms of the plan and the Medical Center’s future expectations.

Turnover: Employees were assumed to terminate at age-related rates of termination under 80% of the Small Plan Age Table from the 2003 SOA Pension Plan Turnover Study prior to age 55. This assumption is based on a review of plan experience by the prior actuary and the Medical Center's future expectations. The scope of our engagement did not allow for us to determine the reasonability of this assumption. Illustrative rates are shown below:

Age	Percentage
25	15.60%
30	12.40%
35	9.68%
40	7.52%
45	5.84%
50	4.48%

Disability: Due to limited available experience, the disability assumption is based on 40% of the sex-distinct disability incidence outlined in the Social Security Administration's Actuarial Note Number 2014.6. Future expectation is not expected to deviate significantly from these results. Illustrative rates are shown below:

Age	Percentage for Males	Percentage for Females
25	0.0866%	0.0632%
30	0.0836%	0.0775%
35	0.1122%	0.1232%
40	0.1560%	0.1662%
45	0.2090%	0.2246%
50	0.3150%	0.3301%
55	0.5003%	0.4766%
60	0.7381%	0.6109%

Administrative Expenses: Actual plan expenses, not including investment advisory fees, paid out of the trust during the previous plan year rounded to the nearest thousand.

Spouse Assumptions: 80% of participants not currently collecting benefits are assumed to be married, with male spouses assumed to be four years older and female spouses assumed to be four years younger than the participant.

Form of Benefit: The assumed form of benefit is a life annuity based on the Plan provisions and the Medical Center's expectations.

All assumptions used in determining the low-default risk obligation measurement were consistent with those used in determining the Funding Target Liability, except the interest rates which were disclosed above.

Actuarial Present Value of Accumulated Plan Benefits (ASC 960)

Interest Rate: 7.00%, based on a review of the Plan's asset allocation, investment policy (as shown in the annual funding notice), and expected returns using recent capital market assumptions published by leading financial organizations.

Mortality: The sex-distinct Amount-Weighted Blue Collar Pri-2012 Mortality Tables for employees, healthy annuitants, and contingent survivors with mortality improvements projected using Scale MP-2021 on a generational basis. This assumption was based on a review of published mortality tables and the demographics and industry of the Plan and the percentage of hourly or union participants.

Mortality for Disabled Lives: The sex-distinct Amount-Weighted Pri-2012 Disability Mortality Tables with projected mortality improvements using Scale MP-2021 on a generational basis. This assumption was based on a review of published mortality tables and the demographics and industry of the Plan.

Unless specifically mentioned, all remaining assumptions for the Actuarial Present Value of Accumulated Plan Benefits remain the same as described for the Funding Target Liability above.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED DECEMBER 31, 2024

	(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred With Transaction	(g) Cost of Assets	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
I. Individual 5% Transactions									
	None								
II. Series of Transactions Not Involving Securities With the Same Person									
	None								
III. Series of Transactions Involving Securities of the Same Issue									
	Federated Investors Fed Treas Obgl	Money Market Fund	\$ 8,610,712	\$ -	\$ -	\$ -	\$ 8,610,712	\$ 8,610,712	\$ -
	Federated Investors Fed Treas Obgl	Money Market Fund	\$ -	\$ 9,286,956	\$ -	\$ -	\$ 9,286,956	\$ 9,286,956	\$ -
	CBNA Daily Trust Sweep PR	Money Market Fund	\$ 3,252,413	\$ -	\$ -	\$ -	\$ 3,252,413	\$ 3,252,413	\$ -
	CBNA Daily Trust Sweep PR	Money Market Fund	\$ -	\$ 3,049,035	\$ -	\$ -	\$ 3,049,035	\$ 3,049,035	\$ -
IV. Series of Transactions Involving Securities With a Single Person									
	None								

* Denotes a party in interest.

The accompanying notes are an integral part of these schedules.

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
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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 RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF CLAXTON-HEPBURN MEDICAL CENTER	D Employer Identification Number (EIN) 15-0559686
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2024			
2	Assets:			
a	Market value	2a	34,652,969	
b	Actuarial value	2b	35,295,492	
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	443	29,796,249	29,796,249
b	For terminated vested participants	165	7,003,045	7,003,045
c	For active participants	115	5,925,748	6,047,847
d	Total	723	42,725,042	42,847,141
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.10%	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	699,000	
c	Target normal cost	6c	699,000	

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	Michael J. Costanza, FSA, EA, MAAA Signature of actuary	10/9/2025 Date
	Michael J. Costanza, FSA, EA, MAAA Type or print name of actuary	2307837 Most recent enrollment number
	BPAS Actuarial and Pension Services Firm name	315-703-8982 Telephone number (including area code)
	706 N. Clinton St Syracuse NY 13204 Address of the firm	

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>12.93</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		630
	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>5.23</u> %		33
	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		663
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III		Funding Percentages	
14	Funding target attainment percentage	14	82.37 %
15	Adjusted funding target attainment percentage	15	82.37 %
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	81.60 %
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
04/12/2024	395,584	0			
07/15/2024	395,584	0			
10/07/2024	395,584	0			
01/16/2025	361,555	0			
08/28/2025	116,930	0			
Totals ►			18(b)	1,665,237	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 1,606,913
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 %	3rd segment: 5.59 %
		☐ N/A, full yield curve used		
b	Applicable month (enter code)			21b 4
22	Weighted average retirement age			22 61
23	Mortality table(s) (see instructions)	☐ Prescribed - combined	☒ Prescribed - separate	☐ Substitute

Part VI Miscellaneous Items

24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26	Demographic and benefit information	
a	Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
b	Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31	Target normal cost and excess assets (see instructions):		
a	Target normal cost (line 6c)	31a	699,000
b	Excess assets, if applicable, but not greater than line 31a	31b	0
32	Amortization installments:	Outstanding Balance	Installment
a	Net shortfall amortization installment	7,551,649	907,913
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	1,606,913
35	Balances elected for use to offset funding requirement	Carryover balance	Prefunding balance
	0	0	0
36	Additional cash requirement (line 34 minus line 35)	36	1,606,913
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1,606,913
38	Present value of excess contributions for current year (see instructions)		
a	Total (excess, if any, of line 37 over line 36)	38a	0
b	Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40	Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41	If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021
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Retirement Plan for Employees of Claxton-Hepburn Medical Center
Schedule SB, Line 22 - Description of Weighted Average Retirement Age
EIN/PN: 15-0559686/001

Retirement Rates - Employees were assumed to retire in accordance with the rates shown below:

Age	Retirements per 1000 employees	Accumulated years
55	80	4.40
56	80	4.12
57	80	3.86
58	80	3.61
59	80	3.38
60	150	5.93
61	150	5.13
62	250	7.38
63	200	4.50
64	200	3.66
65	1000	14.86

Weighted Average Retirement Age: 60.8

Retirement Plan for Employees of Claxton-Hepburn Medical Center
Schedule SB, Line 19 - Discounted Employer Contributions
EIN/PN: 15-0559686/001

Date Due	Date Made	Plan year	Contribution Amount	Applicable Effective Interest Rate	Interest Adjusted Contribution
04/15/2024	04/12/2024	2024	\$395,584	5.10%	\$389,886
07/15/2024	07/15/2024	2024	\$395,584	5.10%	\$385,068
10/15/2024	10/07/2024	2024	\$395,584	5.10%	\$381,098
01/15/2025	01/16/2025	2024	\$361,555	10.10%*	\$343,234
09/15/2025	08/28/2025	2024	\$116,930	5.10%	\$107,627
Totals			\$1,665,237		\$1,606,913

*Discounted using the 2024 Plan Year Effective Interest Rate plus 5% (10.10%) for the period between the due date and the date the contribution was made and the original Effective Interest Rate for the period between the beginning of the plan year and the due date.

This summary is intended as an outline of plan provisions and does not alter the intent or meaning of the provisions contained in the plan document.

Plan Sponsor: Claxton-Hepburn Medical Center
EIN/PN: 15-0559686/001

Effective Date January 1, 1969.

Year of Service:

For the purpose of determining eligibility: completion of at least 1,000 hours of service during the plan year. For the first year of service an employee must complete 1,000 hours in the first twelve months following his/her date of hire.

For the purpose of vesting: completion of at least 1,000 hours of service in any year after age 18 after August 1, 1976 plus all years credited prior to August 1, 1976.

Credited Service:

**For Bargaining
Employees:**

Prior to 8/1/1976: Credited service determined under the prior plan.

After 8/1/1976: One year of service for each year of at least 1,000 hours while a bargaining employee. If an employee works less than 1,000 hours in the first or last year of employment, a partial year of service is given.

After 12/31/2006: Credited service is frozen for SEIU 1199 employees.

After 12/31/2008: Credited service accruals are frozen for NYS Nurses Association employees.

**For Non-Bargaining
Employees:**

One year of credited service for each year of at least 1,000 hours while a non-bargaining employee. If an employee works less than 1,000 hours in the first or last year of employment, a partial year of service is credited. Service prior to January 1, 1985 for employees on Schedule A of the plan document and service prior to January 1, 1989 for employees on Schedule B is deemed to be bargaining service.

After 12/31/2006: Credited service is frozen for Non-Bargaining employees.

Compensation: Plan compensation means W-2 pay plus salary reductions for IRC 403(b), 125, 132(f)(4), 402(e)(3), 402(h) and 457(b).

Average Annual Compensation:

Average annual compensation is the average annual compensation for the five consecutive calendar years of credited service which produce the highest average. Average Annual Compensation was frozen effective when Credited Service was frozen for Bargaining employees and effective September 1, 2020 for Non-Bargaining employees.

Eligibility:

Participation

Bargaining Employees: January 1 nearest age 21 with one year of vesting service and covered by a collective bargaining agreement.

As of December 31, 2006, no new employees in SEIU 1199 are eligible to participate in the plan.

As of December 31, 2008, no new employees in the NYS Nurses Association are eligible to participate in the plan.

Non-Bargaining Employees: As of January 1, 1985, January 1 nearest age 21 with one year of vesting service and employed in a management or supervisory position.

As of January 1, 1989, January 1 nearest age 21 with one year of vesting service and not covered by a collective bargaining agreement.

As of December 31, 2006, no new Non-Bargaining employees will meet eligibility to participate in the Plan.

Normal Retirement

First of month coincident with or next following 65th birthday.

Early Retirement

If retiring early from active employment: age 55 with at least five Years of Vesting Service; if retiring early after terminating prior to age 55: age 55 with at least ten Years of Vesting Service.

Deferred Retirement

First of any month after Normal Retirement Date.

Disability Retirement

Age 40 with at least fifteen Years of Vesting Service and entitled to Social Security Disability.

Vested Termination

Five Years of Vesting Service.

**Preretirement
Survivor Annuity**

Vested and legally married at the time of death.

Amount of Pension:

Normal Retirement

Bargaining Benefit:

1% of 8/1/1969 Compensation (but not less than \$48) times Credited Service at 8/1/1969, plus

For each Year of Credited Service from 8/1/1969 to 1/1/1984, 1% of Compensation plus 0.5% of Compensation in excess of \$7,800 (but not less than \$48), plus

For a Year of Credited Service in 1984, 1% of Compensation plus 0.5% of Compensation in excess of \$7,800 plus

For each Year of service credited from 1/1/1985 to 1/1/1995, 1% of Compensation plus 0.5% of Compensation in excess of \$7,800 plus, if still actively employed on 1/1/1995, 0.5% of Compensation up to \$7,800, plus

For each Year of Credited Service on or after 1/1/1996, 1.5% of Compensation.

For each Year of Credited Service after 6/1/2005, 1.6% of Compensation for members of the NYS Nurses Association.

The above benefit cannot be less than \$120 times up to a maximum of 10 years of Credited Service (as of 1/1/1984 plus \$120 times Credited Service after 1/1/1984).

As of December 31, 2006, benefit accruals are frozen for employees in SEIU 1199.

As of December 31, 2008, benefit accruals are frozen for employees in the NYS Nurses Association.

Non-Bargaining Benefit:

1.5% of Average Annual Compensation times up to a maximum of 30 years of Credited Service, but not less than \$120 times Credited Service.

As of December 31, 2006, Credited Service is frozen; however, Average Annual Compensation may continue to increase for compensation after December 31, 2006.

As of September 1, 2020, Average Annual Compensation is frozen.

Early Retirement The Normal Retirement Benefit is reduced by 6% for each of the first five years and 3% for each of the next five years the early retirement date precedes the normal retirement date.

Deferred Retirement The greater of the Normal Retirement Benefit based on Compensation and Credited Service after Normal Retirement Date or the actuarial equivalent of the Normal Retirement Benefit.

Disability Retirement An eligible active participant's disability retirement benefit is equal to the Normal Retirement Benefit based on Credited Service and Compensation as of the date of termination reduced by \$1 per month. There is no early retirement reduction.

An eligible terminated participant's disability retirement benefit is equal to the Normal Retirement Benefit reduced by 6% for each of the first five years and 3% for each of the next five years the disability retirement date precedes the normal retirement date.

Preretirement Survivor Annuity A pension to the surviving spouse equal to the amount that would have been paid had the participant terminated on his date of death, survived to his earliest retirement date, retired with a 50% qualified joint and survivor annuity, and died on the day after he retired.

Forms of Benefit:

Normal Monthly life annuity is payable to an unmarried participant. A Qualified Joint and 50 Percent Survivor Annuity, actuarially equivalent to the life annuity, is payable to a married member unless he and his spouse elect otherwise.

Optional Forms Optional forms of benefits available at retirement include a life annuity, 75% joint and survivor, and 60, 100, 120 or 240 months certain and life annuity and are provided on the following actuarially equivalent basis:

Interest- 8.00 percent per annum.

Mortality- 1984 Unisex Pensioners Table.

Lump sums with a value of less than \$5,000 are automatically paid out of the plan upon termination.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
Cash		Savings Account	\$ 7,016	\$ 7,016
Cash equivalents				
	Federated Investors Fed Treas Obgl	Money Market Fund - 500,110 Shares	500,110	500,110
*	CBNA Daily Trust Sweep PR	Sweep Account - 551,241 Shares	551,241	551,241
	United States Treasury Bills	Treasury Bills - 550,000 Shares	536,924	546,466
Total cash equivalents			1,588,275	1,597,817
Foreign bonds and notes				
	Bank of Montreal	Bonds - 5.150%, due 11/8/2034, \$50,000 par value	49,500	47,359
Certificates of deposit				
	Capital One National	CD - 4.550%, due 6/14/2027, \$100,000	99,529	101,232
	Capital One National	CD - 4.450%, due 6/14/2028, \$100,000	99,418	101,414
	First Foundation Bank	CD - 4.650%, due 12/29/2026, \$100,000	99,650	101,186
	First South Financial	CD - 5.350%, due 11/6/2026, \$150,000	149,550	150,291
	Flagstar Bank	CD - 5.250%, due 4/24/2025, \$200,000	199,600	200,590
	HSBC Bank USA NA	CD - 4.250%, due 10/23/2028, \$200,000	198,939	201,742
	Morgan Stanley Bank	CD - 4.900%, due 3/23/2028, \$100,000	99,500	102,680
	Morgan Stanley Bank	CD - 4.900%, due 4/7/2025, \$150,000	149,700	150,232
	Morgan Stanley Private Bank	CD - 4.900%, due 3/23/2028, \$100,000	99,500	102,680
	Morgan Stanley Private Bank	CD - 4.900%, due 4/7/2025, \$150,000	149,700	150,233
Total certificates of deposit			1,345,086	1,362,280
U.S. government obligations				
	Government National Mortgage Association	Bonds - 4.00%, due 5/20/2050	44,326	38,470
	United States Treasury Note	Note - 2.00% due 8/15/2025	246,592	246,530
Total U.S. government obligations			290,918	285,000
Corporate debt securities				
	Abbvie Inc.	Bonds - 3.200%, due 5/14/2026, \$50,000 par value	48,052	49,110
	Ally Financial Inc.	Bonds - 4.750%, due 6/9/2027, \$50,000 par value	47,548	49,652
	Altria Group Inc.	Bonds - 4.500%, due 5/2/2043, \$50,000 par value	39,116	40,839
	Apache Corp	Bonds - 4.375%, due 10/15/2028, \$50,000 par value	50,207	48,248
	Ares Capital Corp	Notes - 2.150% due 7/15/2026, \$50,000 par value	43,765	47,805
Subtotal corporate debt securities			228,688	235,654

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		228,688	235,654
	Associated Banc-Corp	Notes - 4.250%, due 1/15/2025, \$50,000 par value	49,464	49,979
	Axa Equitable Holdings Inc.	Bonds - 4.350%, due 4/20/2028, \$50,000 par value	50,505	48,990
	Bank America Corp	Bonds - 5.300%, due 12/12/2036, \$100,000 par value	98,800	98,845
	Bank New York Mellon Corp	Bonds - 3.750%, due 12/31/2049, \$50,000 par value	39,473	47,254
	Bank New York Mellon Corp PRFD	Bonds - 4.700%, due 12/31/2049, \$100,000 par value	108,454	99,051
	Bank of America Corp	Bonds - 5.700%, due 3/6/2034, \$100,000 par value	99,400	100,065
	Bank of Montreal	Bonds - 5.750%, due 3/28/2029, \$50,000 par value	49,925	50,121
	Bank of Montreal	Bonds - 5.600%, due 4/9/2029, \$50,000 par value	49,825	49,186
	Barclays Bank PLC	Bonds - 5.350%, due 8/6/2029, \$100,000 par value	99,900	100,501
	Baxter International Inc.	Bonds - 6.250%, due 12/1/2037, \$75,000 par value	76,450	76,717
	Blackstone Private Credit	Bonds - 2.625%, due 12/15/2026, \$100,000 par value	85,687	95,281
	Boeing Co.	Bonds - 3.300%, due 3/1/2035, \$125,000 par value	99,086	98,178
	Brighthouse Finl Inc.	Notes - 3.700%, due 6/22/2027, \$100,000 par value	92,936	97,027
	Broadstone Net Lease Inc.	Bonds - 2.600%, due 9/15/2031, \$50,000 par value	37,479	41,304
	Buckeye Partners LP	Bonds - 3.950%, due 12/1/2026, \$50,000 par value	49,162	48,127
	Bunge LTD Fin Corp	Notes - 3.250%, due 8/15/2026, \$100,000 par value	96,570	97,687
	Cambell Soup Co.	Bonds - 4.150%, due 3/15/2028, \$50,000 par value	50,023	48,804
	Canadian Imperial Bank	Bonds - 5.550%, due 5/7/2027, \$100,000	99,700	98,739
	Cardinal Health Inc.	Notes - 3.410%, due 6/15/2027, \$50,000 par value	47,540	48,455
	Celanese US Holdings LLC	Bonds - 6.165%, due 7/15/2027, \$50,000 par value	50,171	50,758
	Citigroup Global MKTS	Bonds - 3.500%, due 6/21/2037, \$50,000 par value	49,250	43,517
	Citigroup Inc.	Bonds - 4.750%, due 9/27/2034, \$250,000	247,500	233,083
	Comerica Inc. PRFD	Bonds - 5.625%, due 12/31/2049, \$100,000 par value	104,250	99,406
	Credit Agricole CIB	Bonds - 6.000%, due 6/18/2039, \$100,000 par value	99,500	98,940
	CVS Health Corp	Bonds - 4.300%, due 3/25/2028, \$50,000 par value	50,347	48,438
	CVS Health Corp	Bonds - 5.300%, due 6/1/2033, \$50,000 par value	48,465	47,944
	Deutsche Bank	Bonds - 6.000%, due 4/24/2034, \$100,000 par value	99,000	99,654
	Energy Transfer LP PFD	Bonds - 7.125%, due 5/15/2030, \$50,000 par value	48,375	50,176
	Expedia Group Inc.	Bonds - 3.250% due 2/15/2030, \$100,000 par value	82,876	92,181
	Fedex Corp	Bonds - 3.100%, due 8/5/2029, \$50,000 par value	49,903	46,345
	Fifth Third Bankcorp PRFD	Bonds - 4.500%, due 12/31/2099, \$100,000 par value	103,733	98,613
	Fluor Corp	Bonds - 4.250%, due 9/15/2028, \$50,000 par value	49,629	47,560
	Ford Credit Note	Bonds - 6.050%, due 6/20/2031, \$100,000 par value	98,925	98,059
	Fortune Brands Home and Sec.	Bonds - 3.250% due 9/15/2029, \$100,000 par value	88,701	92,481
	General Electric Cap Corp	Bonds - 4.250%, due 9/15/2027, \$100,000 par value	87,125	97,674
	General Motors Financial	Bonds - 4.000%, due 1/15/2025, \$50,000 par value	50,015	49,979
	General Motors Financial Co. Inc.	Bonds - 2.750% due 6/20/2025, \$50,000 par value	48,770	49,510
	Goldman Sachs Group	Bonds - 5.550%, due 4/21/2031, \$100,000 par value	99,100	97,928
	Goldman Sachs Group PFD	Bonds - 4.950%, due 12/15/2049, \$75,000 par value	75,926	74,675
	Huntington Bancshares	Bonds - 5.625%, due 12/31/2049, \$100,000 par value	103,250	97,652
	Jefferies Financial Group In MTNV	Bonds - 4.500%, due 7/31/2037, \$50,000 par value	48,438	47,092
	Jefferies Group LLC	Bonds - 2.000%, due 9/14/2030 \$50,000 par value	39,352	44,151
	JP Morgan Chase & Co.	Bonds - 3.500%, due 12/21/2037, \$50,000 par value	49,865	46,638
	JP Morgan Chase & Co.	Bonds - 4.000%, due 6/12/2033, \$70,000 par value	69,510	64,548
	JP Morgan Chase & Co.	Bonds - 4.600%, due 12/31/2049, \$25,000 par value	22,125	24,888
	JP Morgan Chase & Co.	Bonds - 5.150%, due 11/14/2034, \$100,000 par value	99,400	98,087
	Kraft Heinz Food Co.	Notes - 3.000%, due 6/1/2026, \$93,000 par value	92,959	90,787
	Kyndryl Holdings, Inc.	Bonds - 3.150%, due 10/15/2031, \$50,000 par value	37,661	43,331
	Lloyds BKG Group PLC	Bonds - 3.750%, due 1/11/2027, \$100,000 par value	95,130	97,750
	M&T Bank Corp Preferred	Bonds - 5.000%, due 12/31/2049, \$100,000 par value	102,780	99,367
	Micron technology, Inc.	Bonds - 5.875%, due 2/9/2033, \$50,000 par value	48,907	51,226
	Morgan Stanley Finance LLC	Bonds - 5.000%, due 11/7/2034, \$100,000 par value	98,900	95,362
	MyLan NV	Notes - 3.950%, due 6/15/2026, \$50,000 par value	47,970	49,212
	Subtotal corporate debt securities		4,196,875	4,196,977

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		4,196,875	4,196,977
	National Bank of Canada	Bonds - 5.650%, due 3/12/2029, \$100,000 par value	99,750	97,502
	Newell Brands Inc.	Notes - 5.700%, due 4/1/2026, \$30,000 par value	28,598	29,987
	Oracle Corp	Bonds - 2.950%, due 4/1/2030, \$100,00 par value	91,548	90,325
	Phillips 66 Partners LP	Bonds - 3.750%, due 3/1/2028, \$50,000 par value	48,874	46,589
	Prospect Capital Corp	Bonds - 3.706%, due 1/22/2026, \$100,000 par value	94,570	97,074
	Prudential Financial Inc. PFD	Bonds - 3.700%, due 10/1/2050, \$100,000 par value	104,977	88,963
	Regions Financial Corp	Bonds - 5.750%, due 12/31/2049, \$150,000 par value	160,195	148,746
	Santander Holdings USA Inc.	Notes - 4.400%, due 7/13/2027, \$50,000 par value	50,361	49,420
	Schwab Charles Corp PRFD	Bonds - 4.000%, due 12/1/2040, \$150,000 par value	157,875	129,495
	Simon Property Group Inc.	Bonds - 3.500%, due 9/1/2025, \$50,000 par value	50,085	49,650
	Southern Co.	Notes - 4.000%, due 1/15/2051, \$100,000 par value	104,147	97,994
	Southwest Airlines Co.	Bonds - 7.375%, due 3/1/2027, \$100,000 par value	104,644	104,383
	Tanger PPTYS LTD Partnership	Notes - 3.875%, due 7/15/2027, \$100,000 par value	99,120	97,087
	Teva Pharmaceutical	Bonds - 3.150%, due 10/1/2026, \$100,000 par value	93,152	96,090
	Texas Cap Bancshares Inc.	Bonds - 4.000%, due 5/6/2031, \$50,000 par value	50,686	48,025
	Toronto-Dominion Bank	Bonds - 5.600%, due 3/15/2029, \$100,000 par value	99,700	100,242
	Truist Finl Corp Preferred	Bonds - 4.800%, due 12/31/2099, \$150,000 par value	142,615	149,187
	United Airlines Holdings Inc.	Bonds - 4.875%, due 1/15/2025, \$50,000 par value	50,113	49,879
	US Bancorp	Bonds - 5.250%, due 11/7/2034, \$100,000 par value	99,000	97,280
	US Bancorp	Bonds - 5.350%, due 12/19/2034, \$100,000 par value	99,400	99,354
	Viacom Inc.	Bonds - 6.875%, due 4/30/2036, \$50,000 par value	50,477	50,637
	VMWARE Inc.	Bonds - 3.900%, due 8/21/2027, \$50,000 par value	48,850	48,874
	Wells Fargo & Company	Bonds - 5.550%, due 3/6/2034, \$100,000 par value	98,900	100,317
	Wells Fargo & Co.	Bonds - 5.150%, due 12/16/2034, \$100,000 par value	99,000	97,062
	Total corporate debt securities		6,323,512	6,261,138
	Mutual and exchange-traded funds			
	ABRDN Asia Pacific Inc Fund	Mutual Fund - 22,500 Shares	353,108	331,200
	Alliance Bernstein Global High Income FD	Mutual Fund - 30,000 Shares	317,665	321,900
	American Funds Europacific Growth F2	Mutual Fund - 1,688 Shares	89,118	90,402
	American Funds New World F2	Mutual Fund - 2,678 Shares	168,793	205,596
	Blackrock Global Division Trust	Mutual Fund - 8,000 Shares	65,394	86,160
	Blackrock Multi-Sector Inc.	Bond - 4,000 Shares	52,334	58,400
	Blackrock RES & Commodities	Equity - 30,000 Shares	165,489	256,200
	Blackrock Science & Tech ETF	Exchange-Traded Fund - 2,500 Shares	41,893	91,400
	Clearbridge Energy MLP	Exchange-Traded Fund - 4,000 Shares	24,828	186,160
	Columbia Seligm Prem Tech GR	Mutual Fund - 1,501 Shares	26,990	47,949
	Invesco Aerospace & Defense ETF	Exchange-Traded Fund - 1,500 Shares	78,174	172,095
	Invesco NASDAQ 100 ETF	Exchange-Traded Fund - 1,000 Shares	112,825	210,450
	Invesco Oppenheimer Developing Mkt Y	Mutual Fund - 1,958 Shares	76,224	74,577
	Invesco QQQ Trust	Exchange-Traded Fund - 300 Shares	87,072	153,369
	Ishares Core S&P Midcap ETF	Exchange-Traded Fund - 24,000 Shares	818,417	1,495,440
	Ishares Core S&P Smallcap ETF	Exchange-Traded Fund - 9,500 Shares	653,687	1,094,590
	Ishares NASDAQ Biotechnology ETF	Exchange-Traded Fund - 4,100 Shares	426,659	542,061
	Ishares Ultra Short-Term BD	Exchange-Traded Fund - 13,500 Shares	680,758	680,805
	Ishares US Real Estate	Exchange-Traded Fund - 1,200 Shares	98,950	111,672
	Subtotal mutual and exchange-traded funds		4,338,378	6,210,426

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		4,338,378	6,210,426
	Ishares US Preferred Stock	Exchange-Traded Fund - 30,000 Shares	941,573	943,200
	Ishares US Regional Banks ETF	Exchange-Traded Fund - 5,500 Shares	167,150	276,980
	Kraneshares China Internet	Equity - 3,500 Shares	93,870	102,340
	Neuberger Berman Genesis I	Mutual Fund - 1,534 Shares	83,841	100,332
	Neuberger Berman Next Generation	Mutual Fund - 8,000 Shares	67,760	101,920
	Select Sector SPDR TR Communication	Equity - 4,000 Shares	187,917	387,240
	SPDR BBB Convert SECS ETF	Exchange-Traded Fund - 5,000 Shares	236,803	389,450
	SPDR Financial Select Sector	Equity - 4,000 Shares	92,596	193,320
	Tekla Healthcare Opportunity	Mutual Fund - 4,000 Shares	69,319	75,480
	Vanguard Communication Services	Equity - 1,000 Shares	83,523	154,960
	Vanguard Consumer Staples	Equity - 600 Shares	79,164	126,828
	Vanguard Energy ETF	Exchange-Traded Fund - 1,900 Shares	114,706	230,489
	Vanguard Growth ETF	Exchange-Traded Fund - 3,000 Shares	425,917	1,231,320
	Vanguard Healthcare ETF	Exchange-Traded Fund - 500 Shares	128,002	126,845
	Vanguard High Dividend Yield	Equity - 500 Shares	41,964	63,795
	Vanguard Industrials ETF	Exchange-Traded Fund - 300 Shares	47,812	76,317
	Vanguard S&P 500 ETF	Exchange-Traded Fund - 6,500 Shares	1,396,078	3,502,265
	Vanguard Smallcap ETF	Exchange-Traded Fund - 500 Shares	77,027	120,140
	Wells Fargo Multi Sector Inc.	Mutual Fund - 15,000 Shares	186,750	183,800
	Total mutual and exchange-traded funds		8,860,150	14,597,447
	Common and preferred stock			
	3M Company	Common Stock - 1,200 Shares	113,112	154,908
	Abbott Laboratories	Common Stock - 358 Shares	37,193	40,493
	Abbvie Inc.	Common Stock - 400 Shares	29,798	71,080
	Albemarle Corp	Common Stock - 547 Shares	48,915	47,086
	Alphabet Inc. Class A	Common Stock - 1,258 Shares	127,217	238,139
	Alphabet Inc. Class C	Common Stock - 600 Shares	37,335	114,264
	Amazon.com Inc.	Common Stock - 800 Shares	30,975	175,512
	Ameren Corporation	Common Stock - 490 Shares	36,954	43,679
	American States Water	Common Stock - 504 Shares	40,494	39,171
	Ameriprise Financial Inc	Common Stock - 250 Shares	105,485	133,108
	Amgen Inc.	Common Stock - 800 Shares	167,473	208,512
	Apple Inc.	Common Stock - 1,890 Shares	102,113	473,294
	Arrow Electronics Inc	Common Stock - 662 Shares	80,916	74,885
	Astrazeneca PLC ADR	Common Stock - 1,215 Shares	76,753	79,607
	Ball Corp	Common Stock - 645 Shares	40,629	35,559
	Bank of America Corporation	Common Stock - 3,000 Shares	69,218	131,850
	Berkshire Hathaway Inc. B	Common Stock - 582 Shares	144,814	263,809
	Booking Holdings Inc.	Common Stock - 25 Shares	41,093	124,211
	Bristol Myers Squibb Company	Common Stock - 1,600 Shares	74,193	90,496
	Broadcom Inc.	Common Stock - 650 Shares	34,395	150,696
	Builders Firstsource Inc	Common Stock - 246 Shares	40,120	35,161
	Capital One Financial	Common Stock - 311 Shares	45,140	55,458
	Chubb LTD	Common Stock - 144 Shares	37,745	39,787
	Subtotal common and preferred stock		1,562,080	2,820,765

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		1,562,080	2,820,765
	Carnival Corp	Common Stock - 3,000 Shares	28,947	74,760
	Cigna Corp	Common Stock - 317 Shares	74,576	87,536
	CSX Corp	Common Stock - 1,247 Shares	42,245	40,241
	Cisco Systems Inc.	Common Stock - 2,000 Shares	63,488	118,400
	Coca Cola Company	Common Stock - 2,000 Shares	93,074	124,520
	Constellation Brands Inc	Common Stock - 167 Shares	40,908	36,907
	Cooper Cos Inc	Common Stock - 387 Shares	35,286	35,577
	Crown Castle International	Common Stock - 800 Shares	69,573	72,608
	Danaher Corp	Common Stock - 153 Shares	40,724	35,121
	Dell Technologies Inc.	Common Stock - 700 Shares	14,681	80,668
	Diamondback Energy, Inc.	Common Stock - 244 Shares	47,676	39,975
	Dollar General Corp	Common Stock - 2,032 Shares	157,742	154,066
	Edwards Lifesciences Corp	Common Stock - 1,400 Shares	79,856	103,642
	Eli Lilly and Company	Common Stock - 150 Shares	36,204	115,800
	Emerson Electric Co.	Common Stock - 800 Shares	47,298	99,144
	EOG Resources Inc	Common Stock - 349 Shares	43,552	42,780
	Exelon Corp	Common Stock - 2,500 Shares	82,670	94,100
	Expedia Inc.	Common Stock - 500 Shares	48,755	93,165
	Exxon Mobil Corp	Common Stock - 1,373 Shares	101,170	147,694
	Fedex Corp	Common Stock - 350 Shares	53,124	98,466
	Five Below Inc	Common Stock - 1,000 Shares	75,759	104,960
	Fox Corp CL B	Common Stock - 2,500 Shares	68,389	114,350
	Freeport McMoran Inc	Common Stock - 1,045 Shares	46,624	39,794
	Gaming & Leisure Properties	Common Stock - 801 Shares	38,958	38,576
	GE Aerospace	Common Stock - 700 Shares	32,480	116,753
	GE Healthcare Tech	Common Stock - 1,200 Shares	72,917	93,816
	GE Vernova Inc	Common Stock - 250 Shares	18,546	82,233
	General Dynamics Corp	Common Stock - 500 Shares	84,761	131,745
	Gilead Sciences Inc.	Common Stock - 600 Shares	39,057	55,422
	Goldman Sachs Group Inc.	Common Stock - 100 Shares	31,585	57,262
	Hershey Co	Common Stock - 205 Shares	38,819	34,717
	Home Depot Inc.	Common Stock - 626 Shares	170,185	243,508
	Honeywell Intl Inc.	Common Stock - 1,200 Shares	217,827	271,068
	Huntington Ingalls Inds Inc	Common Stock - 313 Shares	83,796	59,148
	Intl Business Machines Corp	Common Stock - 500 Shares	56,179	109,915
	JPMorgan Chase & Co.	Common Stock - 2,114 Shares	256,059	506,747
	Keycorp	Common Stock - 2,644 Shares	42,039	45,318
	Kraft Heinz Company	Common Stock - 2,400 Shares	74,916	73,704
	Kroger Company	Common Stock - 1,000 Shares	25,857	61,150
	L3Harris Technologies, Inc.	Common Stock - 500 Shares	90,168	105,140
	Labcorp Holdings Inc	Common Stock - 150 Shares	16,432	34,398
	Lowes Companies Inc.	Common Stock - 500 Shares	37,458	123,400
	Lululemon Athletica Inc	Common Stock - 200 Shares	51,905	76,482
	Mastercard Inc. Class A	Common Stock - 250 Shares	83,705	131,643
	McDonalds Corp	Common Stock - 600 Shares	145,403	173,934
	Meta Platforms Inc.	Common Stock - 250 Shares	33,063	146,378
	Mellife Inc.	Common Stock - 1,500 Shares	99,461	122,820
	Micron Technology	Common Stock - 1,787 Shares	109,227	150,394
	Microsoft Corp	Common Stock - 375 Shares	40,353	158,063
	Mondelez Intl Inc. CL A	Common Stock - 800 Shares	33,977	47,784
	Morgan Stanley	Common Stock - 1,000 Shares	43,327	125,720
	Subtotal common and preferred stock		5,022,861	8,152,277

The accompanying notes are an integral part of these schedules.

RETIREMENT PLAN FOR EMPLOYEES OF CLAXTON-HEPBURN MEDICAL CENTER

EMPLOYER IDENTIFICATION NUMBER 15-0559686

PLAN NUMBER 001

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost	Current Value
	Balances carried forward		5,022,861	8,152,277
	Nextera Energy Inc.	Common Stock - 3,911 Shares	206,066	280,380
	Northrop Grumman Corp	Common Stock - 80 Shares	35,271	37,543
	NVIDIA Corporation	Common Stock - 1,900 Shares	7,497	255,151
	JD.Com Inc.	Common Stock - 1,000 Shares	26,586	34,670
	Medtronic PLC	Common Stock - 1,200 Shares	94,863	95,856
	National Grid PLC ADR	Common Stock - 1,500 Shares	87,764	89,130
	Nestle SA ADR	Common Stock - 500 Shares	38,668	41,313
	Novo Nordisk A/S ADR	Common Stock - 500 Shares	49,325	43,010
	Occidental Petroleum Corp	Common Stock - 1,000 Shares	57,547	49,410
	Oracle Corp	Common Stock - 800 Shares	31,251	133,312
	Palo Alto Networks Inc.	Common Stock - 700 Shares	16,959	127,372
	Pepsico Inc.	Common Stock - 700 Shares	96,842	106,442
	Procter & Gamble Co.	Common Stock - 400 Shares	40,356	67,060
	Prologis Inc	Common Stock - 317 Shares	39,714	33,507
	Qualcomm Inc.	Common Stock - 600 Shares	37,622	92,172
	Regeneron Pharmaceuticals	Common Stock - 37 Shares	39,443	26,356
	Rockwell Automation Inc	Common Stock - 160 Shares	43,695	45,726
	RTX Corp	Common Stock - 1,000 Shares	63,901	115,720
	Salesforce.com Inc.	Common Stock - 500 Shares	54,164	167,165
	Softbank Group Corp ADR	Common Stock - 2,500 Shares	50,206	73,055
	Southern Company	Common Stock - 600 Shares	27,368	49,392
	Starbucks Corp	Common Stock - 2,900 Shares	222,988	264,621
	State Street Corp	Common Stock - 1,200 Shares	69,339	117,780
	Sysco Corp	Common Stock - 1,200 Shares	73,036	91,752
	Target Corp	Common Stock - 700 Shares	60,075	94,626
	Texas Instruments Inc.	Common Stock - 700 Shares	63,080	131,257
	Thermo Fisher Scientific Inc	Common Stock - 67 Shares	37,171	34,855
	TJX Companies	Common Stock - 1,155 Shares	73,022	139,536
	Trimble Navigation	Common Stock - 758 Shares	43,367	53,560
	Ulta Beauty Inc.	Common Stock - 250 Shares	65,603	108,733
	Union Pacific Corp	Common Stock - 400 Shares	60,881	91,216
	United Parcel Service CL B	Common Stock - 1,000 Shares	121,129	126,100
	UnitedHealth Group Inc.	Common Stock - 200 Shares	39,545	101,172
	Universal Ins Holdings Inc.	Common Stock - 2,500 Shares	30,890	52,650
	Visa Inc. Class A	Common Stock - 900 Shares	135,864	284,436
	Wal Mart Stores Inc.	Common Stock - 1,500 Shares	48,024	135,525
	Walt Disney Co.	Common Stock - 1,200 Shares	103,828	133,620
	Wesco Intl Inc. PDF	Preferred Stock - 2,000 Shares	56,200	51,040
	Xcel Energy Inc.	Common Stock - 1,500 Shares	93,723	101,280
	Xylem Inc	Common Stock - 321 Shares	44,806	37,242
	Zimmer Holdings Inc.	Common Stock - 300 Shares	33,667	31,689
	Total common and preferred stock		7,644,207	12,298,709
			\$ 26,108,664	\$ 36,456,766

* Denotes a party in interest.

The accompanying notes are an integral part of these schedules.

Retirement Plan for Employees of Claxton-Hepburn Medical Center
Schedule SB, Line 32 - Schedule of Amortization Bases
EIN/PN: 15-0559686/001

AMORTIZATION SCHEDULE

Amortization Schedule as of January 1, 2024					
Year Established	Initial Period	Initial Amount	Remaining Period	Remaining Amount	Annual Payment
2024	15 Years	\$ 17,350	15 Years	\$ 17,350	\$ 1,579
2023	15 Years	\$ 2,278,782	14 Years	\$ 2,186,581	\$ 208,693
2022	15 Years	(\$ 1,915,082)	13 Years	(\$ 1,758,884)	(\$ 176,975)
2021	15 Years	\$ 459,979	12 Years	\$ 402,016	\$ 42,889
2020	15 Years	(\$ 1,397,493)	11 Years	(\$ 1,152,081)	(\$ 131,206)
2019	15 Years	\$ 10,414,795	10 Years	\$ 7,856,667	\$ 962,933
Total				\$ 7,551,649	\$ 907,913